

**As Reported by the Senate Health, Human Services and Medicaid
Committee**

133rd General Assembly

**Regular Session
2019-2020**

Sub. H. B. No. 341

Representative Ginter

**Cosponsors: Representatives Seitz, Blair, Lightbody, Koehler, Liston, Abrams,
Brent, Brown, Callender, Carfagna, Carruthers, Crawley, Crossman, Cupp,
Denson, Edwards, Fraizer, Galonski, Hambley, Hicks-Hudson, Hillyer, Holmes, A.,
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Rogers, Romanchuk, Russo, Scherer, Sheehy, Smith, T., SobECKi, Stein,
Swearingen, Sweeney, Upchurch, Weinstein, West, Wiggam**

Senator Huffman, S.

A BILL

To amend sections 121.22, 2925.61, 4723.50, 1
4723.52, 4729.01, 4729.29, 4729.45, 4729.514, 2
4729.541, 4729.553, 4729.80, 4730.56, and 3
4731.83; to amend, for the purpose of adopting 4
new section numbers as indicated in parentheses, 5
sections 4723.486 (4723.488), 4723.488 6
(4723.484), and 4730.431 (4730.434); and to 7
enact new section 4723.486 and sections 8
4723.485, 4729.515, 4730.435, and 4730.436 of 9
the Revised Code regarding the administration of 10
addiction treatment drugs, federal agency access 11
to the Ohio Automated Rx Reporting System, the 12
Board of Pharmacy's exemption from open meetings 13
requirements, and naloxone access. 14

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

Section 1. That sections 121.22, 2925.61, 4723.50, 15
4723.52, 4729.01, 4729.29, 4729.45, 4729.514, 4729.541, 16
4729.553, 4729.80, 4730.56, and 4731.83 be amended; sections 17
4723.486 (4723.488), 4723.488 (4723.484), and 4730.431 18
(4730.434) be amended for the purpose of adopting new section 19
numbers as indicated in parentheses; and new section 4723.486 20
and sections 4723.485, 4729.515, 4730.435, and 4730.436 of the 21
Revised Code be enacted to read as follows: 22

Sec. 121.22. (A) This section shall be liberally construed 23
to require public officials to take official action and to 24
conduct all deliberations upon official business only in open 25
meetings unless the subject matter is specifically excepted by 26
law. 27

(B) As used in this section: 28

(1) "Public body" means any of the following: 29

(a) Any board, commission, committee, council, or similar 30
decision-making body of a state agency, institution, or 31
authority, and any legislative authority or board, commission, 32
committee, council, agency, authority, or similar decision- 33
making body of any county, township, municipal corporation, 34
school district, or other political subdivision or local public 35
institution; 36

(b) Any committee or subcommittee of a body described in 37
division (B) (1) (a) of this section; 38

(c) A court of jurisdiction of a sanitary district 39
organized wholly for the purpose of providing a water supply for 40
domestic, municipal, and public use when meeting for the purpose 41
of the appointment, removal, or reappointment of a member of the 42
board of directors of such a district pursuant to section 43

6115.10 of the Revised Code, if applicable, or for any other 44
matter related to such a district other than litigation 45
involving the district. As used in division (B) (1) (c) of this 46
section, "court of jurisdiction" has the same meaning as "court" 47
in section 6115.01 of the Revised Code. 48

(2) "Meeting" means any prearranged discussion of the 49
public business of the public body by a majority of its members. 50

(3) "Regulated individual" means either of the following: 51

(a) A student in a state or local public educational 52
institution; 53

(b) A person who is, voluntarily or involuntarily, an 54
inmate, patient, or resident of a state or local institution 55
because of criminal behavior, mental illness, an intellectual 56
disability, disease, disability, age, or other condition 57
requiring custodial care. 58

(4) "Public office" has the same meaning as in section 59
149.011 of the Revised Code. 60

(C) All meetings of any public body are declared to be 61
public meetings open to the public at all times. A member of a 62
public body shall be present in person at a meeting open to the 63
public to be considered present or to vote at the meeting and 64
for purposes of determining whether a quorum is present at the 65
meeting. 66

The minutes of a regular or special meeting of any public 67
body shall be promptly prepared, filed, and maintained and shall 68
be open to public inspection. The minutes need only reflect the 69
general subject matter of discussions in executive sessions 70
authorized under division (G) or (J) of this section. 71

(D) This section does not apply to any of the following:	72
(1) A grand jury;	73
(2) An audit conference conducted by the auditor of state	74
or independent certified public accountants with officials of	75
the public office that is the subject of the audit;	76
(3) The adult parole authority when its hearings are	77
conducted at a correctional institution for the sole purpose of	78
interviewing inmates to determine parole or pardon and the	79
department of rehabilitation and correction when its hearings	80
are conducted at a correctional institution for the sole purpose	81
of making determinations under section 2967.271 of the Revised	82
Code regarding the release or maintained incarceration of an	83
offender to whom that section applies;	84
(4) The organized crime investigations commission	85
established under section 177.01 of the Revised Code;	86
(5) Meetings of a child fatality review board established	87
under section 307.621 of the Revised Code, meetings related to a	88
review conducted pursuant to guidelines established by the	89
director of health under section 3701.70 of the Revised Code,	90
and meetings conducted pursuant to sections 5153.171 to 5153.173	91
of the Revised Code;	92
(6) The state medical board when determining whether to	93
suspend a license or certificate without a prior hearing	94
pursuant to division (G) of either section 4730.25 or 4731.22 of	95
the Revised Code;	96
(7) The board of nursing when determining whether to	97
suspend a license or certificate without a prior hearing	98
pursuant to division (B) of section 4723.281 of the Revised	99
Code;	100

(8) The state board of pharmacy when determining whether	101
to suspend <u>do either of the following:</u>	102
<u>(a) Suspend a license, certification, or registration</u>	103
without a prior hearing, <u>including during meetings conducted by</u>	104
<u>telephone conference,</u> pursuant to division (D) of section	105
4729.16 <u>Chapters 3719., 3796., 4729., and 4752. of the Revised</u>	106
<u>Code and rules adopted thereunder; or</u>	107
<u>(b) Restrict a person from obtaining further information</u>	108
<u>from the drug database established in section 4729.75 of the</u>	109
<u>Revised Code without a prior hearing pursuant to division (C) of</u>	110
<u>section 4729.86 of the Revised Code.</u>	111
(9) The state chiropractic board when determining whether	112
to suspend a license without a hearing pursuant to section	113
4734.37 of the Revised Code;	114
(10) The executive committee of the emergency response	115
commission when determining whether to issue an enforcement	116
order or request that a civil action, civil penalty action, or	117
criminal action be brought to enforce Chapter 3750. of the	118
Revised Code;	119
(11) The board of directors of the nonprofit corporation	120
formed under section 187.01 of the Revised Code or any committee	121
thereof, and the board of directors of any subsidiary of that	122
corporation or a committee thereof;	123
(12) An audit conference conducted by the audit staff of	124
the department of job and family services with officials of the	125
public office that is the subject of that audit under section	126
5101.37 of the Revised Code;	127
(13) The occupational therapy section of the occupational	128
therapy, physical therapy, and athletic trainers board when	129

determining whether to suspend a license or limited permit	130
without a hearing pursuant to division (D) of section 4755.11 of	131
the Revised Code;	132
(14) The physical therapy section of the occupational	133
therapy, physical therapy, and athletic trainers board when	134
determining whether to suspend a license without a hearing	135
pursuant to division (E) of section 4755.47 of the Revised Code;	136
(15) The athletic trainers section of the occupational	137
therapy, physical therapy, and athletic trainers board when	138
determining whether to suspend a license without a hearing	139
pursuant to division (D) of section 4755.64 of the Revised Code;	140
(16) Meetings of the pregnancy-associated mortality review	141
board established under section 3738.01 of the Revised Code;	142
(17) Meetings of a fetal-infant mortality review board	143
established under section 3707.71 of the Revised Code.	144
(E) The controlling board, the tax credit authority, or	145
the minority development financing advisory board, when meeting	146
to consider granting assistance pursuant to Chapter 122. or 166.	147
of the Revised Code, in order to protect the interest of the	148
applicant or the possible investment of public funds, by	149
unanimous vote of all board or authority members present, may	150
close the meeting during consideration of the following	151
information confidentially received by the authority or board	152
from the applicant:	153
(1) Marketing plans;	154
(2) Specific business strategy;	155
(3) Production techniques and trade secrets;	156
(4) Financial projections;	157

(5) Personal financial statements of the applicant or 158
members of the applicant's immediate family, including, but not 159
limited to, tax records or other similar information not open to 160
public inspection. 161

The vote by the authority or board to accept or reject the 162
application, as well as all proceedings of the authority or 163
board not subject to this division, shall be open to the public 164
and governed by this section. 165

(F) Every public body, by rule, shall establish a 166
reasonable method whereby any person may determine the time and 167
place of all regularly scheduled meetings and the time, place, 168
and purpose of all special meetings. A public body shall not 169
hold a special meeting unless it gives at least twenty-four 170
hours' advance notice to the news media that have requested 171
notification, except in the event of an emergency requiring 172
immediate official action. In the event of an emergency, the 173
member or members calling the meeting shall notify the news 174
media that have requested notification immediately of the time, 175
place, and purpose of the meeting. 176

The rule shall provide that any person, upon request and 177
payment of a reasonable fee, may obtain reasonable advance 178
notification of all meetings at which any specific type of 179
public business is to be discussed. Provisions for advance 180
notification may include, but are not limited to, mailing the 181
agenda of meetings to all subscribers on a mailing list or 182
mailing notices in self-addressed, stamped envelopes provided by 183
the person. 184

(G) Except as provided in divisions (G) (8) and (J) of this 185
section, the members of a public body may hold an executive 186
session only after a majority of a quorum of the public body 187

determines, by a roll call vote, to hold an executive session 188
and only at a regular or special meeting for the sole purpose of 189
the consideration of any of the following matters: 190

(1) To consider the appointment, employment, dismissal, 191
discipline, promotion, demotion, or compensation of a public 192
employee or official, or the investigation of charges or 193
complaints against a public employee, official, licensee, or 194
regulated individual, unless the public employee, official, 195
licensee, or regulated individual requests a public hearing. 196
Except as otherwise provided by law, no public body shall hold 197
an executive session for the discipline of an elected official 198
for conduct related to the performance of the elected official's 199
official duties or for the elected official's removal from 200
office. If a public body holds an executive session pursuant to 201
division (G) (1) of this section, the motion and vote to hold 202
that executive session shall state which one or more of the 203
approved purposes listed in division (G) (1) of this section are 204
the purposes for which the executive session is to be held, but 205
need not include the name of any person to be considered at the 206
meeting. 207

(2) To consider the purchase of property for public 208
purposes, the sale of property at competitive bidding, or the 209
sale or other disposition of unneeded, obsolete, or unfit-for- 210
use property in accordance with section 505.10 of the Revised 211
Code, if premature disclosure of information would give an 212
unfair competitive or bargaining advantage to a person whose 213
personal, private interest is adverse to the general public 214
interest. No member of a public body shall use division (G) (2) 215
of this section as a subterfuge for providing covert information 216
to prospective buyers or sellers. A purchase or sale of public 217
property is void if the seller or buyer of the public property 218

has received covert information from a member of a public body 219
that has not been disclosed to the general public in sufficient 220
time for other prospective buyers and sellers to prepare and 221
submit offers. 222

If the minutes of the public body show that all meetings 223
and deliberations of the public body have been conducted in 224
compliance with this section, any instrument executed by the 225
public body purporting to convey, lease, or otherwise dispose of 226
any right, title, or interest in any public property shall be 227
conclusively presumed to have been executed in compliance with 228
this section insofar as title or other interest of any bona fide 229
purchasers, lessees, or transferees of the property is 230
concerned. 231

(3) Conferences with an attorney for the public body 232
concerning disputes involving the public body that are the 233
subject of pending or imminent court action; 234

(4) Preparing for, conducting, or reviewing negotiations 235
or bargaining sessions with public employees concerning their 236
compensation or other terms and conditions of their employment; 237

(5) Matters required to be kept confidential by federal 238
law or regulations or state statutes; 239

(6) Details relative to the security arrangements and 240
emergency response protocols for a public body or a public 241
office, if disclosure of the matters discussed could reasonably 242
be expected to jeopardize the security of the public body or 243
public office; 244

(7) In the case of a county hospital operated pursuant to 245
Chapter 339. of the Revised Code, a joint township hospital 246
operated pursuant to Chapter 513. of the Revised Code, or a 247

municipal hospital operated pursuant to Chapter 749. of the 248
Revised Code, to consider trade secrets, as defined in section 249
1333.61 of the Revised Code; 250

(8) To consider confidential information related to the 251
marketing plans, specific business strategy, production 252
techniques, trade secrets, or personal financial statements of 253
an applicant for economic development assistance, or to 254
negotiations with other political subdivisions respecting 255
requests for economic development assistance, provided that both 256
of the following conditions apply: 257

(a) The information is directly related to a request for 258
economic development assistance that is to be provided or 259
administered under any provision of Chapter 715., 725., 1724., 260
or 1728. or sections 701.07, 3735.67 to 3735.70, 5709.40 to 261
5709.43, 5709.61 to 5709.69, 5709.73 to 5709.75, or 5709.77 to 262
5709.81 of the Revised Code, or that involves public 263
infrastructure improvements or the extension of utility services 264
that are directly related to an economic development project. 265

(b) A unanimous quorum of the public body determines, by a 266
roll call vote, that the executive session is necessary to 267
protect the interests of the applicant or the possible 268
investment or expenditure of public funds to be made in 269
connection with the economic development project. 270

If a public body holds an executive session to consider 271
any of the matters listed in divisions (G) (2) to (8) of this 272
section, the motion and vote to hold that executive session 273
shall state which one or more of the approved matters listed in 274
those divisions are to be considered at the executive session. 275

A public body specified in division (B) (1) (c) of this 276

section shall not hold an executive session when meeting for the 277
purposes specified in that division. 278

(H) A resolution, rule, or formal action of any kind is 279
invalid unless adopted in an open meeting of the public body. A 280
resolution, rule, or formal action adopted in an open meeting 281
that results from deliberations in a meeting not open to the 282
public is invalid unless the deliberations were for a purpose 283
specifically authorized in division (G) or (J) of this section 284
and conducted at an executive session held in compliance with 285
this section. A resolution, rule, or formal action adopted in an 286
open meeting is invalid if the public body that adopted the 287
resolution, rule, or formal action violated division (F) of this 288
section. 289

(I) (1) Any person may bring an action to enforce this 290
section. An action under division (I) (1) of this section shall 291
be brought within two years after the date of the alleged 292
violation or threatened violation. Upon proof of a violation or 293
threatened violation of this section in an action brought by any 294
person, the court of common pleas shall issue an injunction to 295
compel the members of the public body to comply with its 296
provisions. 297

(2) (a) If the court of common pleas issues an injunction 298
pursuant to division (I) (1) of this section, the court shall 299
order the public body that it enjoins to pay a civil forfeiture 300
of five hundred dollars to the party that sought the injunction 301
and shall award to that party all court costs and, subject to 302
reduction as described in division (I) (2) of this section, 303
reasonable attorney's fees. The court, in its discretion, may 304
reduce an award of attorney's fees to the party that sought the 305
injunction or not award attorney's fees to that party if the 306

court determines both of the following: 307

(i) That, based on the ordinary application of statutory 308
law and case law as it existed at the time of violation or 309
threatened violation that was the basis of the injunction, a 310
well-informed public body reasonably would believe that the 311
public body was not violating or threatening to violate this 312
section; 313

(ii) That a well-informed public body reasonably would 314
believe that the conduct or threatened conduct that was the 315
basis of the injunction would serve the public policy that 316
underlies the authority that is asserted as permitting that 317
conduct or threatened conduct. 318

(b) If the court of common pleas does not issue an 319
injunction pursuant to division (I)(1) of this section and the 320
court determines at that time that the bringing of the action 321
was frivolous conduct, as defined in division (A) of section 322
2323.51 of the Revised Code, the court shall award to the public 323
body all court costs and reasonable attorney's fees, as 324
determined by the court. 325

(3) Irreparable harm and prejudice to the party that 326
sought the injunction shall be conclusively and irrebuttably 327
presumed upon proof of a violation or threatened violation of 328
this section. 329

(4) A member of a public body who knowingly violates an 330
injunction issued pursuant to division (I)(1) of this section 331
may be removed from office by an action brought in the court of 332
common pleas for that purpose by the prosecuting attorney or the 333
attorney general. 334

(J) (1) Pursuant to division (C) of section 5901.09 of the 335

Revised Code, a veterans service commission shall hold an 336
executive session for one or more of the following purposes 337
unless an applicant requests a public hearing: 338

(a) Interviewing an applicant for financial assistance 339
under sections 5901.01 to 5901.15 of the Revised Code; 340

(b) Discussing applications, statements, and other 341
documents described in division (B) of section 5901.09 of the 342
Revised Code; 343

(c) Reviewing matters relating to an applicant's request 344
for financial assistance under sections 5901.01 to 5901.15 of 345
the Revised Code. 346

(2) A veterans service commission shall not exclude an 347
applicant for, recipient of, or former recipient of financial 348
assistance under sections 5901.01 to 5901.15 of the Revised 349
Code, and shall not exclude representatives selected by the 350
applicant, recipient, or former recipient, from a meeting that 351
the commission conducts as an executive session that pertains to 352
the applicant's, recipient's, or former recipient's application 353
for financial assistance. 354

(3) A veterans service commission shall vote on the grant 355
or denial of financial assistance under sections 5901.01 to 356
5901.15 of the Revised Code only in an open meeting of the 357
commission. The minutes of the meeting shall indicate the name, 358
address, and occupation of the applicant, whether the assistance 359
was granted or denied, the amount of the assistance if 360
assistance is granted, and the votes for and against the 361
granting of assistance. 362

Sec. 2925.61. (A) As used in this section: 363

(1) "Law enforcement agency" means a government entity 364

that employs peace officers to perform law enforcement duties. 365

(2) "Licensed health professional" means all of the 366
following: 367

(a) A physician; 368

(b) A physician assistant who is licensed under Chapter 369
4730. of the Revised Code, holds a valid prescriber number 370
issued by the state medical board, and has been granted 371
physician-delegated prescriptive authority; 372

(c) An advanced practice registered nurse who holds a 373
current, valid license issued under Chapter 4723. of the Revised 374
Code and is designated as a clinical nurse specialist, certified 375
nurse-midwife, or certified nurse practitioner. 376

(3) "Peace officer" has the same meaning as in section 377
2921.51 of the Revised Code. 378

(4) "Physician" means an individual who is authorized 379
under Chapter 4731. of the Revised Code to practice medicine and 380
surgery, osteopathic medicine and surgery, or podiatric medicine 381
and surgery. 382

(B) A family member, friend, or other individual who is in 383
a position to assist an individual who is apparently 384
experiencing or at risk of experiencing an opioid-related 385
overdose, ~~is not subject to criminal prosecution for a violation~~ 386
of section 4731.41 of the Revised Code ~~or, is not subject to~~ 387
criminal prosecution under this chapter, and is not liable for 388
damages in a civil action for injury, death, or loss to person 389
or property for an act or omission that allegedly arises from 390
obtaining, maintaining, accessing, or administering naloxone, if 391
the individual, acting in good faith, does all of the following: 392

(1) Obtains naloxone pursuant to a prescription issued by	393
a licensed health professional, or obtains naloxone from one of	394
the following:	395
(a) A licensed health professional;	396
(b) An individual who is authorized <u>to personally furnish</u>	397
<u>naloxone by either a</u> any of the following:	398
(i) A physician under section 4731.941 of the Revised Code	399
or a;	400
(ii) <u>An advanced practice registered nurse under section</u>	401
<u>4723.485 of the Revised Code;</u>	402
(iii) <u>A physician assistant under section 4730.435 of the</u>	403
<u>Revised Code;</u>	404
(iv) <u>A board of health under section 3707.561 of the</u>	405
<u>Revised Code to personally furnish naloxone;</u>	406
(c) A pharmacist or pharmacy intern who is authorized by a	407
physician or board of health under section 4729.44 of the	408
Revised Code to dispense naloxone without a prescription.	409
(2) Administers the naloxone obtained as described in	410
division (B)(1) of this section to an individual who is	411
apparently experiencing an opioid-related overdose;	412
(3) Attempts to summon emergency services as soon as	413
practicable either before or after administering the naloxone.	414
(C) An individual who is an employee, volunteer, or	415
contractor of a service entity, as defined in section 4729.514	416
of the Revised Code, and has been authorized under section	417
3707.562, <u>4723.486, 4730.436,</u> or 4731.943 of the Revised Code to	418
administer naloxone is not subject to criminal prosecution for a	419

violation of section 4731.41 of the Revised Code or criminal 420
prosecution under this chapter, if the individual, acting in 421
good faith, does all of the following: 422

(1) Obtains naloxone from the service entity of which the 423
individual is an employee, volunteer, or contractor; 424

(2) Administers the naloxone obtained to an individual who 425
is apparently experiencing an opioid-related overdose; 426

(3) Attempts to summon emergency services as soon as 427
practicable either before or after administering the naloxone. 428

(D) Divisions (B) and (C) of this section do not apply to 429
a peace officer or to an emergency medical technician-basic, 430
emergency medical technician-intermediate, or emergency medical 431
technician-paramedic, as defined in section 4765.01 of the 432
Revised Code. 433

(E) (1) If a peace officer, acting in good faith, 434
administers naloxone to an individual who is apparently 435
experiencing an opioid-related overdose, both of the following 436
apply: 437

(a) The peace officer is not subject to administrative 438
action, criminal prosecution for a violation of section 4731.41 439
of the Revised Code, or criminal prosecution under this chapter. 440

(b) The peace officer is not liable for damages in a civil 441
action for injury, death, or loss to person or property for an 442
act or omission that allegedly arises from obtaining, 443
maintaining, accessing, or administering the naloxone. 444

(2) Division (E) (1) (b) of this section does not eliminate, 445
limit, or reduce any other immunity or defense that an entity or 446
person may be entitled to under section 9.86 or Chapter 2744. of 447

the Revised Code, any other provision of the Revised Code, or 448
the common law of this state. 449

Sec. ~~4723.488~~ 4723.484. (A) Notwithstanding any provision 450
of this chapter or rule adopted by the board of nursing, an 451
advanced practice registered nurse who is designated as a 452
clinical nurse specialist, certified nurse-midwife, or certified 453
nurse practitioner may personally furnish a supply of naloxone, 454
or issue a prescription for naloxone, without having examined 455
the individual to whom it may be administered if both of the 456
following conditions are met: 457

(1) The naloxone supply is furnished to, or the 458
prescription is issued to and in the name of, a family member, 459
friend, or other individual in a position to assist an 460
individual who there is reason to believe is at risk of 461
experiencing an opioid-related overdose. 462

(2) The advanced practice registered nurse instructs the 463
individual receiving the naloxone supply or prescription to 464
summon emergency services as soon as practicable either before 465
or after administering naloxone to an individual apparently 466
experiencing an opioid-related overdose. 467

(B) An advanced practice registered nurse who under 468
division (A) of this section in good faith furnishes a supply of 469
naloxone or issues a prescription for naloxone is not liable for 470
or subject to any of the following for any action or omission of 471
the individual to whom the naloxone is furnished or the 472
prescription is issued: damages in any civil action, prosecution 473
in any criminal proceeding, or professional disciplinary action. 474

Sec. 4723.485. (A) (1) An advanced practice registered 475
nurse who is designated as a clinical nurse specialist, 476

certified nurse-midwife, or certified nurse practitioner and who 477
has established a protocol that meets the requirements of 478
division (C) of this section may authorize one or more other 479
individuals to personally furnish a supply of naloxone pursuant 480
to the protocol to either of the following: 481

(a) An individual who there is reason to believe is 482
experiencing or at risk of experiencing an opioid-related 483
overdose; 484

(b) A family member, friend, or other person in a position 485
to assist an individual who there is reason to believe is at 486
risk of experiencing an opioid-related overdose. 487

(2) An individual authorized under this section to 488
personally furnish naloxone may do so without having examined 489
the individual to whom it may be administered. 490

(B) An individual authorized by an advanced practice 491
registered nurse under this section may personally furnish 492
naloxone to an individual described in division (A) (1) (a) or (b) 493
of this section if both of the following conditions are met: 494

(1) The authorized individual complies with the protocol 495
established by the authorizing advanced practice registered 496
nurse, including having completed the training required by the 497
protocol. 498

(2) The authorized individual instructs the individual to 499
whom naloxone is furnished to summon emergency services as soon 500
as practicable either before or after administering naloxone. 501

(C) A protocol established by an advanced practice 502
registered nurse for purposes of this section shall be 503
established in writing and include all of the following: 504

<u>(1) A description of the clinical pharmacology of naloxone;</u>	505
	506
<u>(2) Precautions and contraindications concerning furnishing naloxone;</u>	507
	508
<u>(3) Any limitations the advanced practice registered nurse specifies concerning the individuals to whom naloxone may be furnished;</u>	509
	510
	511
<u>(4) The naloxone dosage that may be furnished and any variation in the dosage based on circumstances specified in the protocol;</u>	512
	513
	514
<u>(5) Labeling, storage, record keeping, and administrative requirements;</u>	515
	516
<u>(6) Training requirements that must be met before an individual will be authorized to furnish naloxone;</u>	517
	518
<u>(7) Any instructions or training that the authorized individual must provide to an individual to whom naloxone is furnished.</u>	519
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<u>(D) An advanced practice registered nurse who in good faith authorizes another individual to personally furnish naloxone in accordance with a protocol established by the advanced practice registered nurse under this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.</u>	522
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<u>An individual authorized under this section to personally furnish naloxone who does so in good faith is not liable for or subject to any of the following for any action or omission of</u>	530
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the individual to whom the naloxone is furnished: damages in any 533
civil action, prosecution in any criminal proceeding, or 534
professional disciplinary action. 535

Sec. 4723.486. (A) As used in this section, "service 536
entity" has the same meaning as in section 4729.514 of the 537
Revised Code. 538

(B) An advanced practice registered nurse who is 539
designated as a clinical nurse specialist, certified nurse- 540
midwife, or certified nurse practitioner and who has established 541
a protocol under division (D) of this section may authorize an 542
individual who is an employee, volunteer, or contractor of a 543
service entity to administer naloxone to an individual who is 544
apparently experiencing an opioid-related overdose. 545

(C) An individual authorized by an advanced practice 546
registered nurse under this section may administer naloxone to 547
an individual who is apparently experiencing an opioid-related 548
overdose if all of the following conditions are met: 549

(1) The naloxone is obtained from a service entity of 550
which the authorized individual is an employee, volunteer, or 551
contractor. 552

(2) The authorized individual complies with the protocol 553
established by the authorizing advanced practice registered 554
nurse. 555

(3) The authorized individual summons emergency services 556
as soon as practicable either before or after administering the 557
naloxone. 558

(D) A protocol established by an advanced practice 559
registered nurse for purposes of this section must be in writing 560
and include all of the following: 561

<u>(1) A description of the clinical pharmacology of naloxone;</u>	562
	563
<u>(2) Precautions and contraindications concerning the administration of naloxone;</u>	564
	565
<u>(3) Any limitations the advanced practice registered nurse specifies concerning the individuals to whom naloxone may be administered;</u>	566
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<u>(4) The naloxone dosage that may be administered and any variation in the dosage based on circumstances specified in the protocol;</u>	569
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<u>(5) Labeling, storage, record keeping, and administrative requirements;</u>	572
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<u>(6) Training requirements that must be met before an individual can be authorized to administer naloxone.</u>	574
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<u>(E) An advanced practice registered nurse who in good faith authorizes an individual to administer naloxone under this section is not liable for or subject to any of the following for any act or omission of the authorized individual: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.</u>	576
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<u>A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or administering naloxone under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.</u>	582
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This section does not eliminate, limit, or reduce any 591
other immunity or defense that a service entity or an employee, 592
volunteer, or contractor of a service entity may be entitled to 593
under Chapter 2305. or any other provision of the Revised Code 594
or under the common law of this state. 595

Sec. ~~4723.486~~ 4723.488. (A) Except as provided in division 596
(B) of this section, in the case of a license holder who is 597
seeking renewal of a license to practice nursing as an advanced 598
practice registered nurse and who prescribes opioid analgesics 599
or benzodiazepines, as defined in section 3719.01 of the Revised 600
Code, the holder shall certify to the board whether the holder 601
has been granted access to the drug database established and 602
maintained by the state board of pharmacy pursuant to section 603
4729.75 of the Revised Code. 604

(B) The requirement in division (A) of this section does 605
not apply if any of the following is the case: 606

(1) The state board of pharmacy notifies the board of 607
nursing pursuant to section 4729.861 of the Revised Code that 608
the license holder has been restricted from obtaining further 609
information from the drug database. 610

(2) The state board of pharmacy no longer maintains the 611
drug database. 612

(3) The license holder does not practice nursing in this 613
state. 614

(C) If a license holder certifies to the board of nursing 615
that the holder has been granted access to the drug database and 616
the board finds through an audit or other means that the holder 617
has not been granted access, the board may take action under 618
section 4723.28 of the Revised Code. 619

Sec. 4723.50. (A) As used in this section:	620
(1) "Controlled substance" has the same meaning as in section 3719.01 of the Revised Code.	621 622
(2) "Medication-assisted treatment" has the same meaning as in section 340.01 of the Revised Code.	623 624
(B) In accordance with Chapter 119. of the Revised Code, the board of nursing shall adopt rules as necessary to implement the provisions of this chapter pertaining to the authority of advanced practice registered nurses who are designated as clinical nurse specialists, certified nurse-midwives, and certified nurse practitioners to prescribe and furnish drugs and therapeutic devices.	625 626 627 628 629 630 631
The board shall adopt rules that are consistent with a recommended exclusionary formulary the board receives from the committee on prescriptive governance pursuant to section 4723.492 of the Revised Code. After reviewing a formulary submitted by the committee, the board may either adopt the formulary as a rule or ask the committee to reconsider and resubmit the formulary. The board shall not adopt any rule that does not conform to a formulary developed by the committee.	632 633 634 635 636 637 638 639
The exclusionary formulary shall permit, in a manner consistent with section 4723.481 of the Revised Code, the prescribing of controlled substances, including drugs that contain buprenorphine used in medication-assisted treatment and both oral and long-acting opioid antagonists. The formulary shall not permit the prescribing or furnishing of any of the following:	640 641 642 643 644 645 646
(1) A drug or device to perform or induce an abortion;	647
(2) A drug or device prohibited by federal or state law.	648

(C) In addition to the rules described in division (B) of 649
this section, the board shall adopt rules under this section 650
that do the following: 651

(1) Establish standards for board approval of the course 652
of study in advanced pharmacology and related topics required by 653
section 4723.482 of the Revised Code; 654

(2) Establish requirements for board approval of the two- 655
hour course of instruction in the laws of this state as required 656
under division (C) (1) of section 4723.482 of the Revised Code 657
~~and division (B) (2) of section 4723.484 of the Revised Code;~~ 658

(3) Establish criteria for the components of the standard 659
care arrangements described in section 4723.431 of the Revised 660
Code that apply to the authority to prescribe, including the 661
components that apply to the authority to prescribe schedule II 662
controlled substances. The rules shall be consistent with that 663
section and include all of the following: 664

(a) Quality assurance standards; 665

(b) Standards for periodic review by a collaborating 666
physician or podiatrist of the records of patients treated by 667
the clinical nurse specialist, certified nurse-midwife, or 668
certified nurse practitioner; 669

(c) Acceptable travel time between the location at which 670
the clinical nurse specialist, certified nurse-midwife, or 671
certified nurse practitioner is engaging in the prescribing 672
components of the nurse's practice and the location of the 673
nurse's collaborating physician or podiatrist; 674

(d) Any other criteria recommended by the committee on 675
prescriptive governance. 676

Sec. 4723.52. (A) As used in this section:	677
(1) "Community addiction services provider" has the same meaning as in section 5119.01 of the Revised Code.	678 679
(2) "Medication-assisted treatment" has the same meaning as in section 340.01 of the Revised Code.	680 681
(B) An advanced practice registered nurse shall comply with section 3719.064 of the Revised Code and rules adopted under section 4723.51 of the Revised Code when treating a patient for addiction with medication-assisted treatment or proposing to initiate such treatment.	682 683 684 685 686
(C) An advanced practice registered nurse who fails to comply with this section shall treat not more than thirty patients at any one time with medication-assisted treatment even if the facility or location at which the treatment is provided is either of the following:	687 688 689 690 691
(1) Exempted by divisions (B) (2) (a) to (d) <u>or (i)</u> of section 4729.553 of the Revised Code from being required to possess a category III terminal distributor of dangerous drugs license with an office-based opioid treatment classification;	692 693 694 695
(2) A community addiction services provider that provides alcohol and drug addiction services that are certified by the department of mental health and addiction services under section 5119.36 of the Revised Code.	696 697 698 699
Sec. 4729.01. As used in this chapter:	700
(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.	701 702 703 704

(B) "Practice of pharmacy" means providing pharmacist care	705
requiring specialized knowledge, judgment, and skill derived	706
from the principles of biological, chemical, behavioral, social,	707
pharmaceutical, and clinical sciences. As used in this division,	708
"pharmacist care" includes the following:	709
(1) Interpreting prescriptions;	710
(2) Dispensing drugs and drug therapy related devices;	711
(3) Compounding drugs;	712
(4) Counseling individuals with regard to their drug	713
therapy, recommending drug therapy related devices, and	714
assisting in the selection of drugs and appliances for treatment	715
of common diseases and injuries and providing instruction in the	716
proper use of the drugs and appliances;	717
(5) Performing drug regimen reviews with individuals by	718
discussing all of the drugs that the individual is taking and	719
explaining the interactions of the drugs;	720
(6) Performing drug utilization reviews with licensed	721
health professionals authorized to prescribe drugs when the	722
pharmacist determines that an individual with a prescription has	723
a drug regimen that warrants additional discussion with the	724
prescriber;	725
(7) Advising an individual and the health care	726
professionals treating an individual with regard to the	727
individual's drug therapy;	728
(8) Acting pursuant to a consult agreement with one or	729
more physicians authorized under Chapter 4731. of the Revised	730
Code to practice medicine and surgery or osteopathic medicine	731
and surgery, if an agreement has been established;	732

(9) Engaging in the administration of immunizations to the extent authorized by section 4729.41 of the Revised Code;	733 734
(10) Engaging in the administration of drugs to the extent authorized by section 4729.45 of the Revised Code.	735 736
(C) "Compounding" means the preparation, mixing, assembling, packaging, and labeling of one or more drugs in any of the following circumstances:	737 738 739
(1) Pursuant to a prescription issued by a licensed health professional authorized to prescribe drugs;	740 741
(2) Pursuant to the modification of a prescription made in accordance with a consult agreement;	742 743
(3) As an incident to research, teaching activities, or chemical analysis;	744 745
(4) In anticipation of orders for drugs pursuant to prescriptions, based on routine, regularly observed dispensing patterns;	746 747 748
(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:	749 750 751 752 753
(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.	754 755 756 757 758
(b) A limited quantity of the drug is compounded and provided to the professional.	759 760

(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~~4723.484, ~~4730.431~~4730.434, 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:	816
(a) An individual who there is reason to believe is at risk of experiencing an opioid-related overdose;	817 818
(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.	819 820 821
(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;	822 823 824 825 826 827
(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;	828 829 830 831 832
(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.	833 834 835 836 837
(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:	838 839 840 841 842
(1) A dentist licensed under Chapter 4715. of the Revised Code;	843 844

(2) A clinical nurse specialist, certified nurse-midwife, 845
or certified nurse practitioner who holds a current, valid 846
license issued under Chapter 4723. of the Revised Code to 847
practice nursing as an advanced practice registered nurse; 848

(3) A certified registered nurse anesthetist who holds a 849
current, valid license issued under Chapter 4723. of the Revised 850
Code to practice nursing as an advanced practice registered 851
nurse, but only to the extent of the nurse's authority under 852
sections 4723.43 and 4723.434 of the Revised Code; 853

(4) An optometrist licensed under Chapter 4725. of the 854
Revised Code to practice optometry under a therapeutic 855
pharmaceutical agents certificate; 856

(5) A physician authorized under Chapter 4731. of the 857
Revised Code to practice medicine and surgery, osteopathic 858
medicine and surgery, or podiatric medicine and surgery; 859

(6) A physician assistant who holds a license to practice 860
as a physician assistant issued under Chapter 4730. of the 861
Revised Code, holds a valid prescriber number issued by the 862
state medical board, and has been granted physician-delegated 863
prescriptive authority; 864

(7) A veterinarian licensed under Chapter 4741. of the 865
Revised Code. 866

(J) "Sale" or "sell" includes any transaction made by any 867
person, whether as principal proprietor, agent, or employee, to 868
do or offer to do any of the following: deliver, distribute, 869
broker, exchange, gift or otherwise give away, or transfer, 870
whether the transfer is by passage of title, physical movement, 871
or both. 872

(K) "Wholesale sale" and "sale at wholesale" mean any sale 873

in which the purpose of the purchaser is to resell the article 874
purchased or received by the purchaser. 875

(L) "Retail sale" and "sale at retail" mean any sale other 876
than a wholesale sale or sale at wholesale. 877

(M) "Retail seller" means any person that sells any 878
dangerous drug to consumers without assuming control over and 879
responsibility for its administration. Mere advice or 880
instructions regarding administration do not constitute control 881
or establish responsibility. 882

(N) "Price information" means the price charged for a 883
prescription for a particular drug product and, in an easily 884
understandable manner, all of the following: 885

(1) The proprietary name of the drug product; 886

(2) The established (generic) name of the drug product; 887

(3) The strength of the drug product if the product 888
contains a single active ingredient or if the drug product 889
contains more than one active ingredient and a relevant strength 890
can be associated with the product without indicating each 891
active ingredient. The established name and quantity of each 892
active ingredient are required if such a relevant strength 893
cannot be so associated with a drug product containing more than 894
one ingredient. 895

(4) The dosage form; 896

(5) The price charged for a specific quantity of the drug 897
product. The stated price shall include all charges to the 898
consumer, including, but not limited to, the cost of the drug 899
product, professional fees, handling fees, if any, and a 900
statement identifying professional services routinely furnished 901

by the pharmacy. Any mailing fees and delivery fees may be 902
stated separately without repetition. The information shall not 903
be false or misleading. 904

(O) "Wholesale distributor of dangerous drugs" or 905
"wholesale distributor" means a person engaged in the sale of 906
dangerous drugs at wholesale and includes any agent or employee 907
of such a person authorized by the person to engage in the sale 908
of dangerous drugs at wholesale. 909

(P) "Manufacturer of dangerous drugs" or "manufacturer" 910
means a person, other than a pharmacist or prescriber, who 911
manufactures dangerous drugs and who is engaged in the sale of 912
those dangerous drugs. 913

(Q) "Terminal distributor of dangerous drugs" or "terminal 914
distributor" means a person who is engaged in the sale of 915
dangerous drugs at retail, or any person, other than a 916
manufacturer, repackager, outsourcing facility, third-party 917
logistics provider, wholesale distributor, or pharmacist, who 918
has possession, custody, or control of dangerous drugs for any 919
purpose other than for that person's own use and consumption. 920
"Terminal distributor" includes pharmacies, hospitals, nursing 921
homes, and laboratories and all other persons who procure 922
dangerous drugs for sale or other distribution by or under the 923
supervision of a pharmacist, licensed health professional 924
authorized to prescribe drugs, or other person authorized by the 925
state board of pharmacy. 926

(R) "Promote to the public" means disseminating a 927
representation to the public in any manner or by any means, 928
other than by labeling, for the purpose of inducing, or that is 929
likely to induce, directly or indirectly, the purchase of a 930
dangerous drug at retail. 931

(S) "Person" includes any individual, partnership, 932
association, limited liability company, or corporation, the 933
state, any political subdivision of the state, and any district, 934
department, or agency of the state or its political 935
subdivisions. 936

(T) "Animal shelter" means a facility operated by a humane 937
society or any society organized under Chapter 1717. of the 938
Revised Code or a dog pound operated pursuant to Chapter 955. of 939
the Revised Code. 940

(U) "Food" has the same meaning as in section 3715.01 of 941
the Revised Code. 942

(V) "Pain management clinic" has the same meaning as in 943
section 4731.054 of the Revised Code. 944

(W) "Investigational drug or product" means a drug or 945
product that has successfully completed phase one of the United 946
States food and drug administration clinical trials and remains 947
under clinical trial, but has not been approved for general use 948
by the United States food and drug administration. 949
"Investigational drug or product" does not include controlled 950
substances in schedule I, as defined in section 3719.01 of the 951
Revised Code. 952

(X) "Product," when used in reference to an 953
investigational drug or product, means a biological product, 954
other than a drug, that is made from a natural human, animal, or 955
microorganism source and is intended to treat a disease or 956
medical condition. 957

(Y) "Third-party logistics provider" means a person that 958
provides or coordinates warehousing or other logistics services 959
pertaining to dangerous drugs including distribution, on behalf 960

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. 4729.29. Divisions (A) and (B) of section 4729.01 and section 4729.28 of the Revised Code do not do any of the following:

(A) Apply to a licensed health professional authorized to prescribe drugs who is acting within the prescriber's scope of professional practice;

(B) Prevent a prescriber from personally furnishing the prescriber's patients with drugs, within the prescriber's scope of professional practice, that seem proper to the prescriber, as

long as the drugs are furnished in accordance with section 990
4729.291 of the Revised Code; 991

(C) Apply to an individual who personally furnishes a 992
supply of naloxone under authority conferred ~~by a physician~~ 993
under section 4723.485, 4730.435, or 4731.941 of the Revised 994
Code or prevent that individual from personally furnishing the 995
supply of naloxone in accordance with a protocol established ~~by~~ 996
~~the physician~~ under section 4723.485, 4730.435, or 4731.941 of 997
the Revised Code; 998

(D) Apply to the sale of oxygen, the sale of peritoneal 999
dialysis solutions, or the sale of drugs that are not dangerous 1000
drugs by a retail dealer, in original packages when labeled as 1001
required by the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1002
1040 (1938), 21 U.S.C.A. 301, as amended. 1003

Sec. 4729.45. (A) As used in this section, "physician" 1004
means an individual authorized under Chapter 4731. of the 1005
Revised Code to practice medicine and surgery or osteopathic 1006
medicine and surgery. 1007

(B) (1) Subject to division (C) of this section, a 1008
pharmacist licensed under this chapter may administer by 1009
injection any of the following drugs as long as the drug that is 1010
to be administered has been prescribed by a physician and the 1011
individual to whom the drug was prescribed has an ongoing 1012
physician-patient relationship with the physician: 1013

(a) ~~An opioid antagonist used for treatment of drug~~ 1014
~~addiction and~~ An addiction treatment drug administered in a 1015
long-acting or extended-release form; 1016

(b) An antipsychotic drug administered in a long-acting or 1017
extended-release form; 1018

(c) Hydroxyprogesterone caproate;	1019
(d) Medroxyprogesterone acetate;	1020
(e) Cobalamin.	1021
(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.	1022 1023 1024 1025 1026
(C) To be authorized to administer drugs pursuant to this section, a pharmacist must do all of the following:	1027 1028
(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;	1029 1030 1031 1032
(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;	1033 1034 1035 1036 1037
(3) Practice in accordance with a protocol that meets the requirements of division (F) of this section.	1038 1039
(D) Each time a pharmacist administers a drug pursuant to this section, the pharmacist shall do all of the following:	1040 1041
(1) Obtain permission in accordance with the procedures specified in rules adopted under division (H) of this section and comply with the following requirements:	1042 1043 1044
(a) Except as provided in division (D) (1) (c) of this	1045

section, for each drug administered by a pharmacist to an 1046
individual who is eighteen years of age or older, the pharmacist 1047
shall obtain permission from the individual. 1048

(b) For each drug administered by a pharmacist to an 1049
individual who is under eighteen years of age, the pharmacist 1050
shall obtain permission from the individual's parent or other 1051
person having care or charge of the individual. 1052

(c) For each drug administered by a pharmacist to an 1053
individual who lacks the capacity to make informed health care 1054
decisions, the pharmacist shall obtain permission from the 1055
person authorized to make such decisions on the individual's 1056
behalf. 1057

(2) In the case of ~~an opioid antagonist~~ an addiction 1058
treatment drug described in division (B) (1) (a) of this section, 1059
obtain in accordance with division (E) of this section test 1060
results indicating that it is appropriate to administer the drug 1061
to the individual if either of the following is to be 1062
administered: 1063

(a) The initial dose of the drug; 1064

(b) Any subsequent dose, if the administration occurs more 1065
than thirty days after the previous dose of the drug was 1066
administered. 1067

(3) Observe the individual to whom the drug is 1068
administered to determine whether the individual has an adverse 1069
reaction to the drug; 1070

(4) Notify the physician who prescribed the drug that the 1071
drug has been administered to the individual. 1072

(E) A pharmacist may obtain the test results described in 1073

division (D) (2) of this section in either of the following ways:	1074
(1) From the physician;	1075
(2) By ordering blood and urine tests for the individual to whom the opioid antagonist <u>drug</u> is to be administered.	1076 1077
If a pharmacist orders blood and urine tests, the pharmacist shall evaluate the results of the tests to determine whether they indicate that it is appropriate to administer the opioid antagonist <u>drug</u> . A pharmacist's authority to evaluate test results under this division does not authorize the pharmacist to make a diagnosis.	1078 1079 1080 1081 1082 1083
(F) All of the following apply with respect to the protocol required by division (C) (3) of this section:	1084 1085
(1) The protocol must be established by a physician who has a scope of practice that includes treatment of the condition for which the individual has been prescribed the drug to be administered.	1086 1087 1088 1089
(2) The protocol must satisfy the requirements established in rules adopted under division (H) (1) (b) of this section.	1090 1091
(3) The protocol must do all of the following:	1092
(a) Specify a definitive set of treatment guidelines;	1093
(b) Specify the locations at which a pharmacist may engage in the administration of drugs pursuant to this section;	1094 1095
(c) Include provisions for implementing the requirements of division (D) of this section, including for purposes of division (D) (3) of this section provisions specifying the length of time and location at which a pharmacist must observe an individual who receives a drug to determine whether the	1096 1097 1098 1099 1100

individual has an adverse reaction to the drug; 1101

(d) Specify procedures to be followed by a pharmacist when 1102
administering epinephrine, diphenhydramine, or both, to an 1103
individual who has an adverse reaction to a drug administered by 1104
the pharmacist. 1105

(G) A pharmacist shall not do either of the following: 1106

(1) Engage in the administration of drugs pursuant to this 1107
section unless the requirements of division (C) of this section 1108
have been met; 1109

(2) Delegate to any person the pharmacist's authority to 1110
engage in the administration of drugs pursuant to this section. 1111

(H) (1) The state board of pharmacy shall adopt rules to 1112
implement this section. The rules shall be adopted in accordance 1113
with Chapter 119. of the Revised Code and include all of the 1114
following: 1115

(a) Requirements for courses in administration of drugs; 1116

(b) Requirements for protocols to be followed by 1117
pharmacists in administering drugs pursuant to this section; 1118

(c) Procedures to be followed by a pharmacist in obtaining 1119
permission to administer a drug to an individual. 1120

(2) The board shall consult with the state medical board 1121
before adopting rules regarding requirements for protocols under 1122
this section. 1123

Sec. 4729.514. (A) As used in this section, "service 1124
entity" means a public or private entity that may provide 1125
services to or interact with individuals who there is reason to 1126
believe may be at risk of experiencing an opioid-related 1127

overdose. "Service entity" includes a church or other place of 1128
worship, college or university, school, ~~local library,~~ health 1129
department operated by the board of health of a city or general 1130
health district, community addiction services provider, court, 1131
probation department, halfway house, prison, jail, community 1132
residential center, homeless shelter, or similar entity. 1133

(B) A service entity may procure and maintain naloxone for 1134
either or both of the following purposes: 1135

(1) To use in emergency situations; 1136

(2) To permit an employee, volunteer, or contractor of the 1137
service entity to personally furnish a supply of naloxone 1138
pursuant to a protocol established under section 3707.561, 1139
4723.485, 4730.435, or 4731.941 of the Revised Code. 1140

(C) A service entity or an employee, volunteer, or 1141
contractor of a service entity is not liable for or subject to 1142
any of the following for injury, death, or loss to person or 1143
property that allegedly arises from an act or omission 1144
associated with procuring, maintaining, accessing, ~~or using,~~ or 1145
personally furnishing naloxone under this section, unless the 1146
act or omission constitutes willful or wanton misconduct: 1147
damages in any civil action, prosecution in any criminal 1148
proceeding, or professional disciplinary action. 1149

This section does not eliminate, limit, or reduce any 1150
other immunity or defense that a service entity or an employee, 1151
volunteer, or contractor of a service entity may be entitled to 1152
under Chapter 2305. or any other provision of the Revised Code 1153
or under the common law of this state. 1154

Sec. 4729.515. (A) In accordance with divisions (B) and 1155
(C) of this section, a terminal distributor of dangerous drugs 1156

may acquire and maintain a supply of naloxone for use in 1157
emergency situations and for distribution through an automated 1158
mechanism. The naloxone may be maintained at a location other 1159
than the location licensed as a terminal distributor of 1160
dangerous drugs. 1161

(B) In the case of naloxone for use in emergency 1162
situations, a terminal distributor of dangerous drugs shall do 1163
all of the following: 1164

(1) Provide instructions regarding the emergency 1165
administration of naloxone to any individual who accesses the 1166
naloxone, including a specific instruction to summon emergency 1167
services as set forth in division (D) of this section; 1168

(2) Specify a process to be used to notify the terminal 1169
distributor that the naloxone has been accessed within a 1170
reasonable time of its being accessed; 1171

(3) Maintain the naloxone in accordance with the 1172
manufacturer's or distributor's instructions. 1173

(C) In the case of naloxone for distribution through an 1174
automated mechanism, a terminal distributor of dangerous drugs 1175
shall comply with standards and procedures specified in rules 1176
adopted under division (F) of this section. 1177

(D) (1) Notwithstanding any conflicting provision of the 1178
Revised Code, both of the following apply: 1179

(a) Any individual may access naloxone maintained as 1180
provided in division (B) of this section and may administer it 1181
to an individual who there is reason to believe is experiencing 1182
an opioid-related overdose. 1183

(b) Any individual may receive naloxone distributed 1184

through an automated system as provided in division (C) of this 1185
section and may administer it to an individual who there is 1186
reason to believe is experiencing an opioid-related overdose. 1187

(2) An individual who administers naloxone as authorized 1188
by this section shall make a good faith effort to activate or 1189
have another individual activate an emergency medical services 1190
system as soon as possible, except that this requirement does 1191
not apply if the individual administering the naloxone is doing 1192
so as part of an emergency medical services system or at a 1193
hospital, as defined in section 3727.01 of the Revised Code. 1194

(E) An individual is not liable for or subject to any of 1195
the following for injury, death, or loss to person or property 1196
that allegedly arises from an act or omission associated with 1197
any action authorized by this section, unless the act or 1198
omission constitutes willful or wanton misconduct: damages in 1199
any civil action, prosecution in any criminal proceeding, or 1200
professional disciplinary action. 1201

(F) The state board of pharmacy shall adopt rules 1202
establishing standards and procedures applicable to the 1203
distribution of naloxone through an automated mechanism. The 1204
rules shall be adopted in accordance with Chapter 119. of the 1205
Revised Code. 1206

Sec. 4729.541. (A) Except as provided in divisions (B) to 1207
(D) of this section, all of the following are exempt from 1208
licensure as a terminal distributor of dangerous drugs: 1209

(1) A licensed health professional authorized to prescribe 1210
drugs; 1211

(2) A business entity that is a corporation formed under 1212
division (B) of section 1701.03 of the Revised Code, a limited 1213

liability company formed under Chapter 1705. of the Revised 1214
Code, or a professional association formed under Chapter 1785. 1215
of the Revised Code if the entity has a sole shareholder who is 1216
a prescriber and is authorized to provide the professional 1217
services being offered by the entity; 1218

(3) A business entity that is a corporation formed under 1219
division (B) of section 1701.03 of the Revised Code, a limited 1220
liability company formed under Chapter 1705. of the Revised 1221
Code, a partnership or a limited liability partnership formed 1222
under Chapter 1775. of the Revised Code, or a professional 1223
association formed under Chapter 1785. of the Revised Code, if, 1224
to be a shareholder, member, or partner, an individual is 1225
required to be licensed, certified, or otherwise legally 1226
authorized under Title XLVII of the Revised Code to perform the 1227
professional service provided by the entity and each such 1228
individual is a prescriber; 1229

(4) An individual who holds a current license, 1230
certificate, or registration issued under Title XLVII of the 1231
Revised Code and has been certified to conduct diabetes 1232
education by a national certifying body specified in rules 1233
adopted by the state board of pharmacy under section 4729.68 of 1234
the Revised Code, but only with respect to insulin that will be 1235
used for the purpose of diabetes education and only if diabetes 1236
education is within the individual's scope of practice under 1237
statutes and rules regulating the individual's profession; 1238

(5) An individual who holds a valid certificate issued by 1239
a nationally recognized S.C.U.B.A. diving certifying 1240
organization approved by the state board of pharmacy under rules 1241
adopted by the board, but only with respect to medical oxygen 1242
that will be used for the purpose of emergency care or treatment 1243

at the scene of a diving emergency;	1244
(6) With respect to epinephrine autoinjectors that may be	1245
possessed under section 3313.7110, 3313.7111, 3314.143, 3326.28,	1246
or 3328.29 of the Revised Code, any of the following: the board	1247
of education of a city, local, exempted village, or joint	1248
vocational school district; a chartered or nonchartered	1249
nonpublic school; a community school established under Chapter	1250
3314. of the Revised Code; a STEM school established under	1251
Chapter 3326. of the Revised Code; or a college-preparatory	1252
boarding school established under Chapter 3328. of the Revised	1253
Code;	1254
(7) With respect to epinephrine autoinjectors that may be	1255
possessed under section 5101.76 of the Revised Code, any of the	1256
following: a residential camp, as defined in section 2151.011 of	1257
the Revised Code; a child day camp, as defined in section	1258
5104.01 of the Revised Code; or a child day camp operated by any	1259
county, township, municipal corporation, township park district	1260
created under section 511.18 of the Revised Code, park district	1261
created under section 1545.04 of the Revised Code, or joint	1262
recreation district established under section 755.14 of the	1263
Revised Code;	1264
(8) With respect to epinephrine autoinjectors that may be	1265
possessed under Chapter 3728. of the Revised Code, a qualified	1266
entity, as defined in section 3728.01 of the Revised Code;	1267
(9) With respect to inhalers that may be possessed under	1268
section 3313.7113, 3313.7114, 3314.144, 3326.30, or 3328.30 of	1269
the Revised Code, any of the following: the board of education	1270
of a city, local, exempted village, or joint vocational school	1271
district; a chartered or nonchartered nonpublic school; a	1272
community school established under Chapter 3314. of the Revised	1273

Code; a STEM school established under Chapter 3326. of the 1274
Revised Code; or a college-preparatory boarding school 1275
established under Chapter 3328. of the Revised Code; 1276

(10) With respect to inhalers that may be possessed under 1277
section 5101.77 of the Revised Code, any of the following: a 1278
residential camp, as defined in section 2151.011 of the Revised 1279
Code; a child day camp, as defined in section 5104.01 of the 1280
Revised Code; or a child day camp operated by any county, 1281
township, municipal corporation, township park district created 1282
under section 511.18 of the Revised Code, park district created 1283
under section 1545.04 of the Revised Code, or joint recreation 1284
district established under section 755.14 of the Revised Code; 1285

(11) With respect to naloxone that may be possessed under 1286
section 2925.61 of the Revised Code, a law enforcement agency 1287
and its peace officers; 1288

(12) With respect to naloxone that may be possessed under 1289
section 4729.514 of the Revised Code for use in emergency 1290
situations or for personally furnishing supplies of naloxone, a 1291
service entity, as defined in that section; 1292

(13) A facility that is owned and operated by the United 1293
States department of defense, the United States department of 1294
veterans affairs, or any other federal agency. 1295

(B) If a person described in division (A) of this section 1296
is a pain management clinic or is operating a pain management 1297
clinic, the person shall hold a license as a terminal 1298
distributor of dangerous drugs with a pain management clinic 1299
classification issued under section 4729.552 of the Revised 1300
Code. 1301

(C) If a person described in division (A) of this section 1302

is operating a facility, clinic, or other location described in 1303
division (B) of section 4729.553 of the Revised Code that must 1304
hold a category III terminal distributor of dangerous drugs 1305
license with an office-based opioid treatment classification, 1306
the person shall hold a license with that classification. 1307

(D) Any of the persons described in divisions (A) (1) to 1308
(12) of this section shall hold a license as a terminal 1309
distributor of dangerous drugs in order to possess, have custody 1310
or control of, and distribute any of the following: 1311

(1) Dangerous drugs that are compounded or used for the 1312
purpose of compounding; 1313

(2) A schedule I, II, III, IV, or V controlled substance, 1314
as defined in section 3719.01 of the Revised Code. 1315

Sec. 4729.553. (A) As used in this section: 1316

(1) "Advanced practice registered nurse" has the same 1317
meaning as in section 4723.01 of the Revised Code. 1318

(2) "Controlled substance" has the same meaning as in 1319
section 3719.01 of the Revised Code. 1320

~~(2)~~(3) "Hospital" means a hospital registered with the 1321
department of health under section 3701.07 of the Revised Code. 1322

~~(3)~~(4) "Office-based opioid treatment" means the 1323
treatment of opioid dependence or addiction using a controlled 1324
substance. 1325

(5) "Physician" means an individual who is authorized 1326
under Chapter 4731. of the Revised Code to practice medicine and 1327
surgery or osteopathic medicine and surgery. 1328

(6) "Physician assistant" means an individual who is 1329

licensed under Chapter 4730. of the Revised Code. 1330

(B) (1) Except as provided in ~~division~~divisions (B) (2) and 1331
(3) of this section, no person shall knowingly operate a 1332
facility, clinic, or other location where a prescriber provides 1333
office-based opioid treatment to more than thirty patients or 1334
that meets any other identifying criteria established in rules 1335
adopted under this section without holding a category III 1336
terminal distributor of dangerous drugs license with an office- 1337
based opioid treatment classification. 1338

(2) Division (B) (1) of this section does not apply to any 1339
of the following: 1340

(a) A hospital; 1341

(b) A facility for the treatment of opioid dependence or 1342
addiction that is operated by a hospital; 1343

(c) A physician practice owned or controlled, in whole or 1344
in part, by a hospital or by an entity that owns or controls, in 1345
whole or in part, one or more hospitals; 1346

(d) A facility that conducts only clinical research and 1347
uses controlled substances in studies approved by a hospital- 1348
based institutional review board or an institutional review 1349
board that is accredited by the association for the 1350
accreditation of human research protection programs, inc.; 1351

(e) A facility that holds a category III terminal 1352
distributor of dangerous drugs license in accordance with 1353
section 4729.54 of the Revised Code for the purpose of treating 1354
drug dependence or addiction as part of an opioid treatment 1355
program and is the subject of a current, valid certification 1356
from the substance abuse and mental health services 1357
administration of the United States department of health and 1358

human services pursuant to 42 C.F.R. 8.11; 1359

(f) A program or facility that holds a license or 1360
certification issued by the department of mental health and 1361
addiction services under Chapter 5119. of the Revised Code if 1362
the license or certification is approved by the state board of 1363
pharmacy; 1364

(g) A federally qualified health center or federally 1365
qualified health center look-alike, as defined in section 1366
3701.047 of the Revised Code; 1367

(h) A state or local correctional facility, as defined in 1368
section 5163.45 of the Revised Code; 1369

(i) A facility in which patients are treated on-site for 1370
opioid dependence or addiction exclusively through direct 1371
administration by a physician, physician assistant, or advanced 1372
practice registered nurse of drugs that are used for treatment 1373
of opioid dependence or addiction and are neither dispensed nor 1374
personally furnished to patients for off-site self- 1375
administration; 1376

(j) Any other facility specified in rules adopted under 1377
this section. 1378

(3) A patient who receives treatment on-site for opioid 1379
dependence or addiction through direct administration of a drug 1380
by a physician, physician assistant, or advanced practice 1381
registered nurse shall not be included in determining whether 1382
more than thirty patients are being provided office-based opioid 1383
treatment in a particular facility, clinic, or other location 1384
that is subject to division (B)(1) of this section. 1385

(C) To be eligible to receive a license as a category III 1386
terminal distributor of dangerous drugs with an office-based 1387

opioid treatment classification, an applicant shall submit 1388
evidence satisfactory to the state board of pharmacy that the 1389
applicant's office-based opioid treatment will be operated in 1390
accordance with the requirements specified in division (D) of 1391
this section and that the applicant meets any other applicable 1392
requirements of this chapter. 1393

If the board determines that an applicant meets all of the 1394
requirements, the board shall issue to the applicant a license 1395
as a category III terminal distributor of dangerous drugs with 1396
an office-based opioid treatment classification. 1397

(D) The holder of a category III terminal distributor 1398
license with an office-based opioid treatment classification 1399
shall do all of the following: 1400

(1) Be in control of a facility that is owned and operated 1401
solely by one or more physicians ~~authorized under Chapter 4731.~~ 1402
~~of the Revised Code to practice medicine and surgery or~~ 1403
~~osteopathic medicine and surgery,~~ unless the state board of 1404
pharmacy waives this requirement for the holder; 1405

(2) Comply with the requirements for conducting office- 1406
based opioid treatment, as established by the state medical 1407
board in rules adopted under section 4731.056 of the Revised 1408
Code; 1409

(3) Require any person with ownership of the facility to 1410
submit to a criminal records check in accordance with section 1411
4776.02 of the Revised Code and send the results of the criminal 1412
records check directly to the state board of pharmacy for review 1413
and decision under section 4729.071 of the Revised Code; 1414

(4) Require each person employed by or seeking employment 1415
with the facility to submit to a criminal records check in 1416

accordance with section 4776.02 of the Revised Code; 1417

(5) Ensure that a person is not employed by the facility 1418
if the person, within the ten years immediately preceding the 1419
date the person applied for employment, was convicted of or 1420
pleaded guilty to either of the following, unless the state 1421
board of pharmacy permits the person to be employed by waiving 1422
this requirement for the facility: 1423

(a) A theft offense, described in division (K)(3) of 1424
section 2913.01 of the Revised Code, that would constitute a 1425
felony under the laws of this state, any other state, or the 1426
United States; 1427

(b) A felony drug offense, as defined in section 2925.01 1428
of the Revised Code. 1429

(6) Maintain a list of each person with ownership of the 1430
facility and notify the state board of pharmacy of any change to 1431
that list. 1432

(E) No person subject to licensure as a category III 1433
terminal distributor of dangerous drugs with an office-based 1434
opioid treatment classification shall knowingly fail to remain 1435
in compliance with the requirements of division (D) of this 1436
section and any other applicable requirements of this chapter. 1437

(F) The state board of pharmacy may impose a fine of not 1438
more than five thousand dollars on a person who violates 1439
division (B) or (E) of this section. A separate fine may be 1440
imposed for each day the violation continues. In imposing the 1441
fine, the board's actions shall be taken in accordance with 1442
Chapter 119. of the Revised Code. 1443

(G) The state board of pharmacy shall adopt rules as it 1444
considers necessary to implement and administer this section. 1445

The rules shall be adopted in accordance with Chapter 119. of 1446
the Revised Code. 1447

Sec. 4729.80. (A) If the state board of pharmacy 1448
establishes and maintains a drug database pursuant to section 1449
4729.75 of the Revised Code, the board is authorized or required 1450
to provide information from the database only as follows: 1451

(1) On receipt of a request from a designated 1452
representative of a government entity responsible for the 1453
licensure, regulation, or discipline of health care 1454
professionals with authority to prescribe, administer, or 1455
dispense drugs, the board may provide to the representative 1456
information from the database relating to the professional who 1457
is the subject of an active investigation being conducted by the 1458
government entity or relating to a professional who is acting as 1459
an expert witness for the government entity in such an 1460
investigation. 1461

(2) On receipt of a request from a federal officer, or a 1462
state or local officer of this or any other state, whose duties 1463
include enforcing laws relating to drugs, the board shall 1464
provide to the officer information from the database relating to 1465
the person who is the subject of an active investigation of a 1466
drug abuse offense, as defined in section 2925.01 of the Revised 1467
Code, being conducted by the officer's employing government 1468
entity. 1469

(3) Pursuant to a subpoena issued by a grand jury, the 1470
board shall provide to the grand jury information from the 1471
database relating to the person who is the subject of an 1472
investigation being conducted by the grand jury. 1473

(4) Pursuant to a subpoena, search warrant, or court order 1474

in connection with the investigation or prosecution of a 1475
possible or alleged criminal offense, the board shall provide 1476
information from the database as necessary to comply with the 1477
subpoena, search warrant, or court order. 1478

(5) On receipt of a request from a prescriber or the 1479
prescriber's delegate approved by the board, the board shall 1480
provide to the prescriber a report of information from the 1481
database relating to a patient who is either a current patient 1482
of the prescriber or a potential patient of the prescriber based 1483
on a referral of the patient to the prescriber, if all of the 1484
following conditions are met: 1485

(a) The prescriber certifies in a form specified by the 1486
board that it is for the purpose of providing medical treatment 1487
to the patient who is the subject of the request; 1488

(b) The prescriber has not been denied access to the 1489
database by the board. 1490

(6) On receipt of a request from a pharmacist or the 1491
pharmacist's delegate approved by the board, the board shall 1492
provide to the pharmacist information from the database relating 1493
to a current patient of the pharmacist, if the pharmacist 1494
certifies in a form specified by the board that it is for the 1495
purpose of the pharmacist's practice of pharmacy involving the 1496
patient who is the subject of the request and the pharmacist has 1497
not been denied access to the database by the board. 1498

(7) On receipt of a request from an individual seeking the 1499
individual's own database information in accordance with the 1500
procedure established in rules adopted under section 4729.84 of 1501
the Revised Code, the board may provide to the individual the 1502
individual's own prescription history. 1503

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

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

(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, the board shall provide to the director information from the database relating to the duties of the director or the department of health in implementing the Ohio violent death reporting system established under section 3701.93 of the Revised Code.

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

(15) On receipt of a request from a delegate of a retail

dispensary licensed under Chapter 3796. of the Revised Code who 1565
is approved by the board to serve as the dispensary's delegate, 1566
the board shall provide to the delegate a report of information 1567
from the database pertaining only to a patient's use of medical 1568
marijuana, if both of the following conditions are met: 1569

(a) The delegate certifies in a form specified by the 1570
board that it is for the purpose of dispensing medical marijuana 1571
for use in accordance with Chapter 3796. of the Revised Code. 1572

(b) The retail dispensary or delegate has not been denied 1573
access to the database by the board. 1574

(16) On receipt of a request from a judge of a program 1575
certified by the Ohio supreme court as a specialized docket 1576
program for drugs, the board shall provide to the judge, or an 1577
employee of the program who is designated by the judge to 1578
receive the information, information from the database that 1579
relates specifically to a current or prospective program 1580
participant. 1581

(17) On receipt of a request from a coroner, deputy 1582
coroner, or coroner's delegate approved by the board, the board 1583
shall provide to the requestor information from the database 1584
relating to a deceased person about whom the coroner is 1585
conducting or has conducted an autopsy or investigation. 1586

(18) On receipt of a request from a prescriber, the board 1587
may provide to the prescriber a summary of the prescriber's 1588
prescribing record if such a record is created by the board. 1589
Information in the summary is subject to the confidentiality 1590
requirements of this chapter. 1591

(19) (a) On receipt of a request from a pharmacy's 1592
responsible person, the board may provide to the responsible 1593

person a summary of the pharmacy's dispensing record if such a 1594
record is created by the board. Information in the summary is 1595
subject to the confidentiality requirements of this chapter. 1596

(b) As used in division (A)(19)(a) of this section, 1597
"responsible person" has the same meaning as in rules adopted by 1598
the board under section 4729.26 of the Revised Code. 1599

(20) The board may provide information from the database 1600
without request to a prescriber or pharmacist who is authorized 1601
to use the database pursuant to this chapter. 1602

(21)(a) On receipt of a request from a prescriber or 1603
pharmacist, or the prescriber's or pharmacist's delegate, who is 1604
a designated representative of a peer review committee, the 1605
board shall provide to the committee information from the 1606
database relating to a prescriber who is subject to the 1607
committee's evaluation, supervision, or discipline if the 1608
information is to be used for one of those purposes. The board 1609
shall provide only information that it determines, in accordance 1610
with rules adopted under section 4729.84 of the Revised Code, is 1611
appropriate to be provided to the committee. 1612

(b) As used in division (A)(21)(a) of this section, "peer 1613
review committee" has the same meaning as in section 2305.25 of 1614
the Revised Code, except that it includes only a peer review 1615
committee of a hospital or a peer review committee of a 1616
nonprofit health care corporation that is a member of the 1617
hospital or of which the hospital is a member. 1618

(22) On receipt of a request from a requestor described in 1619
division (A)(5) or (6) of this section who is from or 1620
participating with a prescription monitoring program that is 1621
operated by a federal agency and approved by the board, the 1622

board may provide to the requestor information from the 1623
database, but only if there is a written agreement under which 1624
the information is to be used and disseminated according to the 1625
laws of this state. 1626

(23) Any personal health information submitted to the 1627
board pursuant to section 4729.772 of the Revised Code may be 1628
provided by the board only as authorized by the submitter of the 1629
information and in accordance with rules adopted under section 1630
4729.84 of the Revised Code. 1631

(B) The state board of pharmacy shall maintain a record of 1632
each individual or entity that requests information from the 1633
database pursuant to this section. In accordance with rules 1634
adopted under section 4729.84 of the Revised Code, the board may 1635
use the records to document and report statistics and law 1636
enforcement outcomes. 1637

The board may provide records of an individual's requests 1638
for database information only to the following: 1639

(1) A designated representative of a government entity 1640
that is responsible for the licensure, regulation, or discipline 1641
of health care professionals with authority to prescribe, 1642
administer, or dispense drugs who is involved in an active 1643
criminal or disciplinary investigation being conducted by the 1644
government entity of the individual who submitted the requests 1645
for database information; 1646

(2) A federal officer, or a state or local officer of this 1647
or any other state, whose duties include enforcing laws relating 1648
to drugs and who is involved in an active investigation being 1649
conducted by the officer's employing government entity of the 1650
individual who submitted the requests for database information; 1651

(3) A designated representative of the department of 1652
medicaid regarding a prescriber who is treating or has treated a 1653
recipient of a program administered by the department and who 1654
submitted the requests for database information. 1655

(C) Information contained in the database and any 1656
information obtained from it is confidential and is not a public 1657
record. Information contained in the records of requests for 1658
information from the database is confidential and is not a 1659
public record. Information contained in the database that does 1660
not identify a person, including any licensee or registrant of 1661
the board or other entity, may be released in summary, 1662
statistical, or aggregate form. 1663

(D) A pharmacist or prescriber shall not be held liable in 1664
damages to any person in any civil action for injury, death, or 1665
loss to person or property on the basis that the pharmacist or 1666
prescriber did or did not seek or obtain information from the 1667
database. 1668

Sec. ~~4730.431~~ 4730.434. (A) Notwithstanding any provision 1669
of this chapter or rule adopted by the state medical board, a 1670
physician assistant who holds a valid prescriber number issued 1671
by the board and has been granted physician-delegated 1672
prescriptive authority may personally furnish a supply of 1673
naloxone, or issue a prescription for naloxone, without having 1674
examined the individual to whom it may be administered if both 1675
of the following conditions are met: 1676

(1) The naloxone supply is furnished to, or the 1677
prescription is issued to and in the name of, a family member, 1678
friend, or other individual in a position to assist an 1679
individual who there is reason to believe is at risk of 1680
experiencing an opioid-related overdose. 1681

(2) The physician assistant instructs the individual 1682
receiving the naloxone supply or prescription to summon 1683
emergency services as soon as practicable either before or after 1684
administering naloxone to an individual apparently experiencing 1685
an opioid-related overdose. 1686

(B) A physician assistant who under division (A) of this 1687
section in good faith furnishes a supply of naloxone or issues a 1688
prescription for naloxone is not liable for or subject to any of 1689
the following for any action or omission of the individual to 1690
whom the naloxone is furnished or the prescription is issued: 1691
damages in any civil action, prosecution in any criminal 1692
proceeding, or professional disciplinary action. 1693

Sec. 4730.435. (A) (1) A physician assistant who holds a 1694
valid prescriber number issued by the state medical board, who 1695
has been granted physician-delegated prescriptive authority, and 1696
who has established a protocol that meets the requirements of 1697
division (C) of this section may authorize one or more other 1698
individuals to personally furnish a supply of naloxone pursuant 1699
to the protocol to either of the following: 1700

(a) An individual who there is reason to believe is 1701
experiencing or at risk of experiencing an opioid-related 1702
overdose; 1703

(b) A family member, friend, or other person in a position 1704
to assist an individual who there is reason to believe is at 1705
risk of experiencing an opioid-related overdose. 1706

(2) An individual authorized under this section to 1707
personally furnish naloxone may do so without having examined 1708
the individual to whom it may be administered. 1709

(B) An individual authorized by a physician assistant 1710

under this section may personally furnish naloxone to an 1711
individual described in division (A) (1) (a) or (b) of this 1712
section if both of the following conditions are met: 1713

(1) The authorized individual complies with the protocol 1714
established by the authorizing physician assistant, including 1715
having completed the training required by the protocol. 1716

(2) The authorized individual instructs the individual to 1717
whom naloxone is furnished to summon emergency services as soon 1718
as practicable either before or after administering naloxone. 1719

(C) A protocol established by a physician assistant for 1720
purposes of this section shall be established in writing and 1721
include all of the following: 1722

(1) A description of the clinical pharmacology of 1723
naloxone; 1724

(2) Precautions and contraindications concerning 1725
furnishing naloxone; 1726

(3) Any limitations the physician assistant specifies 1727
concerning the individuals to whom naloxone may be furnished; 1728

(4) The naloxone dosage that may be furnished and any 1729
variation in the dosage based on circumstances specified in the 1730
protocol; 1731

(5) Labeling, storage, record keeping, and administrative 1732
requirements; 1733

(6) Training requirements that must be met before an 1734
individual will be authorized to furnish naloxone; 1735

(7) Any instructions or training that the authorized 1736
individual must provide to an individual to whom naloxone is 1737

furnished. 1738

(D) A physician assistant who in good faith authorizes 1739
another individual to personally furnish naloxone in accordance 1740
with a protocol established by the physician assistant under 1741
this section is not liable for or subject to any of the 1742
following for any action or omission of the individual to whom 1743
the naloxone is furnished: damages in any civil action, 1744
prosecution in any criminal proceeding, or professional 1745
disciplinary action. 1746

An individual authorized under this section to personally 1747
furnish naloxone who does so in good faith is not liable for or 1748
subject to any of the following for any action or omission of 1749
the individual to whom the naloxone is furnished: damages in any 1750
civil action, prosecution in any criminal proceeding, or 1751
professional disciplinary action. 1752

Sec. 4730.436. (A) As used in this section, "service 1753
entity" has the same meaning as in section 4729.514 of the 1754
Revised Code. 1755

(B) A physician assistant who holds a valid prescriber 1756
number issued by the state medical board, who has been granted 1757
physician-delegated prescriptive authority, and who has 1758
established a protocol under division (D) of this section may 1759
authorize an individual who is an employee, volunteer, or 1760
contractor of a service entity to administer naloxone to an 1761
individual who is apparently experiencing an opioid-related 1762
overdose. 1763

(C) An individual authorized by a physician assistant 1764
under this section may administer naloxone to an individual who 1765
is apparently experiencing an opioid-related overdose if all of 1766

the following conditions are met: 1767

(1) The naloxone is obtained from a service entity of 1768
which the authorized individual is an employee, volunteer, or 1769
contractor. 1770

(2) The authorized individual complies with the protocol 1771
established by the authorizing physician assistant. 1772

(3) The authorized individual summons emergency services 1773
as soon as practicable either before or after administering the 1774
naloxone. 1775

(D) A protocol established by a physician assistant for 1776
purposes of this section must be in writing and include all of 1777
the following: 1778

(1) A description of the clinical pharmacology of 1779
naloxone; 1780

(2) Precautions and contraindications concerning the 1781
administration of naloxone; 1782

(3) Any limitations the physician assistant specifies 1783
concerning the individuals to whom naloxone may be administered; 1784

(4) The naloxone dosage that may be administered and any 1785
variation in the dosage based on circumstances specified in the 1786
protocol; 1787

(5) Labeling, storage, record keeping, and administrative 1788
requirements; 1789

(6) Training requirements that must be met before an 1790
individual can be authorized to administer naloxone. 1791

(E) A physician assistant who in good faith authorizes an 1792
individual to administer naloxone under this section is not 1793

liable for or subject to any of the following for any act or 1794
omission of the authorized individual: damages in any civil 1795
action, prosecution in any criminal proceeding, or professional 1796
disciplinary action. 1797

A service entity or an employee, volunteer, or contractor 1798
of a service entity is not liable for or subject to any of the 1799
following for injury, death, or loss to person or property that 1800
allegedly arises from an act or omission associated with 1801
procuring, maintaining, accessing, or administering naloxone 1802
under this section, unless the act or omission constitutes 1803
willful or wanton misconduct: damages in any civil action, 1804
prosecution in any criminal proceeding, or professional 1805
disciplinary action. 1806

This section does not eliminate, limit, or reduce any 1807
other immunity or defense that a service entity or an employee, 1808
volunteer, or contractor of a service entity may be entitled to 1809
under Chapter 2305. or any other provision of the Revised Code 1810
or under the common law of this state. 1811

Sec. 4730.56. (A) As used in this section: 1812

(1) "Community addiction services provider" has the same 1813
meaning as in section 5119.01 of the Revised Code. 1814

(2) "Medication-assisted treatment" has the same meaning 1815
as in section 340.01 of the Revised Code. 1816

(B) A physician assistant shall comply with section 1817
3719.064 of the Revised Code and rules adopted under section 1818
4730.55 of the Revised Code when treating a patient with 1819
medication-assisted treatment or proposing to initiate such 1820
treatment. 1821

(C) A physician assistant who fails to comply with this 1822

section shall treat not more than thirty patients at any one 1823
time with medication-assisted treatment even if the facility or 1824
location at which the treatment is provided is either of the 1825
following: 1826

(1) Exempted by divisions (B) (2) (a) to (d) or (i) of 1827
section 4729.553 of the Revised Code from being required to 1828
possess a category III terminal distributor of dangerous drugs 1829
license with an office-based opioid treatment classification; 1830

(2) A community addiction services provider that provides 1831
alcohol and drug addiction services that are certified by the 1832
department of mental health and addiction services under section 1833
5119.36 of the Revised Code. 1834

Sec. 4731.83. (A) As used in this section: 1835

(1) "Medication-assisted treatment" has the same meaning 1836
as in section 340.01 of the Revised Code. 1837

(2) "Physician" means an individual authorized by this 1838
chapter to practice medicine and surgery or osteopathic medicine 1839
and surgery. 1840

(B) A physician shall comply with section 3719.064 of the 1841
Revised Code and rules adopted under section 4731.056 of the 1842
Revised Code when treating a patient with medication-assisted 1843
treatment or proposing to initiate such treatment. 1844

(C) A physician who fails to comply with this section 1845
shall treat not more than thirty patients at any one time with 1846
medication-assisted treatment even if the facility or location 1847
at which the treatment is provided is either of the following: 1848

(1) Exempted by divisions (B) (2) (a) to (d) or (i) of 1849
section 4729.553 of the Revised Code from being required to 1850

possess a category III terminal distributor of dangerous drugs 1851
license with an office-based opioid treatment classification; 1852

(2) A community addiction services provider that provides 1853
alcohol and drug addiction services that are certified by the 1854
department of mental health and addiction services under section 1855
5119.36 of the Revised Code. 1856

Section 2. That existing sections 121.22, 2925.61, 1857
4723.486, 4723.488, 4723.50, 4723.52, 4729.01, 4729.29, 4729.45, 1858
4729.514, 4729.541, 4729.553, 4729.80, 4730.431, 4730.56, and 1859
4731.83 of the Revised Code are hereby repealed. 1860

Section 3. The General Assembly, applying the principle 1861
stated in division (B) of section 1.52 of the Revised Code that 1862
amendments are to be harmonized if reasonably capable of 1863
simultaneous operation, finds that the following sections, 1864
presented in this act as composites of the sections as amended 1865
by the acts indicated, are the resulting versions of the 1866
sections in effect prior to the effective date of the sections 1867
as presented in this act: Section 2925.61 of the Revised Code as 1868
amended by both H.B. 216 and S.B. 319 of the 131st General 1869
Assembly. Section 4729.553 of the Revised Code as amended by 1870
both H.B. 101 and S.B. 229 of the 132nd General Assembly. 1871
Section 4730.431 of the Revised Code as amended by both H.B. 4 1872
and S.B. 110 of the 131st General Assembly. 1873