

As Reported by the House Health Committee

133rd General Assembly

Regular Session

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Sub. H. B. No. 341

Representative Ginter

Cosponsors: Representatives Seitz, Blair, Lightbody, Koehler, Liston

A BILL

To amend sections 4723.52, 4729.45, 4729.553, 1
4729.80, 4730.56, and 4731.83 of the Revised 2
Code regarding the administration of addiction 3
treatment drugs and federal agency access to the 4
Ohio Automated Rx Reporting System. 5

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

Section 1. That sections 4723.52, 4729.45, 4729.553, 6
4729.80, 4730.56, and 4731.83 of the Revised Code be amended to 7
read as follows: 8

Sec. 4723.52. (A) As used in this section: 9

(1) "Community addiction services provider" has the same 10
meaning as in section 5119.01 of the Revised Code. 11

(2) "Medication-assisted treatment" has the same meaning 12
as in section 340.01 of the Revised Code. 13

(B) An advanced practice registered nurse shall comply 14
with section 3719.064 of the Revised Code and rules adopted 15
under section 4723.51 of the Revised Code when treating a 16
patient for addiction with medication-assisted treatment or 17

proposing to initiate such treatment. 18

(C) An advanced practice registered nurse who fails to 19
comply with this section shall treat not more than thirty 20
patients at any one time with medication-assisted treatment even 21
if the facility or location at which the treatment is provided 22
is either of the following: 23

(1) Exempted by divisions (B) (2) (a) to (d) or (i) of 24
section 4729.553 of the Revised Code from being required to 25
possess a category III terminal distributor of dangerous drugs 26
license with an office-based opioid treatment classification; 27

(2) A community addiction services provider that provides 28
alcohol and drug addiction services that are certified by the 29
department of mental health and addiction services under section 30
5119.36 of the Revised Code. 31

Sec. 4729.45. (A) As used in this section, "physician" 32
means an individual authorized under Chapter 4731. of the 33
Revised Code to practice medicine and surgery or osteopathic 34
medicine and surgery. 35

(B) (1) Subject to division (C) of this section, a 36
pharmacist licensed under this chapter may administer by 37
injection any of the following drugs as long as the drug that is 38
to be administered has been prescribed by a physician and the 39
individual to whom the drug was prescribed has an ongoing 40
physician-patient relationship with the physician: 41

(a) ~~An opioid antagonist used for treatment of drug~~ 42
~~addiction and~~ An addiction treatment drug administered in a 43
long-acting or extended-release form; 44

(b) An antipsychotic drug administered in a long-acting or 45
extended-release form; 46

(c) Hydroxyprogesterone caproate;	47
(d) Medroxyprogesterone acetate;	48
(e) Cobalamin.	49
(2) As part of engaging in the administration of drugs by injection pursuant to this section, a pharmacist may administer epinephrine or diphenhydramine, or both, to an individual in an emergency situation resulting from an adverse reaction to a drug administered by the pharmacist.	50 51 52 53 54
(C) To be authorized to administer drugs pursuant to this section, a pharmacist must do all of the following:	55 56
(1) Successfully complete a course in the administration of drugs that satisfies the requirements established by the state board of pharmacy in rules adopted under division (H) (1) (a) of this section;	57 58 59 60
(2) Receive and maintain certification to perform basic life-support procedures by successfully completing a basic life-support training course that is certified by the American red cross or American heart association or approved by the state board of pharmacy;	61 62 63 64 65
(3) Practice in accordance with a protocol that meets the requirements of division (F) of this section.	66 67
(D) Each time a pharmacist administers a drug pursuant to this section, the pharmacist shall do all of the following:	68 69
(1) Obtain permission in accordance with the procedures specified in rules adopted under division (H) of this section and comply with the following requirements:	70 71 72
(a) Except as provided in division (D) (1) (c) of this	73

section, for each drug administered by a pharmacist to an 74
individual who is eighteen years of age or older, the pharmacist 75
shall obtain permission from the individual. 76

(b) For each drug administered by a pharmacist to an 77
individual who is under eighteen years of age, the pharmacist 78
shall obtain permission from the individual's parent or other 79
person having care or charge of the individual. 80

(c) For each drug administered by a pharmacist to an 81
individual who lacks the capacity to make informed health care 82
decisions, the pharmacist shall obtain permission from the 83
person authorized to make such decisions on the individual's 84
behalf. 85

(2) In the case of ~~an opioid antagonist~~ an addiction 86
treatment drug described in division (B) (1) (a) of this section, 87
obtain in accordance with division (E) of this section test 88
results indicating that it is appropriate to administer the drug 89
to the individual if either of the following is to be 90
administered: 91

(a) The initial dose of the drug; 92

(b) Any subsequent dose, if the administration occurs more 93
than thirty days after the previous dose of the drug was 94
administered. 95

(3) Observe the individual to whom the drug is 96
administered to determine whether the individual has an adverse 97
reaction to the drug; 98

(4) Notify the physician who prescribed the drug that the 99
drug has been administered to the individual. 100

(E) A pharmacist may obtain the test results described in 101

division (D) (2) of this section in either of the following ways:	102
(1) From the physician;	103
(2) By ordering blood and urine tests for the individual	104
to whom the opioid antagonist <u>drug</u> is to be administered.	105
If a pharmacist orders blood and urine tests, the	106
pharmacist shall evaluate the results of the tests to determine	107
whether they indicate that it is appropriate to administer the	108
opioid antagonist <u>drug</u> . A pharmacist's authority to evaluate	109
test results under this division does not authorize the	110
pharmacist to make a diagnosis.	111
(F) All of the following apply with respect to the	112
protocol required by division (C) (3) of this section:	113
(1) The protocol must be established by a physician who	114
has a scope of practice that includes treatment of the condition	115
for which the individual has been prescribed the drug to be	116
administered.	117
(2) The protocol must satisfy the requirements established	118
in rules adopted under division (H) (1) (b) of this section.	119
(3) The protocol must do all of the following:	120
(a) Specify a definitive set of treatment guidelines;	121
(b) Specify the locations at which a pharmacist may engage	122
in the administration of drugs pursuant to this section;	123
(c) Include provisions for implementing the requirements	124
of division (D) of this section, including for purposes of	125
division (D) (3) of this section provisions specifying the length	126
of time and location at which a pharmacist must observe an	127
individual who receives a drug to determine whether the	128

individual has an adverse reaction to the drug;	129
(d) Specify procedures to be followed by a pharmacist when administering epinephrine, diphenhydramine, or both, to an individual who has an adverse reaction to a drug administered by the pharmacist.	130 131 132 133
(G) A pharmacist shall not do either of the following:	134
(1) Engage in the administration of drugs pursuant to this section unless the requirements of division (C) of this section have been met;	135 136 137
(2) Delegate to any person the pharmacist's authority to engage in the administration of drugs pursuant to this section.	138 139
(H) (1) The state board of pharmacy shall adopt rules to implement this section. The rules shall be adopted in accordance with Chapter 119. of the Revised Code and include all of the following:	140 141 142 143
(a) Requirements for courses in administration of drugs;	144
(b) Requirements for protocols to be followed by pharmacists in administering drugs pursuant to this section;	145 146
(c) Procedures to be followed by a pharmacist in obtaining permission to administer a drug to an individual.	147 148
(2) The board shall consult with the state medical board before adopting rules regarding requirements for protocols under this section.	149 150 151
Sec. 4729.553. (A) As used in this section:	152
(1) <u>"Advanced practice registered nurse" has the same meaning as in section 4723.01 of the Revised Code.</u>	153 154
(2) <u>"Controlled substance" has the same meaning as in</u>	155

section 3719.01 of the Revised Code.	156
(2) <u>(3)</u> "Hospital" means a hospital registered with the department of health under section 3701.07 of the Revised Code.	157 158
(3) <u>(4)</u> "Office-based opioid treatment" means the treatment of opioid dependence or addiction using a controlled substance.	159 160 161
<u>(5) "Physician" means an individual who is authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.</u>	162 163 164
<u>(6) "Physician assistant" means an individual who is licensed under Chapter 4730. of the Revised Code.</u>	165 166
(B) (1) Except as provided in division <u>divisions</u> (B) (2) <u>and</u> <u>(3)</u> of this section, no person shall knowingly operate a facility, clinic, or other location where a prescriber provides office-based opioid treatment to more than thirty patients or that meets any other identifying criteria established in rules adopted under this section without holding a category III terminal distributor of dangerous drugs license with an office-based opioid treatment classification.	167 168 169 170 171 172 173 174
(2) Division (B) (1) of this section does not apply to any of the following:	175 176
(a) A hospital;	177
(b) A facility for the treatment of opioid dependence or addiction that is operated by a hospital;	178 179
(c) A physician practice owned or controlled, in whole or in part, by a hospital or by an entity that owns or controls, in whole or in part, one or more hospitals;	180 181 182

(d) A facility that conducts only clinical research and	183
uses controlled substances in studies approved by a hospital-	184
based institutional review board or an institutional review	185
board that is accredited by the association for the	186
accreditation of human research protection programs, inc.;	187
(e) A facility that holds a category III terminal	188
distributor of dangerous drugs license in accordance with	189
section 4729.54 of the Revised Code for the purpose of treating	190
drug dependence or addiction as part of an opioid treatment	191
program and is the subject of a current, valid certification	192
from the substance abuse and mental health services	193
administration of the United States department of health and	194
human services pursuant to 42 C.F.R. 8.11;	195
(f) A program or facility that holds a license or	196
certification issued by the department of mental health and	197
addiction services under Chapter 5119. of the Revised Code if	198
the license or certification is approved by the state board of	199
pharmacy;	200
(g) A federally qualified health center or federally	201
qualified health center look-alike, as defined in section	202
3701.047 of the Revised Code;	203
(h) A state or local correctional facility, as defined in	204
section 5163.45 of the Revised Code;	205
(i) <u>A facility in which patients are treated on-site for</u>	206
<u>opioid dependence or addiction exclusively through direct</u>	207
<u>administration by a physician, physician assistant, or advanced</u>	208
<u>practice registered nurse of drugs that are used for treatment</u>	209
<u>of opioid dependence or addiction and are neither dispensed nor</u>	210
<u>personally furnished to patients for off-site self-</u>	211

<u>administration;</u>	212
<u>(j) Any other facility specified in rules adopted under</u>	213
this section.	214
<u>(3) A patient who receives treatment on-site for opioid</u>	215
<u>dependence or addiction through direct administration of a drug</u>	216
<u>by a physician, physician assistant, or advanced practice</u>	217
<u>registered nurse shall not be included in determining whether</u>	218
<u>more than thirty patients are being provided office-based opioid</u>	219
<u>treatment in a particular facility, clinic, or other location</u>	220
<u>that is subject to division (B) (1) of this section.</u>	221
(C) To be eligible to receive a license as a category III	222
terminal distributor of dangerous drugs with an office-based	223
opioid treatment classification, an applicant shall submit	224
evidence satisfactory to the <u>state board of pharmacy</u> that the	225
applicant's office-based opioid treatment will be operated in	226
accordance with the requirements specified in division (D) of	227
this section and that the applicant meets any other applicable	228
requirements of this chapter.	229
If the board determines that an applicant meets all of the	230
requirements, the board shall issue to the applicant a license	231
as a category III terminal distributor of dangerous drugs with	232
an office-based opioid treatment classification.	233
(D) The holder of a category III terminal distributor	234
license with an office-based opioid treatment classification	235
shall do all of the following:	236
(1) Be in control of a facility that is owned and operated	237
solely by one or more physicians authorized under Chapter 4731.	238
of the Revised Code to practice medicine and surgery or	239
osteopathic medicine and surgery, unless the state board of	240

pharmacy waives this requirement for the holder;	241
(2) Comply with the requirements for conducting office-	242
based opioid treatment, as established by the state medical	243
board in rules adopted under section 4731.056 of the Revised	244
Code;	245
(3) Require any person with ownership of the facility to	246
submit to a criminal records check in accordance with section	247
4776.02 of the Revised Code and send the results of the criminal	248
records check directly to the state board of pharmacy for review	249
and decision under section 4729.071 of the Revised Code;	250
(4) Require each person employed by or seeking employment	251
with the facility to submit to a criminal records check in	252
accordance with section 4776.02 of the Revised Code;	253
(5) Ensure that a person is not employed by the facility	254
if the person, within the ten years immediately preceding the	255
date the person applied for employment, was convicted of or	256
pleaded guilty to either of the following, unless the state	257
board of pharmacy permits the person to be employed by waiving	258
this requirement for the facility:	259
(a) A theft offense, described in division (K)(3) of	260
section 2913.01 of the Revised Code, that would constitute a	261
felony under the laws of this state, any other state, or the	262
United States;	263
(b) A felony drug offense, as defined in section 2925.01	264
of the Revised Code.	265
(6) Maintain a list of each person with ownership of the	266
facility and notify the state board of pharmacy of any change to	267
that list.	268

(E) No person subject to licensure as a category III terminal distributor of dangerous drugs with an office-based opioid treatment classification shall knowingly fail to remain in compliance with the requirements of division (D) of this section and any other applicable requirements of this chapter.

(F) The state board of pharmacy may impose a fine of not more than five thousand dollars on a person who violates division (B) or (E) of this section. A separate fine may be imposed for each day the violation continues. In imposing the fine, the board's actions shall be taken in accordance with Chapter 119. of the Revised Code.

(G) The state board of pharmacy shall adopt rules as it considers necessary to implement and administer this section. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

Sec. 4729.80. (A) If the state board of pharmacy establishes and maintains a drug database pursuant to section 4729.75 of the Revised Code, the board is authorized or required to provide information from the database only as follows:

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

(2) On receipt of a request from a federal officer, or a state or local officer of this or any other state, whose duties include enforcing laws relating to drugs, the board shall provide to the officer information from the database relating to the person who is the subject of an active investigation of a drug abuse offense, as defined in section 2925.01 of the Revised Code, being conducted by the officer's employing government entity. 298
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(3) Pursuant to a subpoena issued by a grand jury, the board shall provide to the grand jury information from the database relating to the person who is the subject of an investigation being conducted by the grand jury. 306
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(4) Pursuant to a subpoena, search warrant, or court order in connection with the investigation or prosecution of a possible or alleged criminal offense, the board shall provide information from the database as necessary to comply with the subpoena, search warrant, or court order. 310
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(5) On receipt of a request from a prescriber or the prescriber's delegate approved by the board, the board shall provide to the prescriber a report of information from the database relating to a patient who is either a current patient of the prescriber or a potential patient of the prescriber based on a referral of the patient to the prescriber, if all of the following conditions are met: 315
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(a) The prescriber certifies in a form specified by the board that it is for the purpose of providing medical treatment to the patient who is the subject of the request; 322
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(b) The prescriber has not been denied access to the database by the board. 325
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(6) On receipt of a request from a pharmacist or the 327
pharmacist's delegate approved by the board, the board shall 328
provide to the pharmacist information from the database relating 329
to a current patient of the pharmacist, if the pharmacist 330
certifies in a form specified by the board that it is for the 331
purpose of the pharmacist's practice of pharmacy involving the 332
patient who is the subject of the request and the pharmacist has 333
not been denied access to the database by the board. 334

(7) On receipt of a request from an individual seeking the 335
individual's own database information in accordance with the 336
procedure established in rules adopted under section 4729.84 of 337
the Revised Code, the board may provide to the individual the 338
individual's own prescription history. 339

(8) On receipt of a request from a medical director or a 340
pharmacy director of a managed care organization that has 341
entered into a contract with the department of medicaid under 342
section 5167.10 of the Revised Code and a data security 343
agreement with the board required by section 5167.14 of the 344
Revised Code, the board shall provide to the medical director or 345
the pharmacy director information from the database relating to 346
a medicaid recipient enrolled in the managed care organization, 347
including information in the database related to prescriptions 348
for the recipient that were not covered or reimbursed under a 349
program administered by the department of medicaid. 350

(9) On receipt of a request from the medicaid director, 351
the board shall provide to the director information from the 352
database relating to a recipient of a program administered by 353
the department of medicaid, including information in the 354
database related to prescriptions for the recipient that were 355
not covered or paid by a program administered by the department. 356

(10) On receipt of a request from a medical director of a managed care organization that has entered into a contract with the administrator of workers' compensation under division (B) (4) of section 4121.44 of the Revised Code and a data security agreement with the board required by section 4121.447 of the Revised Code, the board shall provide to the medical director information from the database relating to a claimant under Chapter 4121., 4123., 4127., or 4131. of the Revised Code assigned to the managed care organization, including information in the database related to prescriptions for the claimant that were not covered or reimbursed under Chapter 4121., 4123., 4127., or 4131. of the Revised Code, if the administrator of workers' compensation confirms, upon request from the board, that the claimant is assigned to the managed care organization.

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

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

(13) On receipt of a request from the director of health, 387
the board shall provide to the director information from the 388
database relating to the duties of the director or the 389
department of health in implementing the Ohio violent death 390
reporting system established under section 3701.93 of the 391
Revised Code. 392

(14) On receipt of a request from a requestor described in 393
division (A)(1), (2), (5), or (6) of this section who is from or 394
participating with another state's prescription monitoring 395
program, the board may provide to the requestor information from 396
the database, but only if there is a written agreement under 397
which the information is to be used and disseminated according 398
to the laws of this state. 399

(15) On receipt of a request from a delegate of a retail 400
dispensary licensed under Chapter 3796. of the Revised Code who 401
is approved by the board to serve as the dispensary's delegate, 402
the board shall provide to the delegate a report of information 403
from the database pertaining only to a patient's use of medical 404
marijuana, if both of the following conditions are met: 405

(a) The delegate certifies in a form specified by the 406
board that it is for the purpose of dispensing medical marijuana 407
for use in accordance with Chapter 3796. of the Revised Code. 408

(b) The retail dispensary or delegate has not been denied 409
access to the database by the board. 410

(16) On receipt of a request from a judge of a program 411
certified by the Ohio supreme court as a specialized docket 412
program for drugs, the board shall provide to the judge, or an 413
employee of the program who is designated by the judge to 414
receive the information, information from the database that 415

relates specifically to a current or prospective program 416
participant. 417

(17) On receipt of a request from a coroner, deputy 418
coroner, or coroner's delegate approved by the board, the board 419
shall provide to the requestor information from the database 420
relating to a deceased person about whom the coroner is 421
conducting or has conducted an autopsy or investigation. 422

(18) On receipt of a request from a prescriber, the board 423
may provide to the prescriber a summary of the prescriber's 424
prescribing record if such a record is created by the board. 425
Information in the summary is subject to the confidentiality 426
requirements of this chapter. 427

(19) (a) On receipt of a request from a pharmacy's 428
responsible person, the board may provide to the responsible 429
person a summary of the pharmacy's dispensing record if such a 430
record is created by the board. Information in the summary is 431
subject to the confidentiality requirements of this chapter. 432

(b) As used in division (A) (19) (a) of this section, 433
"responsible person" has the same meaning as in rules adopted by 434
the board under section 4729.26 of the Revised Code. 435

(20) The board may provide information from the database 436
without request to a prescriber or pharmacist who is authorized 437
to use the database pursuant to this chapter. 438

(21) (a) On receipt of a request from a prescriber or 439
pharmacist, or the prescriber's or pharmacist's delegate, who is 440
a designated representative of a peer review committee, the 441
board shall provide to the committee information from the 442
database relating to a prescriber who is subject to the 443
committee's evaluation, supervision, or discipline if the 444

information is to be used for one of those purposes. The board 445
shall provide only information that it determines, in accordance 446
with rules adopted under section 4729.84 of the Revised Code, is 447
appropriate to be provided to the committee. 448

(b) As used in division (A) (21) (a) of this section, "peer 449
review committee" has the same meaning as in section 2305.25 of 450
the Revised Code, except that it includes only a peer review 451
committee of a hospital or a peer review committee of a 452
nonprofit health care corporation that is a member of the 453
hospital or of which the hospital is a member. 454

(22) On receipt of a request from a requestor described in 455
division (A) (5) or (6) of this section who is from or 456
participating with a prescription monitoring program that is 457
operated by a federal agency and approved by the board, the 458
board may provide to the requestor information from the 459
database, but only if there is a written agreement under which 460
the information is to be used and disseminated according to the 461
laws of this state. 462

(23) Any personal health information submitted to the 463
board pursuant to section 4729.772 of the Revised Code may be 464
provided by the board only as authorized by the submitter of the 465
information and in accordance with rules adopted under section 466
4729.84 of the Revised Code. 467

(B) The state board of pharmacy shall maintain a record of 468
each individual or entity that requests information from the 469
database pursuant to this section. In accordance with rules 470
adopted under section 4729.84 of the Revised Code, the board may 471
use the records to document and report statistics and law 472
enforcement outcomes. 473

The board may provide records of an individual's requests 474
for database information only to the following: 475

(1) A designated representative of a government entity 476
that is responsible for the licensure, regulation, or discipline 477
of health care professionals with authority to prescribe, 478
administer, or dispense drugs who is involved in an active 479
criminal or disciplinary investigation being conducted by the 480
government entity of the individual who submitted the requests 481
for database information; 482

(2) A federal officer, or a state or local officer of this 483
or any other state, whose duties include enforcing laws relating 484
to drugs and who is involved in an active investigation being 485
conducted by the officer's employing government entity of the 486
individual who submitted the requests for database information; 487

(3) A designated representative of the department of 488
medicaid regarding a prescriber who is treating or has treated a 489
recipient of a program administered by the department and who 490
submitted the requests for database information. 491

(C) Information contained in the database and any 492
information obtained from it is confidential and is not a public 493
record. Information contained in the records of requests for 494
information from the database is confidential and is not a 495
public record. Information contained in the database that does 496
not identify a person, including any licensee or registrant of 497
the board or other entity, may be released in summary, 498
statistical, or aggregate form. 499

(D) A pharmacist or prescriber shall not be held liable in 500
damages to any person in any civil action for injury, death, or 501
loss to person or property on the basis that the pharmacist or 502

prescriber did or did not seek or obtain information from the 503
database. 504

Sec. 4730.56. (A) As used in this section: 505

(1) "Community addiction services provider" has the same 506
meaning as in section 5119.01 of the Revised Code. 507

(2) "Medication-assisted treatment" has the same meaning 508
as in section 340.01 of the Revised Code. 509

(B) A physician assistant shall comply with section 510
3719.064 of the Revised Code and rules adopted under section 511
4730.55 of the Revised Code when treating a patient with 512
medication-assisted treatment or proposing to initiate such 513
treatment. 514

(C) A physician assistant who fails to comply with this 515
section shall treat not more than thirty patients at any one 516
time with medication-assisted treatment even if the facility or 517
location at which the treatment is provided is either of the 518
following: 519

(1) Exempted by divisions (B) (2) (a) to (d) or (i) of 520
section 4729.553 of the Revised Code from being required to 521
possess a category III terminal distributor of dangerous drugs 522
license with an office-based opioid treatment classification; 523

(2) A community addiction services provider that provides 524
alcohol and drug addiction services that are certified by the 525
department of mental health and addiction services under section 526
5119.36 of the Revised Code. 527

Sec. 4731.83. (A) As used in this section: 528

(1) "Medication-assisted treatment" has the same meaning 529
as in section 340.01 of the Revised Code. 530

(2) "Physician" means an individual authorized by this 531
chapter to practice medicine and surgery or osteopathic medicine 532
and surgery. 533

(B) A physician shall comply with section 3719.064 of the 534
Revised Code and rules adopted under section 4731.056 of the 535
Revised Code when treating a patient with medication-assisted 536
treatment or proposing to initiate such treatment. 537

(C) A physician who fails to comply with this section 538
shall treat not more than thirty patients at any one time with 539
medication-assisted treatment even if the facility or location 540
at which the treatment is provided is either of the following: 541

(1) Exempted by divisions (B) (2) (a) to (d) or (i) of 542
section 4729.553 of the Revised Code from being required to 543
possess a category III terminal distributor of dangerous drugs 544
license with an office-based opioid treatment classification; 545

(2) A community addiction services provider that provides 546
alcohol and drug addiction services that are certified by the 547
department of mental health and addiction services under section 548
5119.36 of the Revised Code. 549

Section 2. That existing sections 4723.52, 4729.45, 550
4729.553, 4729.80, 4730.56, and 4731.83 of the Revised Code are 551
hereby repealed. 552

Section 3. Section 4729.553 of the Revised Code is 553
presented in this act as a composite of the section as amended 554
by both Sub. H.B. 101 and Sub. S.B. 229 of the 132nd General 555
Assembly. The General Assembly, applying the principle stated in 556
division (B) of section 1.52 of the Revised Code that amendments 557
are to be harmonized if reasonably capable of simultaneous 558
operation, finds that the composite is the resulting version of 559

the section in effect prior to the effective date of the section 560
as presented in this act. 561