

OHIO

SENATE

JOURNAL

WEDNESDAY, MAY 20, 2020

ONE HUNDRED EIGHTY-FOURTH DAY
Senate Chamber, Columbus, Ohio
Wednesday, May 20, 2020, 1:30 p.m.

The Senate met pursuant to adjournment.

Prayer was offered by Pastor Brad Jury, Providence Baptist Church in Westerville, Ohio, followed by the Pledge of Allegiance to the Flag.

The journal of the last legislative day was read and approved.

The following guests were recognized by the Senate prior to the commencement of business:

Senator Steve Huffman recognized the week of May 17-23 as National EMS Week.

Senator Roegner requested a Moment of Silence for former State Representative Andy Thompson who passed away on May 13.

**REPORTS OF REFERENCE AND BILLS FOR SECOND
CONSIDERATION**

Senator Obhof reports for the standing committee on Rules and Reference, recommending that the following bills and resolution, standing in order for second consideration, be referred to committee as recommended:

Sub. H. B. No. 38 -Representative Hillyer, et al.

To amend sections 1321.52, 1322.01, 1322.07, 1322.09, 1322.12, 1322.29, 1349.72, and 2913.11; to enact section 1319.17; and to repeal section 1349.16 of the Revised Code relating to commercial credit reports, the General Loan Law, and the Residential Mortgage Loan Law.

To the Committee on Insurance and Financial Institutions.

H. B. No. 111 -Representative Ingram, et al.

To amend sections 3314.03, 3326.11, and 3328.24 and to enact section 3319.324 of the Revised Code to require that public and private schools transmit a transferred student's records within five school days.

To the Committee on Education.

H. B. No. 325 -Representatives Miller, J., Howse, et al.

To enact section 5.293 of the Revised Code to designate February 18 as "Toni Morrison Day."

To the Committee on General Government and Agency Review.

S. C. R. No. 13 -Senator Johnson

To resolve that no branch of government, be it executive, legislative, or judicial, nor any subordinate department, agency, or entity thereof, may take or otherwise promulgate actions that exceed its authority to do so as expressly granted under the Ohio Constitution or United States Constitution.

To the Committee on General Government and Agency Review.

S. B. No. 311 -Senators McColley, Roegner, et al.

To amend sections 101.35 and 3701.13 and to enact section 101.36 of the Revised Code to rescind certain orders of the Director of Health regarding COVID-19, to require the approval of the Joint Committee on Agency Rule Review for Department of Health orders to be effective for more than fourteen days, to require statewide Department of Health orders to include the Governor's signature, to modify the Department's rulemaking authority, to allow in-person high school graduation ceremonies, and to declare an emergency.

To the Committee on Health, Human Services and Medicaid.

S. B. No. 312 -Senator McColley

To amend sections 2151.07, 2301.02, and 2301.03 and to enact section 2101.027 of the Revised Code to reallocate jurisdictional responsibilities of current judges of the Hardin County Court of Common Pleas and to create the Domestic Relations Division of the Hardin County Court of Common Pleas.

To the Committee on Judiciary.

S. B. No. 313 -Senator Johnson

To amend Section 265.210 of H.B. 166 of the 133rd General Assembly to require the Department of Education to make an additional payment in fiscal year 2020 or 2021 to certain school districts that experience a decrease in the taxable value of the district's utility tangible personal property.

To the Committee on Finance.

S. B. No. 314 -Senator Brenner

To prohibit state agencies from charging a fee to professional license holders in relation to a business relocation during the COVID-19 declared state of emergency and to declare an emergency.

To the Committee on General Government and Agency Review.

YES - 13: DAVE BURKE, WILLIAM P. COLEY, II, MATT DOLAN, JOHN EKLUND, JAY HOTTINGER, MATT HUFFMAN, STEPHANIE KUNZE, SEAN J. O'BRIEN, LARRY OBHOF, BOB PETERSON, CECIL THOMAS, SANDRA R. WILLIAMS, STEVE WILSON

NO - 0.

The question being, "Shall the report of the committee be accepted?"

The report of the committee was accepted.

Said bills and resolution were considered a second time and referred to committee as recommended.

REPORTS OF STANDING AND SELECT COMMITTEES

Senator Eklund submitted the following report:

The standing committee on Judiciary, to which was referred **H. B. No. 272**-Representatives Oelslager, Hillyer, et al., having had the same under consideration, reports it back and recommends its passage.

YES - 9: JOHN EKLUND, NATHAN H. MANNING, WILLIAM P. COLEY, II, MATT HUFFMAN, THERESA GAVARONE, TERESA FEDOR, CECIL THOMAS, ROB MCCOLLEY, SEAN J. O'BRIEN

NO - 0.

Senator Huffman, S. submitted the following report:

The standing subcommittee on Finance - Health and Medicaid, to which was referred **H. B. No. 287**-Representatives Russo, Perales, et al., having had the same under consideration, reports it back and recommends its passage.

Co-Sponsors: Hackett, Coley, Huffman, S.

YES - 8: KRISTINA D. ROEGNER, TERRY JOHNSON, NICKIE J.

ANTONIO, BOB D. HACKETT, CECIL THOMAS,
WILLIAM P. COLEY, II, STEPHEN A. HUFFMAN, DAVE
BURKE

NO - 0.

Senator Huffman, S. submitted the following report:

The standing subcommittee on Finance - Health and Medicaid, to which was referred **S. B. No. 258**-Senator Gavarone having had the same under consideration, reports it back and recommends its passage.

Co-Sponsors: Roegner, Hackett, Coley, Huffman, S.

YES - 8: KRISTINA D. ROEGNER, TERRY JOHNSON, NICKIE J.
ANTONIO, BOB D. HACKETT, CECIL THOMAS,
WILLIAM P. COLEY, II, STEPHEN A. HUFFMAN, DAVE
BURKE

NO - 0.

Senator Schuring submitted the following report:

The standing committee on General Government and Agency Review, to which was referred **S. B. No. 248**-Senator Schaffer, et al., having had the same under consideration, reports it back and recommends its passage.

Co-Sponsors: Hoagland, Schuring.

YES - 8: SEAN J. O'BRIEN, VERNON SYKES, TIM SCHAFFER,
FRANK HOAGLAND, LOUIS W. BLESSING, III,
HEARCEL F. CRAIG, MICHAEL A. RULLI, KIRK
SCHURING

NO - 0.

The question being, "Shall the reports of the committee be accepted?"

The reports of the committee were accepted.

Senator Obhof submitted the following report:

The standing committee on Rules and Reference to which were referred the appointments by the Governor of:

Rinebolt, David C., J.D., from Columbus, Franklin County, Ohio, as a Member of the Public Benefits Advisory Board for a term beginning January 14, 2020, ending at the close of business June 30, 2022, replacing Christopher Joseph Allwein, whose term expired.

Shamblin, Brenda Sue, from Amanda, Fairfield County, Ohio, as a Member of the Public Benefits Advisory Board for a term beginning January 14, 2020, ending at the close of business June 30, 2022, replacing John D. Igoe, whose term expired.

Tracy, Elizabeth E., Republican, from New Albany, Franklin County, Ohio, as a Member of the Ethics Commission for a new term beginning January 9, 2020, ending at the close of business January 1, 2026, replacing Elizabeth E. Tracy, whose term expired.

Having had the same under consideration, reports back the recommendation that the Senate advise and consent to said appointments.

YES – 13: DAVE BURKE, WILLIAM P. COLEY, II, MATT DOLAN, JOHN EKLUND, JAY HOTTINGER, MATT HUFFMAN, STEPHANIE KUNZE, SEAN J. O'BRIEN, LARRY OBHOF, BOB PETERSON, CECIL THOMAS, SANDRA R. WILLIAMS, STEVE WILSON

NO – 0.

The question being, "Shall the Senate advise and consent to the appointments by the Governor?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the Senate advised and consented to said appointments.

HOUSE AMENDMENTS TO SENATE BILLS AND RESOLUTIONS

The amendments of the House of Representatives to:

Sub. S. B. No. 1-Senators McColley, Roegner.

Cosponsors: Senators Obhof, Brenner, Coley, Hackett, Hoagland, Hottinger, Huffman, S., Huffman, M., Lehner, Rulli, Peterson, Wilson, Terhar, Gavarone, Manning, Schaffer, Schuring, Uecker. Representatives Wiggam, Becker, Hambley, Smith, T., Baldrige, Cross, Ghanbari, Green, Holmes, A., Jones, LaRe, McClain, Merrin, Plummer, Powell, Roemer, Seitz, Stein, Stoltzfus, Wilkin.

To amend sections 101.35, 106.021, 106.03, 106.031, 121.95, and 3701.13 and to enact sections 101.354, 101.355, 101.36, 107.57, 121.031, 121.951, 121.952, and 121.953 of the Revised Code to require certain agencies to reduce the number of regulatory restrictions in their administrative rules, to require the approval of the Joint Committee on Agency Rule Review for Department of Health orders to be effective for more than fourteen days, and to modify the Department's rulemaking authority, having been informally passed, were taken up.

The question being, "Shall the Senate concur in the amendments of the House of Representatives?"

The yeas and nays were taken and resulted – yeas 0, nays 32, as follows:

Those who voted in the negative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So, the Senate did not concur in the amendments of the House of Representatives.

The amendments of the House of Representatives to:

Am. Sub. S. B. No. 55-Senator Gavarone.

Cosponsors: Senators Fedor, O'Brien, Coley, Brenner, Hackett, Hoagland, Huffman, S., McColley, Roegner, Rulli, Schaffer, Schuring, Terhar, Uecker, Wilson. Representatives Butler, Cupp, Manning, D., Smith, T., Abrams, Baldridge, Carruthers, Cross, Ghanbari, Holmes, A., Jones, LaRe, Lipps, McClain, Merrin, Plummer, Roemer, Rogers, Seitz, Stein, Wiggam, Wilkin.

To amend sections 2925.01, 2925.03, 3701.99, 3707.99, and 3709.99 of the Revised Code to enhance penalties for certain drug trafficking offenses committed in the vicinity of a substance addiction services provider, to modify penalties for violations of public health orders related to a pandemic, and to designate certain provisions as the "Relapse Reduction Act.", having been informally passed, were taken up.

Senator Peterson moved that the amendments of the House of Representatives to **Am. Sub. S. B. No. 55**, be informally passed and retain their place on the calendar.

The question being, "Shall the motion be agreed to?"

The motion was agreed to.

BILLS FOR THIRD CONSIDERATION**Am. Sub. H. B. No. 81**-Representative Perales.

Cosponsors: Representatives Miller, A., O'Brien, Riedel, Romanchuk, Scherer, Seitz, Weinstein, Abrams, Baldrige, Blair, Boggs, Brent, Brown, Callender, Carruthers, Cera, Clites, Crawley, Cross, Crossman, Dean, Edwards, Fraizer, Ghanbari, Ginter, Green, Grendell, Hambley, Hillyer, Hoops, Ingram, Jones, Keller, Kelly, Kick, Lanese, Lang, LaRe, Leland, Lepore-Hagan, Liston, Manning, D., Manning, G., McClain, Miller, J., Miranda, Oelslager, Patterson, Plummer, Roemer, Rogers, Russo, Smith, K., Smith, T., Sobecki, Stephens, Stoltzfus, Strahorn, Sweeney, West, Wiggam.

To amend sections 4113.21, 4123.026, 4123.52, 4123.56, 4123.58, 4123.65, and 4123.66 and to enact section 4121.471 of the Revised Code regarding employee medical examinations and changes to the Worker's Compensation Law, was considered the third time.

The question being, "Shall the bill, **Am. Sub. H. B. No. 81**, pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Hackett moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Burke, Craig, Dolan, Eklund, Fedor, Gavarone, Hoagland, Huffman, S., Johnson, Kunze, Lehner, Maharath, Manning, McColley, Obhof, O'Brien, Peterson, Rulli, Schaffer, Schuring, Thomas, Williams, Wilson."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

Am. H. B. No. 203-Representative Lipps.

Cosponsors: Representatives Carfagna, Smith, R., Seitz, Smith, K., LaTourette, Dean, Rogers, Becker, Clites, Grendell, Lepore-Hagan, Plummer, Russo, West, Brown, Carruthers, Crossman, Cupp, Denson, Galonski, Ginter, Green, Greenspan, Hambley, Ingram, Jones, Lanese, Lang, Leland, Liston, Manning, G., Miller, J., O'Brien, Oelslager, Patterson, Patton, Roemer, Sheehy, Sobecki, Stein, Swearingen, Upchurch, Wiggam.

To amend sections 4715.14, 4715.30, and 4715.36 and to enact sections 4715.70, 4715.71, and 4715.72 of the Revised Code to specify requirements for the operation of mobile dental facilities, was considered the third time.

The question being, "Shall the bill, **Am. H. B. No. 203**, pass?"

Senator Huffman, S. moved to amend as follows:

In line 1 of the title, after "sections" insert "1751.91, 3923.89,"; delete the first "and"; after "4715.36" insert ", 4723.28, 4729.01, 4729.39, 4730.25, and 5164.14"

In line 4 of the title, after "facilities" insert "and to authorize pharmacists to enter consult agreements with certain physician assistants and advanced practice registered nurses"

In line 5, after "sections" insert "1751.91, 3923.89,"; delete "and"; after "4715.36" insert ", 4723.28, 4729.01, 4729.39, 4730.25, and 5164.14"

After line 7, insert:

"Sec. 1751.91. A health insuring corporation may provide payment or reimbursement to a pharmacist for providing a health care service to a patient if both of the following are the case:

(A) The pharmacist provided the health care service to the patient in accordance with Chapter 4729. of the Revised Code, including any of the following services:

(1) Managing drug therapy under a consult agreement ~~with a physician~~ pursuant to section 4729.39 of the Revised Code;

(2) Administering immunizations in accordance with section 4729.41 of the Revised Code;

(3) Administering drugs in accordance with section 4729.45 of the Revised Code.

(B) The patient's individual or group health insuring corporation policy, contract, or agreement provides for payment or reimbursement of the service.

Sec. 3923.89. A sickness and accident insurer or public employee benefit plan may provide payment or reimbursement to a pharmacist for providing a health care service to a patient if both of the following are the

case:

(A) The pharmacist provided the health care service to the patient in accordance with Chapter 4729. of the Revised Code, including any of the following services:

(1) Managing drug therapy under a consult agreement ~~with a physician~~ pursuant to section 4729.39 of the Revised Code;

(2) Administering immunizations in accordance with section 4729.41 of the Revised Code;

(3) Administering drugs in accordance with section 4729.45 of the Revised Code.

(B) The patient's individual or group policy of sickness and accident insurance or public employee benefit plan provides for payment or reimbursement of the service."

After line 496, insert:

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

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

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

(2) Engaging in the practice of nursing or engaging in practice as a dialysis technician, having failed to renew a nursing license or dialysis technician certificate issued under this chapter, or while a nursing license or dialysis technician certificate is under suspension;

(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;

(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;

(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;

(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;

(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 conviction for, an act in the course of practice in another jurisdiction that would constitute a misdemeanor in Ohio;

(8) Self-administering or otherwise taking into the body any dangerous drug, as defined in section 4729.01 of the Revised Code, in any way that is not in accordance with a legal, valid prescription issued for that individual, or self-administering or otherwise taking into the body any drug that is a schedule I controlled substance;

(9) Habitual or excessive use of controlled substances, other habit-forming drugs, or alcohol or other chemical substances to an extent that impairs the individual's ability to provide safe nursing care or safe dialysis care;

(10) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care or safe dialysis care because of the use of drugs, alcohol, or other chemical substances;

(11) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care or safe dialysis care because of a physical or mental disability;

(12) Assaulting or causing harm to a patient or depriving a patient of the means to summon assistance;

(13) Misappropriation or attempted misappropriation of money or anything of value in the course of practice;

(14) Adjudication by a probate court of being mentally ill or mentally incompetent. The board may reinstate the person's nursing license or dialysis technician certificate upon adjudication by a probate court of the person's restoration to competency or upon submission to the board of other proof of competency.

(15) The suspension or termination of employment by the United States department of defense or department of veterans affairs for any act that violates or would violate this chapter;

(16) Violation of this chapter or any rules adopted under it;

(17) Violation of any restrictions placed by the board on a nursing license or dialysis technician certificate;

(18) Failure to use universal and standard precautions established by rules adopted under section 4723.07 of the Revised Code;

(19) Failure to practice in accordance with acceptable and prevailing standards of safe nursing care or safe dialysis care;

(20) In the case of a registered nurse, engaging in activities that exceed the practice of nursing as a registered nurse;

(21) In the case of a licensed practical nurse, engaging in activities that exceed the practice of nursing as a licensed practical nurse;

(22) In the case of a dialysis technician, engaging in activities that exceed those permitted under section 4723.72 of the Revised Code;

(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;

(24) In the case of an advanced practice registered nurse, except as provided in division (M) of this section, either of the following:

(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 care services from that provider;

(b) Advertising that the nurse will waive 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.

(25) Failure to comply with the terms and conditions of participation in the substance use disorder monitoring program established under section 4723.35 of the Revised Code;

(26) Failure to comply with the terms and conditions required under the practice intervention and improvement program established under section 4723.282 of the Revised Code;

(27) In the case of an advanced practice registered nurse:

(a) Engaging in activities that exceed those permitted for the nurse's nursing specialty under section 4723.43 of the Revised Code;

(b) Failure to meet the quality assurance standards established under section 4723.07 of the Revised Code.

(28) In the case of an advanced practice registered nurse other than a certified registered nurse anesthetist, failure to maintain a standard care arrangement in accordance with section 4723.431 of the Revised Code or to practice in accordance with the standard care arrangement;

(29) In the case of an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, failure to prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code;

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

(31) Failure to establish and maintain professional boundaries with a patient, as specified in rules adopted under section 4723.07 of the Revised Code;

(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:

(a) Sexual contact, as defined in section 2907.01 of the Revised Code;

(b) Verbal behavior that is sexually demeaning to the patient or may be reasonably interpreted by the patient as sexually demeaning.

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

(34) Failure to comply with the requirements in section 3719.061 of the Revised Code before issuing for a minor a prescription for an opioid analgesic, as defined in section 3719.01 of the Revised Code;

(35) 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;

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

(37) In the case of an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, failure to comply with the terms of a consult agreement entered into with a pharmacist pursuant to section 4729.39 of the Revised Code.

(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.

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

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

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

If the board takes action on the basis of a conviction, plea, or a judicial finding as described in divisions (B)(3) to (7) of this section that is overturned on appeal, the registered nurse, licensed practical nurse, or dialysis technician may, on exhaustion of the appeal process, petition the board for reconsideration of its action. On receipt of the petition and supporting court documents, the board shall temporarily rescind its action. If the board determines that the decision on appeal was a decision on the merits, it shall permanently rescind its action. If the board determines that the decision on appeal was not a decision on the merits, it shall conduct an adjudication to determine whether the registered nurse, licensed practical nurse, or dialysis technician committed the act on which the original conviction, plea, or judicial finding was based. If the board determines on the basis of the adjudication that the registered nurse, licensed practical nurse, or dialysis technician committed such act, or if the registered nurse, licensed practical nurse, or dialysis technician does not request an adjudication, the board shall reinstate its action; otherwise, the board shall permanently rescind its action.

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

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) The board may investigate an individual's criminal background in performing its duties under this section. As part of such investigation, the board may order the individual to submit, at the individual's expense, a request to the bureau of criminal identification and investigation for a criminal records check and check of federal bureau of investigation records in accordance with the procedure described in section 4723.091 of the Revised Code.

(G) During the course of an investigation conducted under this section, the board may compel any registered nurse, licensed practical nurse, or dialysis technician or applicant under this chapter to submit to a mental or physical examination, or both, as required by the board and at the expense of the individual, if the board finds reason to believe that the individual under investigation may have a physical or mental impairment that may affect the individual's ability to provide safe nursing care. Failure of any individual to

submit to a mental or physical examination when directed constitutes an admission of the allegations, 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 that an individual is impaired, the board shall require the individual to submit to care, counseling, or treatment approved or designated by the board, as a condition for initial, continued, reinstated, or renewed authority to practice. The individual shall be afforded an opportunity to demonstrate to the board that the individual can begin or resume the individual's occupation in compliance with acceptable and prevailing standards of care under the provisions of the individual's authority to practice.

For purposes of this division, any registered nurse, licensed practical nurse, or dialysis technician or applicant under this chapter shall be deemed to have given consent to submit to a mental or physical examination when directed to do so in writing by the board, and to have waived all objections to the admissibility of testimony or examination reports that constitute a privileged communication.

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

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

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

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

protect patient confidentiality.

(3) All adjudications and investigations of the board shall be considered civil actions for the purposes of section 2305.252 of the Revised Code.

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

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

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

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

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

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

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

Sec. 4729.01. As used in this chapter:

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

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

- (1) Interpreting prescriptions;
- (2) Dispensing drugs and drug therapy related devices;
- (3) Compounding drugs;
- (4) Counseling individuals with regard to their drug therapy, recommending drug therapy related devices, and assisting in the selection of drugs and appliances for treatment of common diseases and injuries and providing instruction in the proper use of the drugs and appliances;
- (5) Performing drug regimen reviews with individuals by discussing all of the drugs that the individual is taking and explaining the interactions of the drugs;
- (6) Performing drug utilization reviews with licensed health professionals authorized to prescribe drugs when the pharmacist determines that an individual with a prescription has a drug regimen that warrants additional discussion with the prescriber;
- (7) Advising an individual and the health care professionals treating an individual with regard to the individual's drug therapy;
- (8) Acting pursuant to a consult agreement ~~with one or more physicians authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery~~, if an agreement has been established;
- (9) Engaging in the administration of immunizations to the extent authorized by section 4729.41 of the Revised Code;
- (10) Engaging in the administration of drugs to the extent authorized by section 4729.45 of the Revised Code.

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

- (1) Pursuant to a prescription issued by a licensed health professional authorized to prescribe drugs;
- (2) Pursuant to the modification of a prescription made in accordance

with a consult agreement;

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

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

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

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

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

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

(D) "Consult agreement" means an agreement that has been entered into under section 4729.39 of the Revised Code.

(E) "Drug" means:

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

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

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

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

"Drug" does not include "hemp" or a "hemp product" as those terms are defined in section 928.01 of the Revised Code.

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

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

(a) Under the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is required to bear a label containing the legend "Caution: Federal law prohibits dispensing without

prescription" or "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian" or any similar restrictive statement, or the drug may be dispensed only upon a prescription;

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

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

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

(4) Any drug that is a biological product, as defined in section 3715.01 of the Revised Code.

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

(H) "Prescription" means all of the following:

(1) A written, electronic, or oral order for drugs or combinations or mixtures of drugs to be used by a particular individual or for treating a particular animal, issued by a licensed health professional authorized to prescribe drugs;

(2) For purposes of sections 2925.61, 4723.488, 4730.431, and 4731.94 of the Revised Code, a written, electronic, or oral order for naloxone issued to and in the name of a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.

(3) For purposes of section 4729.44 of the Revised Code, a written, electronic, or oral order for naloxone issued to and in the name of either of the following:

(a) An individual who there is reason to believe is at risk of experiencing an opioid-related overdose;

(b) A family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.

(4) For purposes of sections 4723.4810, 4729.282, 4730.432, and 4731.93 of the Revised Code, a written, electronic, or oral order for a drug to treat chlamydia, gonorrhea, or trichomoniasis issued to and in the name of a patient who is not the intended user of the drug but is the sexual partner of the intended user;

(5) For purposes of sections 3313.7110, 3313.7111, 3314.143, 3326.28, 3328.29, 4723.483, 4729.88, 4730.433, 4731.96, and 5101.76 of the Revised Code, a written, electronic, or oral order for an epinephrine

autoinjector issued to and in the name of a school, school district, or camp;

(6) For purposes of Chapter 3728. and sections 4723.483, 4729.88, 4730.433, and 4731.96 of the Revised Code, a written, electronic, or oral order for an epinephrine autoinjector issued to and in the name of a qualified entity, as defined in section 3728.01 of the Revised Code.

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

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

(2) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a current, valid license issued under Chapter 4723. of the Revised Code to practice nursing as an advanced practice registered nurse;

(3) A certified registered nurse anesthetist who holds a current, valid license issued under Chapter 4723. of the Revised Code to practice nursing as an advanced practice registered nurse, but only to the extent of the nurse's authority under sections 4723.43 and 4723.434 of the Revised Code;

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

(5) A physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;

(6) A physician assistant who holds a license to practice as a physician assistant issued under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority;

(7) A veterinarian licensed under Chapter 4741. of the Revised Code.

(J) "Sale" or "sell" includes any transaction made by any person, whether as principal proprietor, agent, or employee, to do or offer to do any of the following: deliver, distribute, broker, exchange, gift or otherwise give away, or transfer, whether the transfer is by passage of title, physical movement, or both.

(K) "Wholesale sale" and "sale at wholesale" mean any sale in which the purpose of the purchaser is to resell the article purchased or received by the purchaser.

(L) "Retail sale" and "sale at retail" mean any sale other than a wholesale sale or sale at wholesale.

(M) "Retail seller" means any person that sells any dangerous drug to consumers without assuming control over and responsibility for its

administration. Mere advice or instructions regarding administration do not constitute control or establish responsibility.

(N) "Price information" means the price charged for a prescription for a particular drug product and, in an easily understandable manner, all of the following:

(1) The proprietary name of the drug product;

(2) The established (generic) name of the drug product;

(3) The strength of the drug product if the product contains a single active ingredient or if the drug product contains more than one active ingredient and a relevant strength can be associated with the product without indicating each active ingredient. The established name and quantity of each active ingredient are required if such a relevant strength cannot be so associated with a drug product containing more than one ingredient.

(4) The dosage form;

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

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

(P) "Manufacturer of dangerous drugs" or "manufacturer" means a person, other than a pharmacist or prescriber, who manufactures dangerous drugs and who is engaged in the sale of those dangerous drugs.

(Q) "Terminal distributor of dangerous drugs" or "terminal distributor" means a person who is engaged in the sale of dangerous drugs at retail, or any person, other than a manufacturer, repackager, outsourcing facility, third-party logistics provider, wholesale distributor, or pharmacist, who has possession, custody, or control of dangerous drugs for any purpose other than for that person's own use and consumption. "Terminal distributor" includes pharmacies, hospitals, nursing homes, and laboratories and all other persons who procure dangerous drugs for sale or other distribution by or under the supervision of a pharmacist, licensed health professional authorized to prescribe drugs, or other person authorized by the state board of pharmacy.

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

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

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

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

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

(W) "Investigational drug or product" means a drug or product that has successfully completed phase one of the United States food and drug administration clinical trials and remains under clinical trial, but has not been approved for general use by the United States food and drug administration. "Investigational drug or product" does not include controlled substances in schedule I, as defined in section 3719.01 of the Revised Code.

(X) "Product," when used in reference to an investigational drug or product, means a biological product, other than a drug, that is made from a natural human, animal, or microorganism source and is intended to treat a disease or medical condition.

(Y) "Third-party logistics provider" means a person that provides or coordinates warehousing or other logistics services pertaining to dangerous drugs including distribution, on behalf of a manufacturer, wholesale distributor, or terminal distributor of dangerous drugs, but does not take ownership of the drugs or have responsibility to direct the sale or disposition of the drugs.

(Z) "Repackager of dangerous drugs" or "repackager" means a person that repacks and relabels dangerous drugs for sale or distribution.

(AA) "Outsourcing facility" means a facility that is engaged in the compounding and sale of sterile drugs and is registered as an outsourcing facility with the United States food and drug administration.

(BB) "Laboratory" means a laboratory licensed under this chapter as a terminal distributor of dangerous drugs and entrusted to have custody of any of the following drugs and to use the drugs for scientific and clinical purposes and for purposes of instruction: dangerous drugs that are not controlled substances, as defined in section 3719.01 of the Revised Code; dangerous drugs that are controlled substances, as defined in that section; and controlled substances in schedule I, as defined in that section.

Sec. 4729.39. (A) ~~One~~ As used in this section:

(1) "Certified nurse practitioner," "certified nurse-midwife," "clinical nurse specialist," and "standard care arrangement" have the same meanings as in section 4723.01 of the Revised Code.

(2) "Collaborating physician" means a physician who has entered into a standard care arrangement with a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner.

(3) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.

(4) "Physician assistant" means an individual who is licensed to practice as a physician assistant under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority.

(5) "Supervising physician" means a physician who has entered into a supervision agreement with a physician assistant under section 4730.19 of the Revised Code.

(B) Subject to division (C) of this section, one or more pharmacists may enter into a consult agreement with one or more physicians authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery if of the following practitioners:

(1) Physicians;

(2) Physician assistants, if entering into a consult agreement is authorized by one or more supervising physicians;

(3) Clinical nurse specialists, certified nurse-midwives, or certified nurse practitioners, if entering into a consult agreement is authorized by one or more collaborating physicians.

(C) Before entering into a consult agreement, all of the following conditions are must be met:

(1) Each ~~physician has practitioner~~ must have an ongoing ~~physician-patient-practitioner-patient~~ relationship with each patient whose drug therapy is ~~being to be~~ managed.

(2) The diagnosis for which each patient has been prescribed drug therapy is ~~must be~~ within the scope of each ~~physician's practitioner's~~ practice.

(3) Each pharmacist ~~has must have~~ training and experience related to the particular diagnosis for which drug therapy is ~~to be~~ prescribed.

~~(B)-(D)~~ (D) With respect to consult agreements, all of the following apply:

(1) Under a consult agreement, a pharmacist is authorized to do both of the following, but only to the extent specified in the agreement, this

section, and the rules adopted under this section:

(a) Manage drug therapy for treatment of specified diagnoses or diseases for each patient who is subject to the agreement, including all of the following:

- (i) Changing the duration of treatment for the current drug therapy;
- (ii) Adjusting a drug's strength, dose, dosage form, frequency of administration, or route of administration;
- (iii) Discontinuing the use of a drug;
- (iv) Administering a drug;
- (v) Notwithstanding the definition of "licensed health professional authorized to prescribe drugs" in section 4729.01 of the Revised Code, adding a drug to the patient's drug therapy.

(b)(i) Order laboratory and diagnostic tests, including blood and urine tests and evaluate results, that are related to the drug therapy being managed, and evaluate the results of the tests that are ordered.

(ii) A pharmacist's authority to evaluate ~~blood and urine tests test results~~ under division ~~(B)(1)(b)(i)-(D)(1)(b)(i)~~ of this section does not authorize the pharmacist to make a diagnosis.

(2)(a) A consult agreement, or the portion of the agreement that applies to a particular patient, may be terminated by any of the following:

- (i) A pharmacist who entered into the agreement;
- (ii) A ~~physician-practitioner~~ who entered into the agreement;
- (iii) A patient whose drug therapy is being managed;
- (iv) An individual who consented to the treatment on behalf of a patient or an individual authorized to act on behalf of a patient.

(b) The pharmacist or ~~physician-practitioner~~ who receives the notice of a patient's termination of the agreement shall provide written notice to every other pharmacist or ~~physician-practitioner~~ who is a party to the agreement. A pharmacist or ~~physician-practitioner~~ who terminates a consult agreement with regard to one or more patients shall provide written notice to all other pharmacists and ~~physicians-practitioners~~ who entered into the agreement and to each individual who consented to treatment under the agreement. The termination of a consult agreement with regard to one or more patients shall be recorded by the pharmacist and ~~physician-practitioner~~ in the medical records of each patient to whom the termination applies.

(3) A consult agreement shall be made in writing and shall include all of the following:

(a) The diagnoses and diseases being managed under the agreement, including whether each disease is primary or comorbid;

(b) A description of the drugs or drug categories the agreement involves;

(c) A description of the procedures, decision criteria, and plan the pharmacist is to follow in acting under a consult agreement;

(d) A description of how the pharmacist is to comply with divisions ~~(B)(5)~~ (D)(5) and (6) of this section.

(4) The content of a consult agreement shall be communicated to each patient whose drug therapy is managed under the agreement.

(5) A pharmacist acting under a consult agreement shall maintain a record of each action taken for each patient whose drug therapy is managed under the agreement.

(6) Communication between a pharmacist and ~~physician-practitioner~~ acting under a consult agreement shall take place at regular intervals specified by the primary ~~physician-practitioner~~ acting under the agreement. The agreement may include a requirement that a pharmacist send a consult report to each consulting ~~physician-practitioner~~.

(7) A consult agreement is effective for two years and may be renewed if the conditions specified in division ~~(A)-(C)~~ of this section ~~are continue to be met~~.

(8) A consult agreement does not permit a pharmacist to manage drug therapy prescribed by a ~~physician-practitioner~~ who has not entered into the agreement.

~~(C) The state board of pharmacy, in consultation with the state medical board, shall adopt rules to be followed by pharmacists, and the state medical board, in consultation with the state board of pharmacy, shall adopt rules to be followed by physicians, that establish~~ (E) The state board of pharmacy, state medical board, and board of nursing shall each adopt rules as follows for its license holders establishing standards and procedures for entering into a consult agreement and managing a patient's drug therapy under a consult agreement:

(1) The state board of pharmacy, in consultation with the state medical board and board of nursing, shall adopt rules to be followed by pharmacists.

(2) The state medical board, in consultation with the state board of pharmacy, shall adopt rules to be followed by physicians and rules to be followed by physician assistants.

(3) The board of nursing, in consultation with the state board of pharmacy and state medical board, shall adopt rules to be followed by clinical nurse specialists, certified nurse-midwives, and certified nurse practitioners. The-

~~The~~ boards shall specify in the rules any categories of drugs or types of diseases for which a consult agreement may not be established. ~~Either~~ Each board may adopt any other rules it considers necessary for the implementation and administration of this section. All rules adopted under this ~~division~~ section shall be adopted in accordance with Chapter 119. of the Revised Code.

~~(D)(1)-(F)(1)~~ Subject to division ~~(D)(2)-(F)(2)~~ of this section, both of the following apply:

(a) A pharmacist acting in accordance with a consult agreement regarding a ~~physician's practitioner's~~ change in a drug for a patient whose drug therapy the pharmacist is managing under the agreement is not liable in damages in a tort or other civil action for injury or loss to person or property allegedly arising from the change.

(b) A ~~physician-practitioner~~ acting in accordance with a consult agreement regarding a pharmacist's change in a drug for a patient whose drug therapy the pharmacist is managing under a consult agreement is not liable in damages in a tort or other civil action for injury or loss to person or property allegedly arising from the change unless the ~~physician-practitioner~~ authorized the specific change.

(2) Division ~~(D)(1)-(F)(1)~~ of this section does not limit a ~~physician's practitioner's~~ or pharmacist's liability in damages in a tort or other civil action for injury or loss to person or property allegedly arising from actions that are not related to the ~~physician's practitioner's~~ or pharmacist's change in a drug for a patient whose drug therapy is being managed under a consult agreement.

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

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

(1) Failure to practice in accordance with the supervising physician's supervision agreement with the physician assistant, including, if applicable, the policies of the health care facility in which the supervising physician and physician assistant are practicing;

(2) Failure to comply with the requirements of this chapter, Chapter

4731. of the Revised Code, or any rules adopted by the board;

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

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

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

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

(7) Willfully betraying a professional confidence;

(8) Making a false, fraudulent, deceptive, or misleading statement in soliciting or advertising for employment as a physician assistant; in connection with any solicitation or advertisement for patients; in relation to the practice of medicine as it pertains to physician assistants; or in securing or attempting to secure a license to practice as a physician assistant.

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

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

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

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

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

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

(14) A plea of guilty to, a judicial finding of guilt of, or a judicial

finding of eligibility for intervention in lieu of conviction for, a misdemeanor involving moral turpitude;

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

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

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

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

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

(20) Violation of the conditions placed by the board on a license to practice as a physician assistant;

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

(22) Failure to cooperate in an investigation conducted by the board under section 4730.26 of the Revised Code, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board 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;

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

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

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

4729.75 of the Revised Code;

(26) Failure to comply with the requirements in section 3719.061 of the Revised Code before issuing for a minor a prescription for an opioid analgesic, as defined in section 3719.01 of the Revised Code;

(27) Having certification by the national commission on certification of physician assistants or a successor organization expire, lapse, or be suspended or revoked;

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

(29) Failure to comply with terms of a consult agreement entered into with a pharmacist pursuant to section 4729.39 of the Revised Code.

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

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

(E) The sealing of conviction records by any court shall have no effect upon a prior board order entered under the provisions of this section or upon the board's jurisdiction to take action under the provisions of 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) For purposes of this division, any individual who holds a license issued under this chapter, or applies for a license issued under this chapter, shall be deemed to have given consent to submit to a mental or physical examination when directed to do so in writing by the board and to have waived all objections to the admissibility of testimony or examination reports that constitute a privileged communication.

(1) In enforcing division (B)(4) of this section, the board, upon a showing of a possible violation, may compel any individual who holds a license issued under this chapter or who has applied for a license pursuant to this chapter to submit to a mental examination, physical examination, including an HIV test, or both a mental and 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 a physician assistant unable to practice because of the reasons set forth in division (B)(4) of this section, the board shall require the physician assistant to submit to care, counseling, or treatment by physicians approved or designated by the board, as a condition for an initial, continued, reinstated, or renewed license. An individual affected under this division shall be afforded an opportunity to demonstrate to the board the ability to resume practicing in compliance with acceptable and prevailing standards of care.

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

Failure to submit to a mental or physical examination 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 determines that the individual's ability to practice is impaired, the board shall suspend the individual's license or deny the individual's application and shall require the individual, as a condition for initial, continued, reinstated, or renewed licensure, to submit to treatment.

Before being eligible to apply for reinstatement of a license

suspended under this division, the physician assistant shall demonstrate to the board the ability to resume practice or prescribing in compliance with acceptable and prevailing standards of care. The demonstration shall include the following:

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

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

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

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

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

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

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

The board shall issue a written order of suspension by certified mail or in person in accordance with section 119.07 of the Revised Code. The order shall not be subject to suspension by the court during pendency of any appeal filed under section 119.12 of the Revised Code. If the physician assistant requests an adjudicatory hearing by the board, the date set for the

hearing shall be within fifteen days, but not earlier than seven days, after the physician assistant requests the hearing, unless otherwise agreed to by both the board and the license holder.

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

(H) If the board takes action under division (B)(11), (13), or (14) of this section, and the judicial finding of guilt, guilty plea, or judicial finding of eligibility for intervention in lieu of conviction is overturned on appeal, upon exhaustion of the criminal appeal, a petition for reconsideration of the order may be filed with the board along with appropriate court documents. Upon receipt of a petition and supporting court documents, the board shall reinstate the individual's license. The board may then hold an adjudication under Chapter 119. of the Revised Code to determine whether the individual committed the act in question. Notice of opportunity for hearing shall be given in accordance with Chapter 119. of the Revised Code. If the board finds, pursuant to an adjudication held under this division, that the individual committed the act, or if no hearing is requested, it may order any of the sanctions identified under division (B) of this section.

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

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

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

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

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

(L) When the board refuses to grant or issue to an applicant a license to practice as a physician assistant, revokes an individual's license, refuses to renew an individual's license, or refuses to reinstate an individual's license, the board may specify that its action is permanent. An individual subject to a permanent action taken by the board is forever thereafter ineligible to hold the license and the board shall not accept an application for reinstatement of the license or for issuance of a new license.

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

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

(2) An application made under this chapter for a license may not be withdrawn without approval of the board.

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

Sec. 5164.14. The medicaid program may cover a health care service that a pharmacist provides to a medicaid recipient in accordance with Chapter 4729. of the Revised Code, including any of the following services:

(A) Managing drug therapy under a consult agreement ~~with a physician~~ pursuant to section 4729.39 of the Revised Code;

(B) Administering immunizations in accordance with section 4729.41 of the Revised Code;

(C) Administering drugs in accordance with section 4729.45 of the Revised Code."

In line 497, after "sections" insert "1751.91, 3923.89,"; delete ", and" and insert ", "

In line 498, after "4715.36" insert ", 4723.28, 4729.01, 4729.39, 4730.25, and 5164.14"

The question being, "Shall the amendment be agreed to?"

The motion to amend was agreed to.

The question recurred, "Shall the bill, **Am. H. B. No. 203** pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Burke moved to amend the title as follows:

Add the names: "Senators Blessing, Brenner, Burke, Craig, Eklund, Fedor, Gavarone, Hackett, Hoagland, Huffman, S., Johnson, Kunze, Manning, Obhof, Peterson, Rulli, Schuring, Sykes, Thomas, Williams, Wilson."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

Sub. H. B. No. 285-Representatives Greenspan, Brent.

Cosponsors: Representatives Green, Sheehy, Howse, Abrams, Blair, Brown, Carfagna, Carruthers, Crawley, Crossman, Denson, Edwards, Galonski, Ginter, Hambley, Hicks-Hudson, Hillyer, Ingram, Jones, Kelly, Lanese, Lepore-Hagan, Lightbody, Liston, Manning, G., Miller, A., Miller, J., O'Brien, Patton, Perales, Robinson, Seitz, Smith, K., Sobecki, Swearingen, Sweeney, Upchurch, Weinstein, West. Senators Manning, Maharath, Hackett.

To enact section 4510.101, 4510.102, 4510.103, 4510.104, 4510.105, 4510.106, 4510.107, and 4510.108 of the Revised Code to establish a permanent Driver's License Reinstatement Fee Debt Reduction and Amnesty Program, was considered the third time.

The question being, "Shall the bill, **Sub. H. B. No. 285**, pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Manning moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Burke, Craig, Dolan, Eklund, Fedor, Gavarone, Huffman, S., Kunze, Lehner, O'Brien, Peterson, Schuring, Sykes, Thomas, Williams, Wilson."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

H. B. No. 287-Representatives Russo, Perales.

Cosponsors: Representatives Liston, Smith, R., Miller, A., Butler, Patterson, Crossman, Smith, K., Crawley, Sobocki, O'Brien, Weinstein, Strahorn, Upchurch, Lightbody, West, Blair, Boggs, Brown, Carruthers, Cera, Clites, Cross, Cupp, Dean, Denson, Edwards, Galonski, Ghanbari, Ginter, Green, Greenspan, Grendell, Hambly, Hicks-Hudson, Holmes, A., Hoops, Ingram, Jones, Kick, Koehler, Lanese, Lang, LaRe, Leland, Lepore-Hagan, Lipps, Manning, D., Manning, G., Miller, J., Oelslager, Patton, Plummer, Richardson, Riedel, Robinson, Roemer, Rogers, Romanchuk, Sheehy, Skindell, Smith, T., Stein, Stoltzfus, Sykes. Senators Hackett, Coley, Huffman, S.

To enact section 5166.09 of the Revised Code regarding Medicaid home and community-based waiver services for relatives of active duty military, was considered the third time.

The question being, "Shall the bill, **H. B. No. 287**, pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner

Rulli
Thomas

Schaffer
Williams

Schuring
Wilson

Sykes
Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Huffman, S. moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Brenner, Burke, Craig, Dolan, Eklund, Fedor, Gavarone, Hoagland, Johnson, Kunze, Maharath, Manning, McColley, O'Brien, Peterson, Roegner, Rulli, Schaffer, Sykes, Thomas."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

S. B. No. 248-Senator Schaffer.

Cosponsors: Senators Brenner, Hoagland, Schuring.

To amend section 3781.1010 of the Revised Code to extend until November 30, 2022, the moratorium on the building code requirement for storm shelters for school construction projects, was considered the third time.

The question being, "Shall the bill, **S. B. No. 248**, pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Schaffer moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Burke, Craig, Dolan, Eklund, Fedor, Gavarone, Huffman, S., Johnson, Kunze, Maharath, Manning, O'Brien, Peterson, Roegner, Rulli, Sykes, Thomas, Williams, Wilson."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

S. B. No. 258-Senator Gavarone.

Cosponsors: Senators Roegner, Hackett, Coley, Huffman, S.

To enact sections 4732.40 and 4732.41 of the Revised Code to enter into the Psychology Interjurisdictional Compact (PSYPACT), was considered the third time.

The question being, "Shall the bill, **S. B. No. 258**, pass?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Gavarone moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Brenner, Burke, Craig, Dolan, Eklund, Fedor, Hoagland, Johnson, Kunze, Lehner, Maharath, Manning, O'Brien, Rulli, Thomas, Williams, Wilson."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

S. B. No. 259-Senator Sykes.

Cosponsors: Senators Maharath, Manning.

To authorize the conveyance of state-owned real property, was considered the third time.

The question being, "Shall the bill, **S. B. No. 259**, pass?"

Senator Kunze moved to amend as follows:

In line 1 of the title, after "To" insert "amend section 5709.91 of the Revised Code to"

In line 2 of the title, after "property" insert "and to specify that tax increment financing minimum service payment obligation agreements are enforceable against subsequent property owners"

After line 2, insert:

"Section 1. That section 5709.91 of the Revised Code be amended to read as follows:

Sec. 5709.91. (A) Service payments in lieu of taxes required under sections 725.04, 5709.42, 5709.46, 5709.74, and 5709.79 of the Revised Code, minimum service payment obligations, and service charges in lieu of taxes required under sections 1728.11 and 1728.111 of the Revised Code, shall be treated in the same manner as taxes, as defined in section 323.01 of

the Revised Code, for all purposes of the lien described in section 323.11 of the Revised Code, including, but not limited to, the priority and enforcement of the lien and the collection of the service payments, minimum service payment obligations, or service charges secured by the lien. For

(B) Any covenant or agreement in an instrument whereby a property owner agrees to a minimum service payment obligation shall be a covenant running with the land. Upon the proper recording of the instrument with the county recorder, the covenant is fully binding on behalf of and enforceable by the county, township, or municipal corporation against the property owner and any person acquiring an interest in the land and all successors and assigns. If any such minimum service payment obligation becomes delinquent according to such covenant or agreement, the county, township, or municipal corporation may enforce the delinquent minimum service payment obligation in the manner provided under division (A) of this section or in the manner otherwise provided in the instrument. A minimum service payment obligation is an insurable interest with respect to title insurance under Chapter 3953. of the Revised Code.

(C) A county, township, or municipal corporation may certify a minimum service payment obligation that is a covenant under division (B) of this section to the county auditor, who shall enter the obligation on the tax list of real property opposite the parcel against which it is charged, and certify the minimum service payment obligation to the county treasurer. An unpaid minimum service payment obligation is a lien on property against which it is charged from the date the obligation is entered on the tax list, and shall be collected in the manner provided for collection of real property taxes. Once the minimum service payment obligation is collected, it shall be paid immediately to the county, township, or municipal corporation.

(D) For the purposes of this section, a "minimum service payment obligation" is an obligation, including a contingent obligation, for a ~~person~~ property owner to make a payment to a county, township, or municipal corporation ~~to ensure sufficient funds to finance public infrastructure improvements or, if applicable, housing renovations, pursuant to an agreement between that person~~ the property owner and the county, township, or municipal corporation ~~for the purposes of to ensure sufficient funds to finance the expenditures authorized under sections 725.04, 1728.11, 1728.111, 5709.40 to 5709.43, 5709.45 to 5709.47, 5709.73 to 5709.75, or 5709.77 to 5709.81 of the Revised Code.~~

Section 2. That existing section 5709.91 of the Revised Code is hereby repealed."

In line 3, delete "1" and insert "3"

After line 121, insert:

"Section 4. The amendment by this act of section 5709.91 of the Revised Code applies to any proceedings commenced or instruments recorded after the amendment's effective date, and, so far as the amendment supports the actions taken, also applies to proceedings that on its effective date are pending, in progress, or completed, or instruments that have previously been recorded, notwithstanding the applicable law previously in effect or any provision to the contrary in a prior resolution, ordinance, order, advertisement, notice, instrument, or other proceeding. Any proceedings pending or in progress on the effective date of the amendment shall be deemed to have been taken in conformity with the amendment.

The authority provided in the amendment by this act of section 5709.91 of the Revised Code provides additional and supplemental provisions for the subject matter that may also be the subject of other laws, and is supplemental to and not in derogation of any similar authority provided by, derived from, or implied by the Ohio Constitution, or any other law, including laws amended by this act, or any charter, order, resolution, or ordinance, and no inference shall be drawn to negate the authority thereunder by reason of express provisions contained in the amendment by this act of section 5709.91 of the Revised Code."

The question being, "Shall the amendment be agreed to?"

The motion to amend was agreed to.

The question recurred, "Shall the title be agreed to?"

The yeas and nays were taken and resulted – yeas 32, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Brenner	Burke
Coley	Craig	Dolan	Eklund
Fedor	Gavarone	Hackett	Hoagland
Hottinger	Huffman, M.	Huffman, S.	Johnson
Kunze	Lehner	Maharath	Manning
McColley	O'Brien	Peterson	Roegner
Rulli	Schaffer	Schuring	Sykes
Thomas	Williams	Wilson	Obhof-32

So the bill passed.

The question being, "Shall the title be agreed to?"

Senator Sykes moved to amend the title as follows:

Add the names: "Senators Antonio, Blessing, Burke, Craig, Fedor, Hottinger, Kunze, Lehner, O'Brien, Schuring, Thomas, Williams."

The question being, "Shall the motion be agreed to?"

The motion was agreed to and the title so amended.

MOTIONS

Senator Hottinger moved that Senators absent the week of Wednesday, May 17, 2020, be excused, so long as a written explanation is on file with the Clerk pursuant to Senate Rule No. 17.

The question being, "Shall the motion be agreed to?"

The motion was agreed to.

OFFERING OF RESOLUTIONS

Senator Peterson offered the following resolution:

S. R. No. 525-Senator Peterson.

Relative to mileage reimbursement.

RESOLVED, Pursuant to section 101.27 of the Revised Code and S.R. No. 2--Senator Peterson, Relative to mileage reimbursement, adopted January 7, 2019, the Clerk of the Senate is authorized to add the mileage for Andrew O. Brenner of 58 miles round trip.

The question being, "Shall the resolution, **S. R. No. 525**, be adopted?"

The yeas and nays were taken and resulted – yeas 31, nays 0, as follows:

Those who voted in the affirmative were: Senators

Antonio	Blessing	Burke	Coley
Craig	Dolan	Eklund	Fedor
Gavarone	Hackett	Hoagland	Hottinger
Huffman, M.	Huffman, S.	Johnson	Kunze
Lehner	Maharath	Manning	McColley
O'Brien	Peterson	Roegner	Rulli
Schaffer	Schuring	Sykes	Thomas
Williams	Wilson		Obhof-31

So the resolution was adopted.

The question being, "Shall the title be agreed to?"

The title was agreed to.

Message from the House of Representatives

Mr. President:

I am directed to inform you that the Speaker of the House has appointed as managers on the part of the House on matters of difference between the two Houses on:

Sub. S. B. No. 9-Senator Huffman, M. – et al.

Representatives Merrin, Cross, and Boggs.

Attest:

Bradley J. Young,

Clerk.

MESSAGE FROM THE PRESIDENT

Pursuant to Section 5540.02(C)(2)(c) of the Ohio Revised Code, the President of the Senate appoints Senator Frank Hoagland to serve as a non-voting member on the Harrison County Transportation Improvement District.

On the motion of Senator Peterson, the Senate adjourned until Tuesday, May 26, 2020 at 9:00 a.m.

Attest:

VINCENT L. KEERAN,
Clerk.