

As Reported by the Senate Judiciary--Civil Justice Committee

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**Representatives Wagner, Distel, Flowers, Harwood, Kearns, McGregor, Seitz,
Wolpert, Willamowski, Barrett, Blessing, Chandler, Coley, Collier, Combs,
Domenick, Evans, D., Fende, Gibbs, Hoops, Hughes, Law, Perry, Raussen,
Reidelbach, Schaffer, Schneider, Taylor, Uecker**

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A B I L L

To amend sections 313.05, 313.08, 313.10, 325.17, 1
3705.16, 3705.29, 3705.99, 3901.21, 4705.01, and 2
4731.053 and to enact sections 313.123 and 313.23 3
of the Revised Code to make changes to the 4
Coroner's Law and associated provisions of the 5
Death and Fetal Death Certificate Law, to require 6
that the rules of the State Medical Board allow a 7
coroner's investigator who is not a physician to 8
recite facts permitting a physician to pronounce a 9
person dead without a personal examination, to 10
permit a journalist or insurer to request certain 11
information from the coroner, to allow a coroner 12
to practice as an attorney at law in a court 13
except under specified circumstances, and to 14
specify who may view an autopsy. 15

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

Section 1. That sections 313.05, 313.08, 313.10, 325.17, 16
3705.16, 3705.29, 3705.99, 3901.21, 4705.01, and 4731.053 be 17
amended and sections 313.123 and 313.23 of the Revised Code be 18

enacted to read as follows:

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Sec. 313.05. (A)(1) The coroner may appoint, in writing,
deputy coroners, who shall be licensed physicians of good standing
in their profession, one of whom may be designated as the chief
deputy coroner. The coroner ~~may~~ also may appoint pathologists as
deputy coroners, who ~~shall assist in doing~~ may perform autopsies,
make pathological and chemical examinations, and perform other
duties as directed by the coroner or recommended by the
prosecuting attorney. The coroner may appoint any necessary
technicians.

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The coroner may contract for the services of deputy coroners
to aid the coroner in the execution of the coroner's powers and
duties. Contracts for the services of deputy coroners are exempt
from any competitive bidding requirements of the Revised Code.

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(2) The coroner may appoint, in writing, one or more
secretaries and an official stenographer, who shall record the
testimony of witnesses in attendance upon the coroner's inquest,
preserve and file properly indexed records of all official
reports, acts, and communications of the office, and perform other
services as required by the coroner.

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~~In counties where a coroner's office, laboratory, and county
morgue are maintained, the~~ (3) The coroner may appoint clerks,
stenographers, custodians, and investigators, and shall define
their duties.

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(4) For the performance of their duties ~~the,~~ deputy coroners,
pathologists serving as deputy coroners, and technicians,
stenographers, secretaries, clerks, custodians, and investigators
shall receive salaries fixed by the coroner and payable from the
county treasury upon the warrant of the county auditor. The
compensation shall not exceed, in the aggregate, the amount fixed
by the board of county commissioners for the coroner's office.

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(B) A coroner may appoint, as a deputy coroner, as a 50
pathologist serving as a deputy coroner, or as a technician, 51
stenographer, secretary, clerk, custodian, investigator, or other 52
employee, a person who is an associate of, or who is employed by, 53
the coroner or a deputy coroner in the private practice of 54
medicine in a partnership, professional association, or other 55
medical business arrangement. 56

Sec. 313.08. (A) In counties in which a county morgue is 57
maintained, the coroner shall be the official custodian of the 58
morgue. 59

In all cases of the finding of the body or remains of a 60
deceased person within a county in which a county morgue is 61
maintained, when the identity of the deceased person is unknown, 62
or the deceased person's relatives or other persons entitled to 63
the custody of the body or remains of the deceased person are 64
unknown or not present, the body or remains shall be removed to 65
the county morgue, where it shall be held for identification and 66
disposal. 67

(B) If the body or remains of a deceased person are not 68
identified, a coroner shall do all of the following prior to 69
disposing of the body or remains: 70

(1) Take the fingerprints of the body or remains of the 71
deceased person, or cause the same to be taken, according to the 72
fingerprint system of identification on the forms furnished by the 73
superintendent of the bureau of criminal identification and 74
investigation; 75

(2) Take or cause to be taken one or more photographs of the 76
body or remains of the deceased person; 77

(3) Collect in a medically approved manner a DNA specimen 78
from the body or remains of the deceased person; 79

(4) Promptly cause the fingerprints, the photographs, and the DNA specimen to be forwarded to the bureau of criminal identification and investigation for inclusion in the unidentified person database in accordance with procedures established by the superintendent of the bureau under division (H) of section 109.573 of the Revised Code. The bureau shall provide the fingerprint forms, specimen vials, mailing tubes, labels, postage, and instruction needed for the collection and forwarding to the bureau of the fingerprints and the DNA specimen and for the forwarding to the bureau of the photographs.

(C) Upon the request of a coroner who has the duty to take, or cause the taking of, fingerprints and photographs under divisions (B)(1) and (2) of this section, the bureau of criminal identification and investigation shall take, or assist in the taking of, the required fingerprints and photographs.

(D) The coroner may submit any evidence gathered in the investigation of a death to the bureau of criminal identification and investigation for assistance in determining whether the death resulted from criminal activity. The bureau shall assist in the evaluation of evidence submitted under this division.

(E) As used in this section, "DNA specimen" and "unidentified person database" have the same meanings as in section 109.573 of the Revised Code.

Sec. 313.10. The (A)(1) Except as otherwise provided in this section, the records of the coroner, including, but not limited to, the detailed descriptions of the observations written during the progress of an autopsy and the conclusions drawn from those observations filed in the office of the coroner under division (A) of section 313.13 of the Revised Code, made personally by the coroner or by anyone acting under the coroner's direction or supervision, are public records, and those. Those records, or

transcripts or photostatic copies of them, certified by the 111
coroner, shall be received as evidence in any criminal or civil 112
action or proceeding in a court in this state, as to the facts 113
contained in those records. 114

(2) Except as otherwise provided in division (D) or (E) of 115
this section, the following records in a coroner's office are not 116
public records: 117

(a) Preliminary autopsy and investigative notes and findings 118
made by the coroner or by anyone acting under the coroner's 119
direction or supervision; 120

(b) Photographs of a decedent made by the coroner or by 121
anyone acting under the coroner's direction or supervision; 122

(c) Suicide notes; 123

(d) Medical and psychiatric records provided to the coroner, 124
a deputy coroner, or a representative of the coroner or a deputy 125
coroner under section 313.091 of the Revised Code. 126

(3) In the coroner's discretion, photographs of a decedent 127
may be used for medical, legal, or educational purposes. 128

~~Except for medical and psychiatric records provided to the~~ 129
~~coroner, a deputy coroner, or a representative of the coroner or a~~ 130
~~deputy coroner under section 313.091 of the Revised Code, all (B)~~ 131
All records in the coroner's office shall be that are public 132
records are open to inspection by the public, and any person may 133
receive a copy of any such record or part of it upon demand in 134
writing, accompanied by payment of ~~the transcript~~ a record 135
retrieval and copying fee, at the rate of ~~fifteen~~ twenty-five 136
cents per ~~hundred words~~, page or a minimum fee of one dollar. 137

(C)(1) The coroner shall provide any photograph or suicide 138
note in the coroner's records to a person who makes a written 139
request as the next of kin of a decedent who is the subject of the 140

photograph or suicide note. The following persons may make a 141
request pursuant to this division as the next of kin of a 142
decedent: 143

(a) The surviving spouse of the decedent; 144

(b) If there is no surviving spouse, or if the surviving 145
spouse has died without having made a request pursuant to this 146
division, any child of the decedent over eighteen years of age, 147
with each child over eighteen years of age having an independent 148
right to make a request pursuant to this division; 149

(c) If there is no surviving spouse or child over eighteen 150
years of age, or if the surviving spouse and all children over 151
eighteen years of age have died without having made a request 152
pursuant to this division, the parents of the decedent, with each 153
parent having an independent right to make a request pursuant to 154
this division; 155

(d) If there is no surviving spouse, child over eighteen 156
years of age, or parents of the decedent, or if all have died 157
without having made a request pursuant to this division, the 158
brothers and sisters of the decedent, whether of the whole or the 159
half blood, with each having an independent right to make a 160
request pursuant to this division. 161

(2) If there is no surviving person who may make a written 162
request as next of kin for a photograph or suicide note pursuant 163
to division (C)(1) of this section, or if all next of kin of the 164
decedent have died without having made a request pursuant to that 165
division, the coroner shall provide any photograph or suicide note 166
in the coroner's records to the representative of the estate of a 167
decedent who is the subject of the photograph or suicide note upon 168
written request made by the representative. 169

(D) A journalist may submit to the coroner a written request 170
to view preliminary autopsy and investigative notes and findings, 171

suicide notes, or photographs of the decedent made by the coroner 172
or by anyone acting under the coroner's discretion or supervision. 173
The request shall include the journalist's name and title and the 174
name and address of the journalist's employer and state that the 175
granting of the request would be in the best interest of the 176
public. If a journalist submits a written request to the coroner 177
to view the records described in this division, the coroner shall 178
grant the journalist's request. The journalist shall not copy the 179
preliminary autopsy and investigative notes and findings, suicide 180
notes, or photographs of the decedent. 181

(E)(1) An insurer may submit to the coroner a written request 182
to view the full and complete records of the coroner with respect 183
to a deceased person. The request shall include the name of the 184
deceased person, the type of policy to which the written request 185
relates, and the name and address of the insurer. The full and 186
complete records include, but are not limited to, the following: 187

(a) The detailed descriptions of the observations written by 188
the coroner or by anyone acting under the coroner's direction or 189
supervision during the progress of an autopsy and the conclusions 190
drawn from those observations that are filed in the office of the 191
coroner under division (A) of section 313.13 of the Revised Code; 192

(b) Preliminary autopsy and investigative notes and findings 193
made by the coroner or by anyone acting under the coroner's 194
direction or supervision; 195

(c) Photographs of a decedent made by the coroner or by 196
anyone acting under the coroner's direction or supervision; 197

(d) Suicide notes; 198

(e) Medical and psychiatric records provided to the coroner, 199
a deputy coroner, or a representative of the coroner or a deputy 200
coroner under section 313.091 of the Revised Code. 201

(2) If an insurer submits a written request to the coroner to view the records described in division (E)(1) of this section, the coroner shall grant that request. 202
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(3) Upon the granting of a written request by the coroner, the insurer may utilize the records described in division (E)(1) of this section for the following purposes: 205
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(a) To investigate any first party claim or third party claim asserted under a policy of insurance issued by the insurer that arises from the death of the deceased person; 208
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(b) To determine coverage for any first party claim or third party claim asserted under a policy of insurance issued by the insurer that arises from the death of the deceased person; 211
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(c) To determine the insurer's liability for any first party claim or third party claim asserted under a policy of insurance issued by the insurer that arises from the death of the deceased person. 214
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(4) Prior to the delivery of the records described in division (E)(1) of this section, the coroner may require the insurer who submitted the written request for the records to provide a payment to the coroner of a record retrieval and copying fee at the rate of twenty-five cents per page or a minimum fee of one dollar. 218
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(5) Any records produced by the coroner in response to a written request under division (E)(1) of this section shall remain in the care, custody, and control of the insurer and its employees or representatives at all times. The insurer may not release or disclose the records to any other person unless any of the following apply: 224
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(a) The release of the records is reasonably necessary to further a purpose described in division (E)(3) of this section. 230
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<u>(b) A court of competent jurisdiction orders the insurer to produce the records.</u>	232
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<u>(c) The insurer is required to produce the records in response to a civil or criminal subpoena.</u>	234
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<u>(d) The insurer is responding to a request for the records from a law enforcement agency, the department of insurance or a department of insurance from another state, or another governmental authority.</u>	236
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<u>(F) The coroner may contact the decedent's next of kin to inform the next of kin that a journalist or an insurer has submitted a written request pursuant to division (D) or (E) of this section and whether the coroner has granted the journalist's or the insurer's request.</u>	240
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<u>(G) As used in this section:</u>	245
<u>(1) "Insurer" has the same meaning as in section 3901.07 of the Revised Code.</u>	246
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<u>(2) "Journalist" has the same meaning as in section 149.43 of the Revised Code.</u>	248
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<u>Sec. 313.123.</u> <u>(A)(1) As used in this chapter, "autopsy" means the external and internal examination of the body of a deceased person, including, but not limited to, gross visual inspection and dissection of the body and its internal organs, photographic or narrative documentation of findings, microscopic, radiological, toxicological, chemical, or other laboratory analyses performed in the discretion of the examining individual upon tissues, organs, blood, other bodily fluids, gases, or any other specimens and the retention for diagnostic and documentary purposes of tissues, organs, blood, other bodily fluids, gases, or any other specimens as the examining individual considers necessary to establish and defend against challenges to the cause and manner of death of the</u>	250
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deceased person. 262

(2) As used in this section, "DNA specimen" has the same meaning as in section 109.573 of the Revised Code. 263
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(B)(1) Except as otherwise provided in division (B)(2) of this section, retained tissues, organs, blood, other bodily fluids, gases, or any other specimens from an autopsy are medical waste and shall be disposed of in accordance with applicable federal and state laws, including any protocol rules adopted under section 313.122 of the Revised Code. 265
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(2) If an autopsy is performed on a deceased person and pursuant to section 313.131 of the Revised Code the coroner has reason to believe that the autopsy is contrary to the deceased person's religious beliefs, the coroner shall not remove any specimens, including, but not limited to, tissues, organs, blood, or other bodily fluids, from the body of the deceased person unless removing those specimens from the body of the deceased person is a compelling public necessity. Except as otherwise provided in division (B)(3) of this section, if the coroner removes any specimens from the body of the deceased person, the coroner shall return the specimens, as soon as is practicable, to the person who has the right to the disposition of the body. 271
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(3) The coroner may retain a DNA specimen for diagnostic, evidentiary, or confirmatory purposes. 283
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(C) A cause of action shall not lie against any employee of a coroner's office for requesting, ordering, or performing an autopsy in good faith under the authority of this chapter. 285
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Sec. 313.23. (A) As used in this section: 288

(1) "Interested person" means an employee of the coroner's office, a physician, dentist, nurse, professor at a medical school, medical student, medical resident, nursing student, an 289
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employee of a recovery agency, a member of a law enforcement agency, or any other person the coroner, in the coroner's discretion, determines is appropriate. 292
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(2) "Recovery agency" has the same meaning as in section 2108.01 of the Revised Code. 295
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(B) The coroner may allow an interested person to view an autopsy of a decedent without the interested person receiving permission to view the decedent's autopsy from the decedent's next of kin. 297
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(C) No person who is under eighteen years of age and who is not an interested person may view an autopsy. 301
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Sec. 325.17. The officers mentioned in section 325.27 of the Revised Code may appoint and employ the necessary deputies, assistants, clerks, bookkeepers, or other employees for their respective offices, shall fix the compensation of ~~such~~ those employees and discharge them, and shall file certificates of ~~such~~ that action with the county auditor. ~~Such~~ The employees' compensation shall not exceed, in the aggregate, for each office, the amount fixed by the board of county commissioners for ~~such~~ that office. When so fixed, the compensation of each such deputy, assistant, bookkeeper, clerk, and other employee shall be paid biweekly from the county treasury, upon the warrant of the county auditor. The amount of the biweekly payment shall be adjusted so that the total amount paid out to an employee over a period of one year is equal to the amount ~~such~~ the employee would receive if ~~he~~ the employee were paid semimonthly. ~~Each~~ 303
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Each of ~~such~~ the officers mentioned in section 325.27 of the Revised Code may require such of ~~his~~ the officer's employees as ~~he~~ deems the officer considers proper to give bond to the state, in an amount to be fixed by ~~such~~ the officer, with sureties approved 318
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by ~~him~~ the officer, conditioned for the faithful performance of 322
their official duties. ~~Such~~ The bond, with the approval of ~~such~~ 323
~~the officer indorsed thereon~~ endorsed on it, shall be deposited 324
with the county treasurer and kept in ~~his~~ the treasurer's office. 325

From moneys appropriated for their offices, the officers 326
mentioned in section 325.27 of the Revised Code may contract for 327
the services of fiscal and management consultants to aid them in 328
the execution of their powers and duties. 329

Sec. 3705.16. (A) Each death or fetal death that occurs in 330
this state shall be registered with the local registrar of vital 331
statistics of the district in which the death or fetal death 332
occurred, by the funeral director or other person in charge of the 333
final disposition of the remains. The personal and statistical 334
information in the death or fetal death certificate shall be 335
obtained from the best qualified persons or sources available, by 336
the funeral director or other person in charge of the final 337
disposition of the remains. The statement of facts relating to the 338
disposition of the body and information relative to the armed 339
services referred to in section 3705.19 of the Revised Code shall 340
be signed by the funeral director or other person in charge of the 341
final disposition of the remains. ~~The~~ 342

(B) The funeral director or other person in charge of the 343
final disposition of the remains shall ~~then~~ present the death or 344
fetal death certificate to the attending physician ~~or~~ of the 345
decedent, the coroner, or the medical examiner, as appropriate for 346
certification of the cause of death. ~~The~~ If a death or fetal death 347
occurs under any circumstances mentioned in section 313.12 of the 348
Revised Code, the coroner in the county in which the death occurs, 349
or a deputy coroner, medical examiner, or deputy medical examiner 350
servng in an equivalent capacity, shall certify the cause of 351
death unless that death was reported to the coroner, deputy 352

coroner, medical examiner, or deputy medical examiner and that 353
person, after a preliminary examination, declined to assert 354
jurisdiction with respect to the death or fetal death. A physician 355
other than the coroner in the county in which a death or fetal 356
death occurs, or a deputy coroner, medical examiner, or deputy 357
medical examiner serving in an equivalent capacity, may certify 358
only those deaths that occur under natural circumstances. 359

The medical certificate of death shall be completed and 360
signed by the physician who attended the ~~deceased~~ decedent or by 361
the coroner or medical examiner, as appropriate, within 362
forty-eight hours after the death or fetal death. ~~The~~ A coroner or 363
medical examiner may satisfy the requirement of signing a ~~death~~ 364
medical certificate showing the cause of death or fetal death as 365
pending either by stamping it with a stamp of the coroner's or 366
medical examiner's signature or by signing it in the coroner's or 367
medical examiner's own hand, but the coroner or medical examiner 368
shall sign ~~a death~~ any other medical certificate of death or 369
supplementary medical certification in the coroner's or medical 370
examiner's own hand. ~~Any~~ 371

(C) Any death certificate registered pursuant to this section 372
shall contain the social security number of the decedent, if 373
available. A social security number obtained under this section is 374
a public record under section 149.43 of the Revised Code. 375

Sec. 3705.29. (A) No person shall do any of the following: 376

(1) Purposely make any false statement in a certificate, 377
record, or report required by this chapter or in an application or 378
amendment of it, or purposely supply false information with the 379
intent that ~~such~~ that information be used in the preparation of 380
any such report, record, or certificate, or amendment of it; 381

(2) Without lawful authority and with intent to deceive, 382
counterfeit, alter, amend, or mutilate any certificate, record, or 383

report required by this chapter or any certified copy of it;	384
(3) Purposely obtain, possess, use, sell, furnish, or attempt to obtain, possess, use, sell, or furnish to another for the purpose of deception any certificate, record, or report required by this chapter or <u>any</u> certified copy of it, or any certificate, record, or report that is counterfeit, altered, or amended or false in whole or part;	385 386 387 388 389 390
(4) Purposely obtain, possess, use, sell, furnish, or attempt to obtain, possess, use, sell, or furnish to another for the purpose of deception any certificate, record, or report required by this chapter, or <u>any</u> certified copy of it, that relates to the birth of another person, whether living or dead;	391 392 393 394 395
(5) Without lawful authority, possess any certificate, record, or report required by this chapter or any copy of such a certificate, record, or report, knowing it to have been stolen or otherwise unlawfully obtained.	396 397 398 399
(B) No person employed by the office of vital statistics or a local registrar shall purposely furnish or possess a birth record or certified copy of a birth record with intent that it be used for deception.	400 401 402 403
(C) No person shall do any of the following:	404
(1) Purposely refuse to provide information required by this chapter or rules adopted under it;	405 406
(2) Purposely transport out of this state or accept for interment or other disposition a dead body without a permit required by this chapter;	407 408 409
(3) Knowingly prepare, issue, sell, or give any record or certificate that is alleged to be an original vital record or a certified copy of a vital record if the person knows or has reason to know that it is not an original vital record or a certified	410 411 412 413

copy of a vital record;

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(4) Refuse to comply with the requirements of this chapter or
violate any of the provisions of this chapter.

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(D) No officer or employee of the department of health shall
knowingly reveal or provide any information contained in an
adoption file maintained by the department under section 3705.12
of the Revised Code to any person, or knowingly reveal or provide
the contents of an adoption file to any person, unless authorized
to do so by section 3705.12 of the Revised Code.

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(E) If a death or fetal death occurs under any circumstances
mentioned in section 313.12 of the Revised Code, the coroner of
the county in which the death or fetal death occurs, or a deputy
coroner, medical examiner, or deputy medical examiner serving in
an equivalent capacity, shall certify the cause of that death
unless the death was reported to the coroner, deputy coroner,
medical examiner, or deputy medical examiner and that person,
after a preliminary examination, declined to assert jurisdiction
with respect to the death or fetal death.

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(F) No physician other than the coroner in the county in
which a death or fetal death occurs, or a deputy coroner, medical
examiner, or deputy medical examiner serving in an equivalent
capacity, may certify any death or fetal death that occurs under
any circumstances other than natural.

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(G) If a death or fetal death occurs under any circumstances
mentioned in section 313.12 of the Revised Code, no person shall
knowingly present a death or fetal death certificate for the
purpose of obtaining certification of the cause of death to any
physician other than the coroner in the county in which the death
or fetal death occurred, or to a deputy coroner, medical examiner,
or deputy medical examiner serving in an equivalent capacity,
unless that death or fetal death was reported to the coroner,

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deputy coroner, medical examiner, or deputy medical examiner and 445
that person, after a preliminary examination, declined to assert 446
jurisdiction with respect to the death or fetal death. 447

(H) No person, with intent to defraud or knowing that the 448
person is facilitating a fraud, shall do either of the following: 449

(1) Certify a cause of death in violation of the prohibition 450
of division (E) or (F) of this section; 451

(2) Obtain or attempt to obtain a certification of the cause 452
of a death or fetal death in violation of the prohibition of 453
division (G) of this section. 454

Sec. 3705.99. (A) Whoever violates division (A) ~~or~~, (B), or 455
(H) of section 3705.29 of the Revised Code shall be fined not more 456
than ten thousand dollars or incarcerated for a term of not more 457
than five years, or both. 458

(B) Whoever violates division (C), (E), (F), or (G) of 459
section 3705.29 of the Revised Code shall be fined not more than 460
one thousand dollars or incarcerated for a term of not more than 461
one year, or both. 462

(C) Whoever violates division (D) of section 3705.29 of the 463
Revised Code is guilty of a misdemeanor of the third degree. 464

Sec. 3901.21. The following are hereby defined as unfair and 465
deceptive acts or practices in the business of insurance: 466

(A) Making, issuing, circulating, or causing or permitting to 467
be made, issued, or circulated, or preparing with intent to so 468
use, any estimate, illustration, circular, or statement 469
misrepresenting the terms of any policy issued or to be issued or 470
the benefits or advantages promised thereby or the dividends or 471
share of the surplus to be received thereon, or making any false 472
or misleading statements as to the dividends or share of surplus 473

previously paid on similar policies, or making any misleading 474
representation or any misrepresentation as to the financial 475
condition of any insurer as shown by the last preceding verified 476
statement made by it to the insurance department of this state, or 477
as to the legal reserve system upon which any life insurer 478
operates, or using any name or title of any policy or class of 479
policies misrepresenting the true nature thereof, or making any 480
misrepresentation or incomplete comparison to any person for the 481
purpose of inducing or tending to induce such person to purchase, 482
amend, lapse, forfeit, change, or surrender insurance. 483

Any written statement concerning the premiums for a policy 484
which refers to the net cost after credit for an assumed dividend, 485
without an accurate written statement of the gross premiums, cash 486
values, and dividends based on the insurer's current dividend 487
scale, which are used to compute the net cost for such policy, and 488
a prominent warning that the rate of dividend is not guaranteed, 489
is a misrepresentation for the purposes of this division. 490

(B) Making, publishing, disseminating, circulating, or 491
placing before the public or causing, directly or indirectly, to 492
be made, published, disseminated, circulated, or placed before the 493
public, in a newspaper, magazine, or other publication, or in the 494
form of a notice, circular, pamphlet, letter, or poster, or over 495
any radio station, or in any other way, or preparing with intent 496
to so use, an advertisement, announcement, or statement containing 497
any assertion, representation, or statement, with respect to the 498
business of insurance or with respect to any person in the conduct 499
of the person's insurance business, which is untrue, deceptive, or 500
misleading. 501

(C) Making, publishing, disseminating, or circulating, 502
directly or indirectly, or aiding, abetting, or encouraging the 503
making, publishing, disseminating, or circulating, or preparing 504
with intent to so use, any statement, pamphlet, circular, article, 505

or literature, which is false as to the financial condition of an 506
insurer and which is calculated to injure any person engaged in 507
the business of insurance. 508

(D) Filing with any supervisory or other public official, or 509
making, publishing, disseminating, circulating, or delivering to 510
any person, or placing before the public, or causing directly or 511
indirectly to be made, published, disseminated, circulated, 512
delivered to any person, or placed before the public, any false 513
statement of financial condition of an insurer. 514

Making any false entry in any book, report, or statement of 515
any insurer with intent to deceive any agent or examiner lawfully 516
appointed to examine into its condition or into any of its 517
affairs, or any public official to whom such insurer is required 518
by law to report, or who has authority by law to examine into its 519
condition or into any of its affairs, or, with like intent, 520
willfully omitting to make a true entry of any material fact 521
pertaining to the business of such insurer in any book, report, or 522
statement of such insurer, or mutilating, destroying, suppressing, 523
withholding, or concealing any of its records. 524

(E) Issuing or delivering or permitting agents, officers, or 525
employees to issue or deliver agency company stock or other 526
capital stock or benefit certificates or shares in any common-law 527
corporation or securities or any special or advisory board 528
contracts or other contracts of any kind promising returns and 529
profits as an inducement to insurance. 530

(F) Making or permitting any unfair discrimination among 531
individuals of the same class and equal expectation of life in the 532
rates charged for any contract of life insurance or of life 533
annuity or in the dividends or other benefits payable thereon, or 534
in any other of the terms and conditions of such contract. 535

(G)(1) Except as otherwise expressly provided by law, 536

knowingly permitting or offering to make or making any contract of 537
life insurance, life annuity or accident and health insurance, or 538
agreement as to such contract other than as plainly expressed in 539
the contract issued thereon, or paying or allowing, or giving or 540
offering to pay, allow, or give, directly or indirectly, as 541
inducement to such insurance, or annuity, any rebate of premiums 542
payable on the contract, or any special favor or advantage in the 543
dividends or other benefits thereon, or any valuable consideration 544
or inducement whatever not specified in the contract; or giving, 545
or selling, or purchasing, or offering to give, sell, or purchase, 546
as inducement to such insurance or annuity or in connection 547
therewith, any stocks, bonds, or other securities, or other 548
obligations of any insurance company or other corporation, 549
association, or partnership, or any dividends or profits accrued 550
thereon, or anything of value whatsoever not specified in the 551
contract. 552

(2) Nothing in division (F) or division (G)(1) of this 553
section shall be construed as prohibiting any of the following 554
practices: (a) in the case of any contract of life insurance or 555
life annuity, paying bonuses to policyholders or otherwise abating 556
their premiums in whole or in part out of surplus accumulated from 557
nonparticipating insurance, provided that any such bonuses or 558
abatment of premiums shall be fair and equitable to policyholders 559
and for the best interests of the company and its policyholders; 560
(b) in the case of life insurance policies issued on the 561
industrial debit plan, making allowance to policyholders who have 562
continuously for a specified period made premium payments directly 563
to an office of the insurer in an amount which fairly represents 564
the saving in collection expenses; (c) readjustment of the rate of 565
premium for a group insurance policy based on the loss or expense 566
experience thereunder, at the end of the first or any subsequent 567
policy year of insurance thereunder, which may be made retroactive 568

only for such policy year.	569
(H) Making, issuing, circulating, or causing or permitting to be made, issued, or circulated, or preparing with intent to so use, any statement to the effect that a policy of life insurance is, is the equivalent of, or represents shares of capital stock or any rights or options to subscribe for or otherwise acquire any such shares in the life insurance company issuing that policy or any other company.	570 571 572 573 574 575 576
(I) Making, issuing, circulating, or causing or permitting to be made, issued or circulated, or preparing with intent to so issue, any statement to the effect that payments to a policyholder of the principal amounts of a pure endowment are other than payments of a specific benefit for which specific premiums have been paid.	577 578 579 580 581 582
(J) Making, issuing, circulating, or causing or permitting to be made, issued, or circulated, or preparing with intent to so use, any statement to the effect that any insurance company was required to change a policy form or related material to comply with Title XXXIX of the Revised Code or any regulation of the superintendent of insurance, for the purpose of inducing or intending to induce any policyholder or prospective policyholder to purchase, amend, lapse, forfeit, change, or surrender insurance.	583 584 585 586 587 588 589 590 591
(K) Aiding or abetting another to violate this section.	592
(L) Refusing to issue any policy of insurance, or canceling or declining to renew such policy because of the sex or marital status of the applicant, prospective insured, insured, or policyholder.	593 594 595 596
(M) Making or permitting any unfair discrimination between individuals of the same class and of essentially the same hazard in the amount of premium, policy fees, or rates charged for any	597 598 599

policy or contract of insurance, other than life insurance, or in 600
the benefits payable thereunder, or in underwriting standards and 601
practices or eligibility requirements, or in any of the terms or 602
conditions of such contract, or in any other manner whatever. 603

(N) Refusing to make available disability income insurance 604
solely because the applicant's principal occupation is that of 605
managing a household. 606

(O) Refusing, when offering maternity benefits under any 607
individual or group sickness and accident insurance policy, to 608
make maternity benefits available to the policyholder for the 609
individual or individuals to be covered under any comparable 610
policy to be issued for delivery in this state, including family 611
members if the policy otherwise provides coverage for family 612
members. Nothing in this division shall be construed to prohibit 613
an insurer from imposing a reasonable waiting period for such 614
benefits under an individual sickness and accident insurance 615
policy issued to an individual who is not a federally eligible 616
individual or a nonemployer-related group sickness and accident 617
insurance policy, but in no event shall such waiting period exceed 618
two hundred seventy days. 619

For purposes of division (O) of this section, "federally 620
eligible individual" means an eligible individual as defined in 45 621
C.F.R. 148.103. 622

(P) Using, or permitting to be used, a pattern settlement as 623
the basis of any offer of settlement. As used in this division, 624
"pattern settlement" means a method by which liability is 625
routinely imputed to a claimant without an investigation of the 626
particular occurrence upon which the claim is based and by using a 627
predetermined formula for the assignment of liability arising out 628
of occurrences of a similar nature. Nothing in this division shall 629
be construed to prohibit an insurer from determining a claimant's 630

liability by applying formulas or guidelines to the facts and 631
circumstances disclosed by the insurer's investigation of the 632
particular occurrence upon which a claim is based. 633

(Q) Refusing to insure, or refusing to continue to insure, or 634
limiting the amount, extent, or kind of life or sickness and 635
accident insurance or annuity coverage available to an individual, 636
or charging an individual a different rate for the same coverage 637
solely because of blindness or partial blindness. With respect to 638
all other conditions, including the underlying cause of blindness 639
or partial blindness, persons who are blind or partially blind 640
shall be subject to the same standards of sound actuarial 641
principles or actual or reasonably anticipated actuarial 642
experience as are sighted persons. Refusal to insure includes, but 643
is not limited to, denial by an insurer of disability insurance 644
coverage on the grounds that the policy defines "disability" as 645
being presumed in the event that the eyesight of the insured is 646
lost. However, an insurer may exclude from coverage disabilities 647
consisting solely of blindness or partial blindness when such 648
conditions existed at the time the policy was issued. To the 649
extent that the provisions of this division may appear to conflict 650
with any provision of section 3999.16 of the Revised Code, this 651
division applies. 652

(R)(1) Directly or indirectly offering to sell, selling, or 653
delivering, issuing for delivery, renewing, or using or otherwise 654
marketing any policy of insurance or insurance product in 655
connection with or in any way related to the grant of a student 656
loan guaranteed in whole or in part by an agency or commission of 657
this state or the United States, except insurance that is required 658
under federal or state law as a condition for obtaining such a 659
loan and the premium for which is included in the fees and charges 660
applicable to the loan; or, in the case of an insurer or insurance 661
agent, knowingly permitting any lender making such loans to engage 662

in such acts or practices in connection with the insurer's or
agent's insurance business.

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(2) Except in the case of a violation of division (G) of this
section, division (R)(1) of this section does not apply to either
of the following:

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(a) Acts or practices of an insurer, its agents,
representatives, or employees in connection with the grant of a
guaranteed student loan to its insured or the insured's spouse or
dependent children where such acts or practices take place more
than ninety days after the effective date of the insurance;

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(b) Acts or practices of an insurer, its agents,
representatives, or employees in connection with the solicitation,
processing, or issuance of an insurance policy or product covering
the student loan borrower or the borrower's spouse or dependent
children, where such acts or practices take place more than one
hundred eighty days after the date on which the borrower is
notified that the student loan was approved.

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(S) Denying coverage, under any health insurance or health
care policy, contract, or plan providing family coverage, to any
natural or adopted child of the named insured or subscriber solely
on the basis that the child does not reside in the household of
the named insured or subscriber.

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(T)(1) Using any underwriting standard or engaging in any
other act or practice that, directly or indirectly, due solely to
any health status-related factor in relation to one or more
individuals, does either of the following:

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(a) Terminates or fails to renew an existing individual
policy, contract, or plan of health benefits, or a health benefit
plan issued to an employer, for which an individual would
otherwise be eligible;

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(b) With respect to a health benefit plan issued to an employer, excludes or causes the exclusion of an individual from coverage under an existing employer-provided policy, contract, or plan of health benefits.

(2) The superintendent of insurance may adopt rules in accordance with Chapter 119. of the Revised Code for purposes of implementing division (T)(1) of this section.

(3) For purposes of division (T)(1) of this section, "health status-related factor" means any of the following:

(a) Health status;

(b) Medical condition, including both physical and mental illnesses;

(c) Claims experience;

(d) Receipt of health care;

(e) Medical history;

(f) Genetic information;

(g) Evidence of insurability, including conditions arising out of acts of domestic violence;

(h) Disability.

(U) With respect to a health benefit plan issued to a small employer, as those terms are defined in section 3924.01 of the Revised Code, negligently or willfully placing coverage for adverse risks with a certain carrier, as defined in section 3924.01 of the Revised Code.

(V) Using any program, scheme, device, or other unfair act or practice that, directly or indirectly, causes or results in the placing of coverage for adverse risks with another carrier, as defined in section 3924.01 of the Revised Code.

(W) Failing to comply with section 3923.23, 3923.231,

3923.232, 3923.233, or 3923.234 of the Revised Code by engaging in
any unfair, discriminatory reimbursement practice.

(X) Intentionally establishing an unfair premium for, or
misrepresenting the cost of, any insurance policy financed under a
premium finance agreement of an insurance premium finance company.

(Y)(1)(a) Limiting coverage under, refusing to issue,
canceling, or refusing to renew, any individual policy or contract
of life insurance, or limiting coverage under or refusing to issue
any individual policy or contract of health insurance, for the
reason that the insured or applicant for insurance is or has been
a victim of domestic violence;

(b) Adding a surcharge or rating factor to a premium of any
individual policy or contract of life or health insurance for the
reason that the insured or applicant for insurance is or has been
a victim of domestic violence;

(c) Denying coverage under, or limiting coverage under, any
policy or contract of life or health insurance, for the reason
that a claim under the policy or contract arises from an incident
of domestic violence;

(d) Inquiring, directly or indirectly, of an insured under,
or of an applicant for, a policy or contract of life or health
insurance, as to whether the insured or applicant is or has been a
victim of domestic violence, or inquiring as to whether the
insured or applicant has sought shelter or protection from
domestic violence or has sought medical or psychological treatment
as a victim of domestic violence.

(2) Nothing in division (Y)(1) of this section shall be
construed to prohibit an insurer from inquiring as to, or from
underwriting or rating a risk on the basis of, a person's physical
or mental condition, even if the condition has been caused by
domestic violence, provided that all of the following apply:

(a) The insurer routinely considers the condition in 753
underwriting or in rating risks, and does so in the same manner 754
for a victim of domestic violence as for an insured or applicant 755
who is not a victim of domestic violence; 756

(b) The insurer does not refuse to issue any policy or 757
contract of life or health insurance or cancel or refuse to renew 758
any policy or contract of life insurance, solely on the basis of 759
the condition, except where such refusal to issue, cancellation, 760
or refusal to renew is based on sound actuarial principles or is 761
related to actual or reasonably anticipated experience; 762

(c) The insurer does not consider a person's status as being 763
or as having been a victim of domestic violence, in itself, to be 764
a physical or mental condition; 765

(d) The underwriting or rating of a risk on the basis of the 766
condition is not used to evade the intent of division (Y)(1) of 767
this section, or of any other provision of the Revised Code. 768

(3)(a) Nothing in division (Y)(1) of this section shall be 769
construed to prohibit an insurer from refusing to issue a policy 770
or contract of life insurance insuring the life of a person who is 771
or has been a victim of domestic violence if the person who 772
committed the act of domestic violence is the applicant for the 773
insurance or would be the owner of the insurance policy or 774
contract. 775

(b) Nothing in division (Y)(2) of this section shall be 776
construed to permit an insurer to cancel or refuse to renew any 777
policy or contract of health insurance in violation of the "Health 778
Insurance Portability and Accountability Act of 1996," 110 Stat. 779
1955, 42 U.S.C.A. 300gg-41(b), as amended, or in a manner that 780
violates or is inconsistent with any provision of the Revised Code 781
that implements the "Health Insurance Portability and 782
Accountability Act of 1996." 783

(4) An insurer is immune from any civil or criminal liability 784
that otherwise might be incurred or imposed as a result of any 785
action taken by the insurer to comply with division (Y) of this 786
section. 787

(5) As used in division (Y) of this section, "domestic 788
violence" means any of the following acts: 789

(a) Knowingly causing or attempting to cause physical harm to 790
a family or household member; 791

(b) Recklessly causing serious physical harm to a family or 792
household member; 793

(c) Knowingly causing, by threat of force, a family or 794
household member to believe that the person will cause imminent 795
physical harm to the family or household member. 796

For the purpose of division (Y)(5) of this section, "family 797
or household member" has the same meaning as in section 2919.25 of 798
the Revised Code. 799

Nothing in division (Y)(5) of this section shall be construed 800
to require, as a condition to the application of division (Y) of 801
this section, that the act described in division (Y)(5) of this 802
section be the basis of a criminal prosecution. 803

(Z) Disclosing a coroner's records by an insurer in violation 804
of section 313.10 of the Revised Code. 805

With respect to private passenger automobile insurance, no 806
insurer shall charge different premium rates to persons residing 807
within the limits of any municipal corporation based solely on the 808
location of the residence of the insured within those limits. 809

The enumeration in sections 3901.19 to 3901.26 of the Revised 810
Code of specific unfair or deceptive acts or practices in the 811
business of insurance is not exclusive or restrictive or intended 812
to limit the powers of the superintendent of insurance to adopt 813

rules to implement this section, or to take action under other
sections of the Revised Code.

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This section does not prohibit the sale of shares of any
investment company registered under the "Investment Company Act of
1940," 54 Stat. 789, 15 U.S.C.A. 80a-1, as amended, or any
policies, annuities, or other contracts described in section
3907.15 of the Revised Code.

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As used in this section, "estimate," "statement,"
"representation," "misrepresentation," "advertisement," or
"announcement" includes oral or written occurrences.

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Sec. 4705.01. No person shall be permitted to practice as an
attorney and counselor at law, or to commence, conduct, or defend
any action or proceeding in which the person is not a party
concerned, either by using or subscribing the person's own name,
or the name of another person, unless the person has been admitted
to the bar by order of the supreme court in compliance with its
prescribed and published rules. Except as provided in section
4705.09 of the Revised Code or in rules adopted by the supreme
court, admission to the bar shall entitle the person to practice
before any court or administrative tribunal without further
qualification or license.

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No sheriff ~~or coroner~~ shall practice as an attorney at law in
any court of this state, and no clerk of the supreme court or
court of common pleas, or the deputy of either, shall practice in
the particular court of which that person is clerk or deputy.

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No coroner in a county with a population of one hundred
seventy-five thousand one or more who elects not to engage in the
private practice of medicine pursuant to section 325.15 of the
Revised Code shall practice as an attorney at law during the
period in which the coroner may not engage in the private practice

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of medicine.

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No judge of any court of record in this state shall engage in the practice of law during the judge's term of office, either by appearing in court, by acting as advisory or consulting counsel for attorneys or others, by accepting employment or acting as an attorney, solicitor, collector, or legal advisor for any bank, corporation, or loan or trust company, or by otherwise engaging in the practice of law in this state, in or out of the courts, except as provided in section 1901.11 of the Revised Code.

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A judge may complete any business undertaken by the judge in the United States district court, the United States circuit court of appeals, or the supreme court of the United States prior to the judge's election as judge.

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Sec. 4731.053. (A) As used in this section, "physician" means an individual authorized by this chapter to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery.

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(B) The state medical board shall adopt rules that establish standards to be met and procedures to be followed by a physician with respect to the physician's delegation of the performance of a medical task to a person who is not licensed or otherwise specifically authorized by the Revised Code to perform the task. The rules shall be adopted in accordance with Chapter 119. of the Revised Code and shall include a coroner's investigator among the individuals who are competent to recite the facts of a deceased person's medical condition to a physician so that the physician may pronounce the person dead without personally examining the body.

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(C) To the extent that delegation applies to the administration of drugs, the rules adopted under this section

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shall provide for all of the following: 874

(1) On-site supervision when the delegation occurs in an 875
institution or other facility that is used primarily for the 876
purpose of providing health care, unless the board establishes a 877
specific exception to the on-site supervision requirement with 878
respect to routine administration of a topical drug, such as the 879
use of a medicated shampoo; 880

(2) Evaluation of whether delegation is appropriate according 881
to the acuity of the patient involved; 882

(3) Training and competency requirements that must be met by 883
the person administering the drugs; 884

(4) Other standards and procedures the board considers 885
relevant. 886

(D) The board shall not adopt rules that do any of the 887
following: 888

(1) Authorize a physician to transfer the physician's 889
responsibility for supervising a person who is performing a 890
delegated medical task to a health professional other than another 891
physician; 892

(2) Authorize an individual to whom a medical task is 893
delegated to delegate the performance of that task to another 894
individual; 895

(3) Except as provided in divisions (D)(4) to (7) of this 896
section, authorize a physician to delegate the administration of 897
anesthesia, controlled substances, drugs administered 898
intravenously, or any other drug or category of drug the board 899
considers to be inappropriate for delegation; 900

(4) Prevent an individual from engaging in an activity 901
performed for a handicapped child as a service needed to meet the 902
educational needs of the child, as identified in the 903

individualized education program developed for the child under	904
Chapter 3323. of the Revised Code;	905
(5) Conflict with any provision of the Revised Code that	906
specifically authorizes an individual to perform a particular	907
task;	908
(6) Conflict with any rule adopted pursuant to the Revised	909
Code that is in effect on the effective date of this section <u>April</u>	910
<u>10, 2001</u> , as long as the rule remains in effect, specifically	911
authorizing an individual to perform a particular task;	912
(7) Prohibit a perfusionist from administering drugs	913
intravenously while practicing as a perfusionist;	914
(8) Authorize a physician assistant, anesthesiologist	915
assistant, or any other professional regulated by the board to	916
delegate tasks pursuant to this section.	917
Section 2. That existing sections 313.05, 313.08, 313.10,	918
325.17, 3705.16, 3705.29, 3705.99, 3901.21, 4705.01, and 4731.053	919
of the Revised Code are hereby repealed.	920