

**As Introduced**

**134th General Assembly  
Regular Session  
2021-2022**

**H. B. No. 421**

**Representative Gross**

**Cosponsors: Representatives Hall, Cross, Click, Johnson, Dean, Riedel, Wiggam,  
Ferguson, Creech, Brinkman, Powell, Fowler Arthur, Stoltzfus, Seitz, Jordan**

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**A BILL**

To amend sections 2305.15, 2317.56, 2919.11, 1  
3726.14, and 4731.22; to enact sections 117.55, 2  
2305.118, 3701.792, and 3701.793; and to repeal 3  
section 2317.561 of the Revised Code to revise 4  
the informed consent law regarding abortions. 5

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

**Section 1.** That sections 2305.15, 2317.56, 2919.11, 6  
3726.14, and 4731.22 be amended and sections 117.55, 2305.118, 7  
3701.792, and 3701.793 of the Revised Code be enacted to read as 8  
follows: 9

Sec. 117.55. Not later than one hundred eighty days after 10  
the effective date of this section, the auditor of state shall 11  
adopt rules under Chapter 119. of the Revised Code to establish 12  
all of the following: 13

(A) Procedures for auditing the department of health's 14  
audit records under section 3701.792 of the Revised Code; 15

(B) Penalties to be assessed against entities or providers 16  
for noncompliance with section 2317.56 of the Revised Code, as 17

determined by the audits performed under division (A) of this 18  
section; 19

(C) Procedures for enforcing penalties established under 20  
division (B) of this section. 21

**Sec. 2305.118.** (A) If a person commencing a civil action 22  
under division (H) of section 2317.56 or division (E) of section 23  
2919.12 of the Revised Code, in the exercise of reasonable care 24  
and diligence, could not have discovered that the person has 25  
suffered injury, death, or loss to person or property resulting 26  
from the violation constituting the alleged basis of the action 27  
within the one-year period pursuant to division (B) of section 28  
2305.11 of the Revised Code, the person may commence the action 29  
not later than one year after the person, with reasonable care 30  
and diligence, should have discovered the injury, death, or loss 31  
to person or property. 32

(B) A person against whom a civil action is commenced 33  
under the circumstances described in division (A) of this 34  
section may use any affirmative defense available under the 35  
Revised Code or common law, including the affirmative defense of 36  
the action being brought past the statute of limitations. The 37  
person has the burden of proving any defense that the person 38  
invokes by a preponderance of evidence. 39

**Sec. 2305.15.** (A) When a cause of action accrues against a 40  
person, if the person is out of the state, has absconded, or 41  
conceals self, the period of limitation for the commencement of 42  
the action as provided in sections 2305.04 to 2305.14, 1302.98, 43  
and 1304.35 of the Revised Code does not begin to run until the 44  
person comes into the state or while the person is so absconded 45  
or concealed. After the cause of action accrues if the person 46  
departs from the state, absconds, or conceals self, the time of 47

the person's absence or concealment shall not be computed as any 48  
part of a period within which the action must be brought. 49

(B) When a person is imprisoned for the commission of any 50  
offense, the time of the person's imprisonment shall not be 51  
computed as any part of any period of limitation, as provided in 52  
section 2305.09, 2305.10, 2305.11, 2305.113, 2305.118, or 53  
2305.14 of the Revised Code, within which any person must bring 54  
any action against the imprisoned person. 55

**Sec. 2317.56.** (A) As used in this section: 56

(1) "Ascultate" means to examine by listening for sounds 57  
made by internal organs of the fetus, specifically for a fetal 58  
heartbeat, utilizing an ultrasound transducer or a fetal heart 59  
rate monitor; 60

(2) "Medical emergency" has the same meaning as in section 61  
2919.16 of the Revised Code. 62

~~(2)~~ (3) "Medical necessity" means a medical condition of a 63  
pregnant woman that, in the reasonable judgment of the physician 64  
who is attending the woman, so complicates the pregnancy that it 65  
necessitates the immediate performance or inducement of an 66  
abortion. 67

~~(3)~~ (4) "Probable gestational age of the zygote, 68  
blastocyte, embryo, or fetus" means the gestational age that, in 69  
the judgment of a physician, is, with reasonable probability, 70  
the gestational age of the zygote, blastocyte, embryo, or fetus 71  
at the time that the physician informs a pregnant woman pursuant 72  
to division (B) (1) (b) of this section. 73

(5) "Qualified technician" means a medical imaging 74  
technologist who is certified in obstetrics and gynecology by 75  
the American registry for diagnostic medical sonography or a 76

certified nurse-midwife or certified nurse practitioner in 77  
obstetrics with certification in obstetrical ultrasonography; 78

(6) "Ultrasound" means the use of ultrasonic waves for 79  
diagnostic or therapeutic purposes, specifically to monitor a 80  
developing fetus. 81

(B) Except when there is a medical emergency or medical 82  
necessity, an abortion shall be performed or induced only if all 83  
of the following conditions are satisfied: 84

(1) Prior to a pregnant woman giving informed consent 85  
under division (B)(5) of this section, the physician who is to 86  
perform or induce the abortion or a qualified technician to whom 87  
the responsibility has been delegated by the physician shall do 88  
all of the following: 89

(a) Set up ultrasound equipment in a manner so that 90  
ultrasound images are within reasonable viewing distance and 91  
heartbeat sounds are within reasonable hearing range from the 92  
woman; 93

(b) Explain to the pregnant woman that the ultrasound 94  
images and fetal heartbeat sounds, if the heartbeat is audible, 95  
will be provided to the pregnant woman during the examination, 96  
and that the pregnant woman has the option to avert her eyes 97  
from ultrasound images or request the volume of the heartbeat to 98  
be reduced or turned off, if the heartbeat is audible; 99

(c) Provide a simultaneous explanation of what the 100  
ultrasound is depicting, which shall include the presence and 101  
location of the embryo or fetus within the uterus, the number of 102  
embryos or fetuses depicted, and, if the ultrasound image 103  
indicates that fetal death has occurred, inform the woman of 104  
that fact; 105

(d) Display the ultrasound images so that the pregnant woman may view the images; 106  
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(e) Ascultate the fetal heartbeat of the embryo or fetus so that the pregnant woman may hear the heartbeat, if it is audible; 108  
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(f) Provide a medical description of ultrasound images, which shall include the dimensions of the embryo or fetus and the presence of external members and internal organs, if present and viewable; 111  
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(g) Offer to provide the pregnant woman a physical picture of the ultrasound image of the embryo or fetus; 115  
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(h) Obtain the woman's signature on a certification that she has been presented with the information required to be provided under divisions (B) (1) (c) to (f) of this division and has viewed the ultrasound images and listened to the heartbeat, if the heartbeat is audible, or declined to do so; 117  
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(i) Retain in the pregnant woman's medical record the signed certification under division (B) (1) (h) of this section. 122  
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The requirement to provide an ultrasound so that the pregnant woman may view the active ultrasound images of the embryo or fetus shall be performed at no additional charge to her. 124  
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(2) At least twenty-four hours prior to the performance or inducement of the abortion, a physician meets with the pregnant woman in person in an individual, private setting and gives her an adequate opportunity to ask questions about the abortion that will be performed or induced. At this meeting, the physician shall inform the pregnant woman, verbally or, if she is hearing impaired, by other means of communication, of all of the 128  
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following:	135
(a) The nature and purpose of the particular abortion procedure to be used and the medical risks associated with that procedure;	136 137 138
(b) The probable gestational age of the zygote, blastocyte, embryo, or fetus;	139 140
(c) The medical risks associated with the pregnant woman carrying the pregnancy to term;	141 142
<u>(d) The possible increased risk of breast cancer that is associated with women who have undergone an abortion;</u>	143 144
<u>(e) The short-term and long-term risk of psychological or emotional harm, including depression, suicidal ideation, post-traumatic stress disorder, and guilt, that the woman may endure from undergoing an abortion.</u>	145 146 147 148
The meeting need not occur at the facility where the abortion is to be performed or induced, and the physician involved in the meeting need not be affiliated with that facility or with the physician who is scheduled to perform or induce the abortion. <u>Any physician who provides information under divisions (B) (2) (d) and (e) of this section shall possess adequate training and education in the categories of risk described in those two divisions, as well as any other risks associated with abortion. Evidence of adequate training includes successful completion of continuing education and professional development courses or programs in the relevant subject areas.</u>	149 150 151 152 153 154 155 156 157 158 159
<del>(2)</del> <u>(3)</u> At least twenty-four hours prior to the performance or inducement of the abortion, the physician who is to perform or induce the abortion or the physician's agent does each of the following in person, by telephone, by certified	160 161 162 163

mail, return receipt requested, or by regular mail evidenced by 164  
a certificate of mailing: 165

(a) Inform the pregnant woman of the name of the physician 166  
who is scheduled to perform or induce the abortion; 167

(b) Give the pregnant woman copies of the published 168  
materials described in division (C) of this section; 169

(c) Inform the pregnant woman that the materials given 170  
pursuant to division ~~(B) (2) (b)~~ (B) (3) (b) of this section are 171  
published by the state and that they describe the zygote, 172  
blastocyte, embryo, or fetus and list agencies that offer 173  
alternatives to abortion. The pregnant woman may choose to 174  
examine or not to examine the materials. A physician or an agent 175  
of a physician may choose to be disassociated from the materials 176  
and may choose to comment or not comment on the materials. 177

~~(3)~~ (4) If it has been determined that the unborn human 178  
individual the pregnant woman is carrying has a detectable fetal 179  
heartbeat, the physician who is to perform or induce the 180  
abortion shall comply with the informed consent requirements in 181  
section 2919.194 of the Revised Code in addition to complying 182  
with the informed consent requirements in divisions ~~(B) (1), (2),~~ 183  
~~(4),~~ and (B) (2), (3), (5), and (6) of this section. 184

~~(4)~~ (5) Prior to the performance or inducement of the 185  
abortion, the pregnant woman signs a form consenting to the 186  
abortion and certifies all of the following on that form: 187

(a) She has received the information and materials 188  
described in divisions ~~(B) (1)~~ (B) (2) and ~~(2)~~ (3) of this 189  
section, and her questions about the abortion that will be 190  
performed or induced have been answered in a satisfactory 191  
manner. 192

(b) She consents to the particular abortion voluntarily, 193  
knowingly, intelligently, and without coercion by any person, 194  
and she is not under the influence of any drug of abuse or 195  
alcohol. 196

(c) If the abortion will be performed or induced 197  
surgically, she has been provided with the notification form 198  
described in division (A) of section 3726.14 of the Revised 199  
Code. 200

(d) If the abortion will be performed or induced 201  
surgically and she desires to exercise the rights under division 202  
(A) of section 3726.03 of the Revised Code, she has completed 203  
the disposition determination under section 3726.04 or 3726.041 204  
of the Revised Code. 205

A form shall be completed for each zygote, blastocyte, 206  
embryo, or fetus to be aborted. If a pregnant woman is carrying 207  
more than one zygote, blastocyte, embryo, or fetus, she shall 208  
sign a form for each zygote, blastocyte, embryo, or fetus to be 209  
aborted. 210

The form shall contain the name and contact information of 211  
the physician who provided to the pregnant woman the information 212  
described in division ~~(B) (1)~~ (B) (2) of this section. 213

~~(5)~~ (6) Prior to the performance or inducement of the 214  
abortion, the physician who is scheduled to perform or induce 215  
the abortion or the physician's agent receives a copy of the 216  
pregnant woman's signed form on which she consents to the 217  
abortion and that includes the certification required by 218  
division ~~(B) (4)~~ (B) (5) of this section. 219

(C) ~~The~~ (1) Subject to the requirements in division (C) (2) 220  
of this section, the department of health shall publish ~~in~~ 221

~~English and in Spanish, in a typeface large enough to be clearly~~ 222  
~~legible, and in an easily comprehensible format,~~ the following 223  
materials on the department's web site: 224

~~(1)~~ (a) Materials that inform the pregnant woman about 225  
family planning information, of publicly funded agencies that 226  
are available to assist in family planning, and of public and 227  
private agencies and services that are available to assist her 228  
through the pregnancy, upon childbirth, and while the child is 229  
dependent, including, but not limited to, adoption agencies. The 230  
materials shall be geographically indexed; include a 231  
comprehensive list of the available agencies, a description of 232  
the services offered by the agencies, and the telephone numbers 233  
and addresses of the agencies; and inform the pregnant woman 234  
about available medical assistance benefits for prenatal care, 235  
childbirth, and neonatal care and about the support obligations 236  
of the father of a child who is born alive. The department shall 237  
ensure that the materials described in division (C) (1) of this 238  
section are comprehensive and do not directly or indirectly 239  
promote, exclude, or discourage the use of any agency or service 240  
described in this division. 241

~~(2)~~ (b) Materials that inform the pregnant woman of the 242  
probable anatomical and physiological characteristics of the 243  
zygote, blastocyte, embryo, or fetus at two-week gestational 244  
increments for the first sixteen weeks of pregnancy and at four- 245  
week gestational increments from the seventeenth week of 246  
pregnancy to full term, including any relevant information 247  
regarding the time at which the fetus possibly would be viable. 248  
The department shall cause these materials to be published after 249  
it consults with independent health care experts relative to the 250  
probable anatomical and physiological characteristics of a 251  
zygote, blastocyte, embryo, or fetus at the various gestational 252

increments. The materials shall use language that is 253  
understandable by the average person who is not medically 254  
trained, shall be objective and nonjudgmental, and shall include 255  
only accurate scientific information about the zygote, 256  
blastocyte, embryo, or fetus at the various gestational 257  
increments. If the materials use a pictorial, photographic, or 258  
other depiction to provide information regarding the zygote, 259  
blastocyte, embryo, or fetus, the materials shall include, in a 260  
conspicuous manner, a scale or other explanation that is 261  
understandable by the average person and that can be used to 262  
determine the actual size of the zygote, blastocyte, embryo, or 263  
fetus at a particular gestational increment as contrasted with 264  
the depicted size of the zygote, blastocyte, embryo, or fetus at 265  
that gestational increment. 266

(c) Materials that inform the pregnant woman about the 267  
possible increased risk of breast cancer that is associated with 268  
women who have undergone an abortion; 269

(d) Materials that inform the pregnant woman about the 270  
short-term and long-term risk of psychological or emotional 271  
harm, including depression, suicidal ideation, post-traumatic 272  
stress disorder, and guilt, that the woman may endure from 273  
undergoing an abortion. 274

(2) The department shall publish the materials described 275  
in division (C)(1) of this section in accordance with all of the 276  
following: 277

(a) The materials shall be in English and in Spanish. 278

(b) The materials shall be in a typeface large enough to 279  
be clearly legible. 280

(c) The materials shall be in an easily comprehensible 281

<u>format.</u>	282
<u>(d) The materials shall either be prominently featured on</u>	283
<u>the main page of the department's web site or directly</u>	284
<u>accessible through easily identified hyperlinks on the main page</u>	285
<u>of the department's web site.</u>	286
(D) Upon the submission of a request to the department of	287
health by any person, hospital, physician, or medical facility	288
for one copy of the materials published in accordance with	289
division (C) of this section, the department shall make the	290
requested copy of the materials available to the person,	291
hospital, physician, or medical facility that requested the	292
copy.	293
(E) If a medical emergency or medical necessity compels	294
the performance or inducement of an abortion, the physician who	295
will perform or induce the abortion, prior to its performance or	296
inducement if possible, shall inform the pregnant woman of the	297
medical indications supporting the physician's judgment that an	298
immediate abortion is necessary. Any physician who performs or	299
induces an abortion without the prior satisfaction of the	300
conditions specified in division (B) of this section because of	301
a medical emergency or medical necessity shall enter the reasons	302
for the conclusion that a medical emergency or medical necessity	303
exists in the medical record of the pregnant woman.	304
(F) If the conditions specified in division (B) of this	305
section are satisfied, consent to an abortion shall be presumed	306
to be valid and effective.	307
(G) The performance or inducement of an abortion without	308
the prior satisfaction of the conditions specified in division	309
(B) of this section does not constitute, and shall not be	310

construed as constituting, a violation of division (A) of 311  
section 2919.12 of the Revised Code. The failure of a physician 312  
to satisfy the conditions of division (B) of this section prior 313  
to performing or inducing an abortion upon a pregnant woman may 314  
be the basis of both of the following: 315

(1) A civil action for compensatory and exemplary damages 316  
as described in division (H) of this section; 317

(2) Disciplinary action under section 4731.22 of the 318  
Revised Code. 319

(H) (1) Subject to divisions (H) (2) and (3) of this 320  
section, any physician who performs or induces an abortion with 321  
actual knowledge that the conditions specified in division (B) 322  
of this section have not been satisfied or with a heedless 323  
indifference as to whether those conditions have been satisfied 324  
is liable in compensatory and exemplary damages in a civil 325  
action to any person, or the representative of the estate of any 326  
person, who sustains injury, death, or loss to person or 327  
property as a result of the failure to satisfy those conditions. 328  
In the civil action, the court additionally may enter any 329  
injunctive or other equitable relief that it considers 330  
appropriate. 331

(2) The following shall be affirmative defenses in a civil 332  
action authorized by division (H) (1) of this section: 333

(a) The physician performed or induced the abortion under 334  
the circumstances described in division (E) of this section. 335

(b) The physician made a good faith effort to satisfy the 336  
conditions specified in division (B) of this section. 337

(3) An employer or other principal is not liable in 338  
damages in a civil action authorized by division (H) (1) of this 339

section on the basis of the doctrine of respondeat superior 340  
unless either of the following applies: 341

(a) The employer or other principal had actual knowledge 342  
or, by the exercise of reasonable diligence, should have known 343  
that an employee or agent performed or induced an abortion with 344  
actual knowledge that the conditions specified in division (B) 345  
of this section had not been satisfied or with a heedless 346  
indifference as to whether those conditions had been satisfied. 347

(b) The employer or other principal negligently failed to 348  
secure the compliance of an employee or agent with division (B) 349  
of this section. 350

(4) Notwithstanding division (E) of section 2919.12 of the 351  
Revised Code, the civil action authorized by division (H) (1) of 352  
this section shall be the exclusive civil remedy for persons, or 353  
the representatives of estates of persons, who allegedly sustain 354  
injury, death, or loss to person or property as a result of a 355  
failure to satisfy the conditions specified in division (B) of 356  
this section. 357

(I) The department of job and family services shall 358  
prepare and conduct a public information program to inform women 359  
of all available governmental programs and agencies that provide 360  
services or assistance for family planning, prenatal care, child 361  
care, or alternatives to abortion. 362

**Sec. 2919.11.** As used in the Revised Code, "abortion" 363  
means the purposeful termination of a human pregnancy by any 364  
person, including the pregnant woman ~~herself personally~~, with an 365  
intention other than to produce a live birth or to remove a dead 366  
fetus or embryo. Abortion is the practice of medicine or surgery 367  
for the purposes of section 4731.41 of the Revised Code. 368

"Abortion" includes the purposeful termination of a pregnancy by use of an abortion-inducing drug, as defined in section 2919.124 of the Revised Code, unless the context clearly requires otherwise.

Sec. 3701.792. The department of health shall annually audit all provider records to determine compliance with all of the informed consent and education and training requirements under section 2317.56 of the Revised Code.

Sec. 3701.793. The department of health shall prescribe a certification form to be used under division (B) (1) (h) of section 2317.56 of the Revised Code.

Sec. 3726.14. Not later than ninety days after ~~the~~ effective date of this section April 6, 2021, the director of health, in accordance with Chapter 119. of the Revised Code, shall adopt rules necessary to carry out sections 3726.01 to 3726.13 of the Revised Code, including rules that prescribe the following:

(A) The notification form informing pregnant women who seek surgical abortions of the following:

(1) The right to determine final disposition of fetal remains under division (A) of section 3726.03 of the Revised Code;

(2) The available options for locations and methods for the disposition of fetal remains.

(B) The consent form for purposes of section 3726.04 or 3726.041 of the Revised Code;

(C) (1) A detachable supplemental form to the form described in division ~~(B) (4)~~ (B) (5) of section 2317.56 of the

Revised Code that meets the following requirements:	397
(a) Indicates whether the pregnant woman has indicated a preference as to the method of disposition of the fetal remains and the preferred method selected;	398 399 400
(b) Indicates whether the pregnant woman has indicated a preference as to the location of disposition of the fetal remains;	401 402 403
(c) Provides for the signature of the physician who is to perform or induce the abortion;	404 405
(d) Provides for a medical identification number for the pregnant woman but does not provide for the pregnant woman's printed name or signature.	406 407 408
(2) If a medical emergency or medical necessity prevents the pregnant woman from completing the detachable supplemental form, procedures to complete that form a reasonable time after the medical emergency or medical necessity has ended.	409 410 411 412
<b>Sec. 4731.22.</b> (A) The state medical board, by an affirmative vote of not fewer than six of its members, may limit, revoke, or suspend a license or certificate to practice or certificate to recommend, refuse to grant a license or certificate, refuse to renew a license or certificate, refuse to reinstate a license or certificate, or reprimand or place on probation the holder of a license or certificate if the individual applying for or holding the license or certificate is found by the board to have committed fraud during the administration of the examination for a license or certificate to practice or to have committed fraud, misrepresentation, or deception in applying for, renewing, or securing any license or certificate to practice or certificate to recommend issued by	413 414 415 416 417 418 419 420 421 422 423 424 425

the board. 426

(B) Except as provided in division (P) of this section, 427  
the board, by an affirmative vote of not fewer than six members, 428  
shall, to the extent permitted by law, limit, revoke, or suspend 429  
a license or certificate to practice or certificate to 430  
recommend, refuse to issue a license or certificate, refuse to 431  
renew a license or certificate, refuse to reinstate a license or 432  
certificate, or reprimand or place on probation the holder of a 433  
license or certificate for one or more of the following reasons: 434

(1) Permitting one's name or one's license or certificate 435  
to practice to be used by a person, group, or corporation when 436  
the individual concerned is not actually directing the treatment 437  
given; 438

(2) Failure to maintain minimal standards applicable to 439  
the selection or administration of drugs, or failure to employ 440  
acceptable scientific methods in the selection of drugs or other 441  
modalities for treatment of disease; 442

(3) Except as provided in section 4731.97 of the Revised 443  
Code, selling, giving away, personally furnishing, prescribing, 444  
or administering drugs for other than legal and legitimate 445  
therapeutic purposes or a plea of guilty to, a judicial finding 446  
of guilt of, or a judicial finding of eligibility for 447  
intervention in lieu of conviction of, a violation of any 448  
federal or state law regulating the possession, distribution, or 449  
use of any drug; 450

(4) Willfully betraying a professional confidence. 451

For purposes of this division, "willfully betraying a 452  
professional confidence" does not include providing any 453  
information, documents, or reports under sections 307.621 to 454

307.629 of the Revised Code to a child fatality review board; 455  
does not include providing any information, documents, or 456  
reports to the director of health pursuant to guidelines 457  
established under section 3701.70 of the Revised Code; does not 458  
include written notice to a mental health professional under 459  
section 4731.62 of the Revised Code; and does not include the 460  
making of a report of an employee's use of a drug of abuse, or a 461  
report of a condition of an employee other than one involving 462  
the use of a drug of abuse, to the employer of the employee as 463  
described in division (B) of section 2305.33 of the Revised 464  
Code. Nothing in this division affects the immunity from civil 465  
liability conferred by section 2305.33 or 4731.62 of the Revised 466  
Code upon a physician who makes a report in accordance with 467  
section 2305.33 or notifies a mental health professional in 468  
accordance with section 4731.62 of the Revised Code. As used in 469  
this division, "employee," "employer," and "physician" have the 470  
same meanings as in section 2305.33 of the Revised Code. 471

(5) Making a false, fraudulent, deceptive, or misleading 472  
statement in the solicitation of or advertising for patients; in 473  
relation to the practice of medicine and surgery, osteopathic 474  
medicine and surgery, podiatric medicine and surgery, or a 475  
limited branch of medicine; or in securing or attempting to 476  
secure any license or certificate to practice issued by the 477  
board. 478

As used in this division, "false, fraudulent, deceptive, 479  
or misleading statement" means a statement that includes a 480  
misrepresentation of fact, is likely to mislead or deceive 481  
because of a failure to disclose material facts, is intended or 482  
is likely to create false or unjustified expectations of 483  
favorable results, or includes representations or implications 484  
that in reasonable probability will cause an ordinarily prudent 485

person to misunderstand or be deceived.	486
(6) A departure from, or the failure to conform to,	487
minimal standards of care of similar practitioners under the	488
same or similar circumstances, whether or not actual injury to a	489
patient is established;	490
(7) Representing, with the purpose of obtaining	491
compensation or other advantage as personal gain or for any	492
other person, that an incurable disease or injury, or other	493
incurable condition, can be permanently cured;	494
(8) The obtaining of, or attempting to obtain, money or	495
anything of value by fraudulent misrepresentations in the course	496
of practice;	497
(9) A plea of guilty to, a judicial finding of guilt of,	498
or a judicial finding of eligibility for intervention in lieu of	499
conviction for, a felony;	500
(10) Commission of an act that constitutes a felony in	501
this state, regardless of the jurisdiction in which the act was	502
committed;	503
(11) A plea of guilty to, a judicial finding of guilt of,	504
or a judicial finding of eligibility for intervention in lieu of	505
conviction for, a misdemeanor committed in the course of	506
practice;	507
(12) Commission of an act in the course of practice that	508
constitutes a misdemeanor in this state, regardless of the	509
jurisdiction in which the act was committed;	510
(13) A plea of guilty to, a judicial finding of guilt of,	511
or a judicial finding of eligibility for intervention in lieu of	512
conviction for, a misdemeanor involving moral turpitude;	513

(14) Commission of an act involving moral turpitude that 514  
constitutes a misdemeanor in this state, regardless of the 515  
jurisdiction in which the act was committed; 516

(15) Violation of the conditions of limitation placed by 517  
the board upon a license or certificate to practice; 518

(16) Failure to pay license renewal fees specified in this 519  
chapter; 520

(17) Except as authorized in section 4731.31 of the 521  
Revised Code, engaging in the division of fees for referral of 522  
patients, or the receiving of a thing of value in return for a 523  
specific referral of a patient to utilize a particular service 524  
or business; 525

(18) Subject to section 4731.226 of the Revised Code, 526  
violation of any provision of a code of ethics of the American 527  
medical association, the American osteopathic association, the 528  
American podiatric medical association, or any other national 529  
professional organizations that the board specifies by rule. The 530  
state medical board shall obtain and keep on file current copies 531  
of the codes of ethics of the various national professional 532  
organizations. The individual whose license or certificate is 533  
being suspended or revoked shall not be found to have violated 534  
any provision of a code of ethics of an organization not 535  
appropriate to the individual's profession. 536

For purposes of this division, a "provision of a code of 537  
ethics of a national professional organization" does not include 538  
any provision that would preclude the making of a report by a 539  
physician of an employee's use of a drug of abuse, or of a 540  
condition of an employee other than one involving the use of a 541  
drug of abuse, to the employer of the employee as described in 542

division (B) of section 2305.33 of the Revised Code. Nothing in 543  
this division affects the immunity from civil liability 544  
conferred by that section upon a physician who makes either type 545  
of report in accordance with division (B) of that section. As 546  
used in this division, "employee," "employer," and "physician" 547  
have the same meanings as in section 2305.33 of the Revised 548  
Code. 549

(19) Inability to practice according to acceptable and 550  
prevailing standards of care by reason of mental illness or 551  
physical illness, including, but not limited to, physical 552  
deterioration that adversely affects cognitive, motor, or 553  
perceptive skills. 554

In enforcing this division, the board, upon a showing of a 555  
possible violation, may compel any individual authorized to 556  
practice by this chapter or who has submitted an application 557  
pursuant to this chapter to submit to a mental examination, 558  
physical examination, including an HIV test, or both a mental 559  
and a physical examination. The expense of the examination is 560  
the responsibility of the individual compelled to be examined. 561  
Failure to submit to a mental or physical examination or consent 562  
to an HIV test ordered by the board constitutes an admission of 563  
the allegations against the individual unless the failure is due 564  
to circumstances beyond the individual's control, and a default 565  
and final order may be entered without the taking of testimony 566  
or presentation of evidence. If the board finds an individual 567  
unable to practice because of the reasons set forth in this 568  
division, the board shall require the individual to submit to 569  
care, counseling, or treatment by physicians approved or 570  
designated by the board, as a condition for initial, continued, 571  
reinstated, or renewed authority to practice. An individual 572  
affected under this division shall be afforded an opportunity to 573

demonstrate to the board the ability to resume practice in 574  
compliance with acceptable and prevailing standards under the 575  
provisions of the individual's license or certificate. For the 576  
purpose of this division, any individual who applies for or 577  
receives a license or certificate to practice under this chapter 578  
accepts the privilege of practicing in this state and, by so 579  
doing, shall be deemed to have given consent to submit to a 580  
mental or physical examination when directed to do so in writing 581  
by the board, and to have waived all objections to the 582  
admissibility of testimony or examination reports that 583  
constitute a privileged communication. 584

(20) Except as provided in division (F)(1)(b) of section 585  
4731.282 of the Revised Code or when civil penalties are imposed 586  
under section 4731.225 of the Revised Code, and subject to 587  
section 4731.226 of the Revised Code, violating or attempting to 588  
violate, directly or indirectly, or assisting in or abetting the 589  
violation of, or conspiring to violate, any provisions of this 590  
chapter or any rule promulgated by the board. 591

This division does not apply to a violation or attempted 592  
violation of, assisting in or abetting the violation of, or a 593  
conspiracy to violate, any provision of this chapter or any rule 594  
adopted by the board that would preclude the making of a report 595  
by a physician of an employee's use of a drug of abuse, or of a 596  
condition of an employee other than one involving the use of a 597  
drug of abuse, to the employer of the employee as described in 598  
division (B) of section 2305.33 of the Revised Code. Nothing in 599  
this division affects the immunity from civil liability 600  
conferred by that section upon a physician who makes either type 601  
of report in accordance with division (B) of that section. As 602  
used in this division, "employee," "employer," and "physician" 603  
have the same meanings as in section 2305.33 of the Revised 604

Code. 605

(21) The violation of section 3701.79 of the Revised Code 606  
or of any abortion rule adopted by the director of health 607  
pursuant to section 3701.341 of the Revised Code; 608

(22) Any of the following actions taken by an agency 609  
responsible for authorizing, certifying, or regulating an 610  
individual to practice a health care occupation or provide 611  
health care services in this state or another jurisdiction, for 612  
any reason other than the nonpayment of fees: the limitation, 613  
revocation, or suspension of an individual's license to 614  
practice; acceptance of an individual's license surrender; 615  
denial of a license; refusal to renew or reinstate a license; 616  
imposition of probation; or issuance of an order of censure or 617  
other reprimand; 618

(23) The violation of section 2919.12 of the Revised Code 619  
or the performance or inducement of an abortion upon a pregnant 620  
woman with actual knowledge that the conditions specified in 621  
division (B) of section 2317.56 of the Revised Code have not 622  
been satisfied or with a heedless indifference as to whether 623  
those conditions have been satisfied, unless an affirmative 624  
defense as specified in division (H) (2) of that section would 625  
apply in a civil action authorized by division (H) (1) of that 626  
section; 627

(24) The revocation, suspension, restriction, reduction, 628  
or termination of clinical privileges by the United States 629  
department of defense or department of veterans affairs or the 630  
termination or suspension of a certificate of registration to 631  
prescribe drugs by the drug enforcement administration of the 632  
United States department of justice; 633

(25) Termination or suspension from participation in the 634  
medicare or medicaid programs by the department of health and 635  
human services or other responsible agency; 636

(26) Impairment of ability to practice according to 637  
acceptable and prevailing standards of care because of habitual 638  
or excessive use or abuse of drugs, alcohol, or other substances 639  
that impair ability to practice. 640

For the purposes of this division, any individual 641  
authorized to practice by this chapter accepts the privilege of 642  
practicing in this state subject to supervision by the board. By 643  
filing an application for or holding a license or certificate to 644  
practice under this chapter, an individual shall be deemed to 645  
have given consent to submit to a mental or physical examination 646  
when ordered to do so by the board in writing, and to have 647  
waived all objections to the admissibility of testimony or 648  
examination reports that constitute privileged communications. 649

If it has reason to believe that any individual authorized 650  
to practice by this chapter or any applicant for licensure or 651  
certification to practice suffers such impairment, the board may 652  
compel the individual to submit to a mental or physical 653  
examination, or both. The expense of the examination is the 654  
responsibility of the individual compelled to be examined. Any 655  
mental or physical examination required under this division 656  
shall be undertaken by a treatment provider or physician who is 657  
qualified to conduct the examination and who is chosen by the 658  
board. 659

Failure to submit to a mental or physical examination 660  
ordered by the board constitutes an admission of the allegations 661  
against the individual unless the failure is due to 662  
circumstances beyond the individual's control, and a default and 663

final order may be entered without the taking of testimony or 664  
presentation of evidence. If the board determines that the 665  
individual's ability to practice is impaired, the board shall 666  
suspend the individual's license or certificate or deny the 667  
individual's application and shall require the individual, as a 668  
condition for initial, continued, reinstated, or renewed 669  
licensure or certification to practice, to submit to treatment. 670

Before being eligible to apply for reinstatement of a 671  
license or certificate suspended under this division, the 672  
impaired practitioner shall demonstrate to the board the ability 673  
to resume practice in compliance with acceptable and prevailing 674  
standards of care under the provisions of the practitioner's 675  
license or certificate. The demonstration shall include, but 676  
shall not be limited to, the following: 677

(a) Certification from a treatment provider approved under 678  
section 4731.25 of the Revised Code that the individual has 679  
successfully completed any required inpatient treatment; 680

(b) Evidence of continuing full compliance with an 681  
aftercare contract or consent agreement; 682

(c) Two written reports indicating that the individual's 683  
ability to practice has been assessed and that the individual 684  
has been found capable of practicing according to acceptable and 685  
prevailing standards of care. The reports shall be made by 686  
individuals or providers approved by the board for making the 687  
assessments and shall describe the basis for their 688  
determination. 689

The board may reinstate a license or certificate suspended 690  
under this division after that demonstration and after the 691  
individual has entered into a written consent agreement. 692

When the impaired practitioner resumes practice, the board 693  
shall require continued monitoring of the individual. The 694  
monitoring shall include, but not be limited to, compliance with 695  
the written consent agreement entered into before reinstatement 696  
or with conditions imposed by board order after a hearing, and, 697  
upon termination of the consent agreement, submission to the 698  
board for at least two years of annual written progress reports 699  
made under penalty of perjury stating whether the individual has 700  
maintained sobriety. 701

(27) A second or subsequent violation of section 4731.66 702  
or 4731.69 of the Revised Code; 703

(28) Except as provided in division (N) of this section: 704

(a) Waiving the payment of all or any part of a deductible 705  
or copayment that a patient, pursuant to a health insurance or 706  
health care policy, contract, or plan that covers the 707  
individual's services, otherwise would be required to pay if the 708  
waiver is used as an enticement to a patient or group of 709  
patients to receive health care services from that individual; 710

(b) Advertising that the individual will waive the payment 711  
of all or any part of a deductible or copayment that a patient, 712  
pursuant to a health insurance or health care policy, contract, 713  
or plan that covers the individual's services, otherwise would 714  
be required to pay. 715

(29) Failure to use universal blood and body fluid 716  
precautions established by rules adopted under section 4731.051 717  
of the Revised Code; 718

(30) Failure to provide notice to, and receive 719  
acknowledgment of the notice from, a patient when required by 720  
section 4731.143 of the Revised Code prior to providing 721

nonemergency professional services, or failure to maintain that	722
notice in the patient's medical record;	723
(31) Failure of a physician supervising a physician	724
assistant to maintain supervision in accordance with the	725
requirements of Chapter 4730. of the Revised Code and the rules	726
adopted under that chapter;	727
(32) Failure of a physician or podiatrist to enter into a	728
standard care arrangement with a clinical nurse specialist,	729
certified nurse-midwife, or certified nurse practitioner with	730
whom the physician or podiatrist is in collaboration pursuant to	731
section 4731.27 of the Revised Code or failure to fulfill the	732
responsibilities of collaboration after entering into a standard	733
care arrangement;	734
(33) Failure to comply with the terms of a consult	735
agreement entered into with a pharmacist pursuant to section	736
4729.39 of the Revised Code;	737
(34) Failure to cooperate in an investigation conducted by	738
the board under division (F) of this section, including failure	739
to comply with a subpoena or order issued by the board or	740
failure to answer truthfully a question presented by the board	741
in an investigative interview, an investigative office	742
conference, at a deposition, or in written interrogatories,	743
except that failure to cooperate with an investigation shall not	744
constitute grounds for discipline under this section if a court	745
of competent jurisdiction has issued an order that either	746
quashes a subpoena or permits the individual to withhold the	747
testimony or evidence in issue;	748
(35) Failure to supervise an acupuncturist in accordance	749
with Chapter 4762. of the Revised Code and the board's rules for	750

providing that supervision;	751
(36) Failure to supervise an anesthesiologist assistant in accordance with Chapter 4760. of the Revised Code and the board's rules for supervision of an anesthesiologist assistant;	752 753 754
(37) Assisting suicide, as defined in section 3795.01 of the Revised Code;	755 756
(38) Failure to <del>comply with the requirements of</del> <u>provide the pregnant woman the opportunity to view ultrasound images, at no cost to the woman, or offer to provide the pregnant woman with a physical picture of the ultrasound image, in accordance with division (B) of section 2317.561-2317.56</u> of the Revised Code;	757 758 759 760 761 762
(39) Failure to supervise a radiologist assistant in accordance with Chapter 4774. of the Revised Code and the board's rules for supervision of radiologist assistants;	763 764 765
(40) Performing or inducing an abortion at an office or facility with knowledge that the office or facility fails to post the notice required under section 3701.791 of the Revised Code;	766 767 768 769
(41) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for the operation of or the provision of care at a pain management clinic;	770 771 772 773
(42) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for providing supervision, direction, and control of individuals at a pain management clinic;	774 775 776 777
(43) Failure to comply with the requirements of section	778

4729.79 or 4731.055 of the Revised Code, unless the state board	779
of pharmacy no longer maintains a drug database pursuant to	780
section 4729.75 of the Revised Code;	781
(44) Failure to comply with the requirements of section	782
2919.171, 2919.202, or 2919.203 of the Revised Code or failure	783
to submit to the department of health in accordance with a court	784
order a complete report as described in section 2919.171 or	785
2919.202 of the Revised Code;	786
(45) Practicing at a facility that is subject to licensure	787
as a category III terminal distributor of dangerous drugs with a	788
pain management clinic classification unless the person	789
operating the facility has obtained and maintains the license	790
with the classification;	791
(46) Owning a facility that is subject to licensure as a	792
category III terminal distributor of dangerous drugs with a pain	793
management clinic classification unless the facility is licensed	794
with the classification;	795
(47) Failure to comply with any of the requirements	796
regarding making or maintaining medical records or documents	797
described in division (A) of section 2919.192, division (C) of	798
section 2919.193, division (B) of section 2919.195, or division	799
(A) of section 2919.196 of the Revised Code;	800
(48) Failure to comply with the requirements in section	801
3719.061 of the Revised Code before issuing for a minor a	802
prescription for an opioid analgesic, as defined in section	803
3719.01 of the Revised Code;	804
(49) Failure to comply with the requirements of section	805
4731.30 of the Revised Code or rules adopted under section	806
4731.301 of the Revised Code when recommending treatment with	807

medical marijuana; 808

(50) Practicing at a facility, clinic, or other location 809  
that is subject to licensure as a category III terminal 810  
distributor of dangerous drugs with an office-based opioid 811  
treatment classification unless the person operating that place 812  
has obtained and maintains the license with the classification; 813

(51) Owning a facility, clinic, or other location that is 814  
subject to licensure as a category III terminal distributor of 815  
dangerous drugs with an office-based opioid treatment 816  
classification unless that place is licensed with the 817  
classification; 818

(52) A pattern of continuous or repeated violations of 819  
division (E) (2) or (3) of section 3963.02 of the Revised Code. 820

(C) Disciplinary actions taken by the board under 821  
divisions (A) and (B) of this section shall be taken pursuant to 822  
an adjudication under Chapter 119. of the Revised Code, except 823  
that in lieu of an adjudication, the board may enter into a 824  
consent agreement with an individual to resolve an allegation of 825  
a violation of this chapter or any rule adopted under it. A 826  
consent agreement, when ratified by an affirmative vote of not 827  
fewer than six members of the board, shall constitute the 828  
findings and order of the board with respect to the matter 829  
addressed in the agreement. If the board refuses to ratify a 830  
consent agreement, the admissions and findings contained in the 831  
consent agreement shall be of no force or effect. 832

A telephone conference call may be utilized for 833  
ratification of a consent agreement that revokes or suspends an 834  
individual's license or certificate to practice or certificate 835  
to recommend. The telephone conference call shall be considered 836

a special meeting under division (F) of section 121.22 of the Revised Code. 837  
838

If the board takes disciplinary action against an 839  
individual under division (B) of this section for a second or 840  
subsequent plea of guilty to, or judicial finding of guilt of, a 841  
violation of section 2919.123 or 2919.124 of the Revised Code, 842  
the disciplinary action shall consist of a suspension of the 843  
individual's license or certificate to practice for a period of 844  
at least one year or, if determined appropriate by the board, a 845  
more serious sanction involving the individual's license or 846  
certificate to practice. Any consent agreement entered into 847  
under this division with an individual that pertains to a second 848  
or subsequent plea of guilty to, or judicial finding of guilt 849  
of, a violation of that section shall provide for a suspension 850  
of the individual's license or certificate to practice for a 851  
period of at least one year or, if determined appropriate by the 852  
board, a more serious sanction involving the individual's 853  
license or certificate to practice. 854

(D) For purposes of divisions (B) (10), (12), and (14) of 855  
this section, the commission of the act may be established by a 856  
finding by the board, pursuant to an adjudication under Chapter 857  
119. of the Revised Code, that the individual committed the act. 858  
The board does not have jurisdiction under those divisions if 859  
the trial court renders a final judgment in the individual's 860  
favor and that judgment is based upon an adjudication on the 861  
merits. The board has jurisdiction under those divisions if the 862  
trial court issues an order of dismissal upon technical or 863  
procedural grounds. 864

(E) The sealing of conviction records by any court shall 865  
have no effect upon a prior board order entered under this 866

section or upon the board's jurisdiction to take action under 867  
this section if, based upon a plea of guilty, a judicial finding 868  
of guilt, or a judicial finding of eligibility for intervention 869  
in lieu of conviction, the board issued a notice of opportunity 870  
for a hearing prior to the court's order to seal the records. 871  
The board shall not be required to seal, destroy, redact, or 872  
otherwise modify its records to reflect the court's sealing of 873  
conviction records. 874

(F) (1) The board shall investigate evidence that appears 875  
to show that a person has violated any provision of this chapter 876  
or any rule adopted under it. Any person may report to the board 877  
in a signed writing any information that the person may have 878  
that appears to show a violation of any provision of this 879  
chapter or any rule adopted under it. In the absence of bad 880  
faith, any person who reports information of that nature or who 881  
testifies before the board in any adjudication conducted under 882  
Chapter 119. of the Revised Code shall not be liable in damages 883  
in a civil action as a result of the report or testimony. Each 884  
complaint or allegation of a violation received by the board 885  
shall be assigned a case number and shall be recorded by the 886  
board. 887

(2) Investigations of alleged violations of this chapter 888  
or any rule adopted under it shall be supervised by the 889  
supervising member elected by the board in accordance with 890  
section 4731.02 of the Revised Code and by the secretary as 891  
provided in section 4731.39 of the Revised Code. The president 892  
may designate another member of the board to supervise the 893  
investigation in place of the supervising member. No member of 894  
the board who supervises the investigation of a case shall 895  
participate in further adjudication of the case. 896

(3) In investigating a possible violation of this chapter 897  
or any rule adopted under this chapter, or in conducting an 898  
inspection under division (E) of section 4731.054 of the Revised 899  
Code, the board may question witnesses, conduct interviews, 900  
administer oaths, order the taking of depositions, inspect and 901  
copy any books, accounts, papers, records, or documents, issue 902  
subpoenas, and compel the attendance of witnesses and production 903  
of books, accounts, papers, records, documents, and testimony, 904  
except that a subpoena for patient record information shall not 905  
be issued without consultation with the attorney general's 906  
office and approval of the secretary and supervising member of 907  
the board. 908

(a) Before issuance of a subpoena for patient record 909  
information, the secretary and supervising member shall 910  
determine whether there is probable cause to believe that the 911  
complaint filed alleges a violation of this chapter or any rule 912  
adopted under it and that the records sought are relevant to the 913  
alleged violation and material to the investigation. The 914  
subpoena may apply only to records that cover a reasonable 915  
period of time surrounding the alleged violation. 916

(b) On failure to comply with any subpoena issued by the 917  
board and after reasonable notice to the person being 918  
subpoenaed, the board may move for an order compelling the 919  
production of persons or records pursuant to the Rules of Civil 920  
Procedure. 921

(c) A subpoena issued by the board may be served by a 922  
sheriff, the sheriff's deputy, or a board employee or agent 923  
designated by the board. Service of a subpoena issued by the 924  
board may be made by delivering a copy of the subpoena to the 925  
person named therein, reading it to the person, or leaving it at 926

the person's usual place of residence, usual place of business, 927  
or address on file with the board. When serving a subpoena to an 928  
applicant for or the holder of a license or certificate issued 929  
under this chapter, service of the subpoena may be made by 930  
certified mail, return receipt requested, and the subpoena shall 931  
be deemed served on the date delivery is made or the date the 932  
person refuses to accept delivery. If the person being served 933  
refuses to accept the subpoena or is not located, service may be 934  
made to an attorney who notifies the board that the attorney is 935  
representing the person. 936

(d) A sheriff's deputy who serves a subpoena shall receive 937  
the same fees as a sheriff. Each witness who appears before the 938  
board in obedience to a subpoena shall receive the fees and 939  
mileage provided for under section 119.094 of the Revised Code. 940

(4) All hearings, investigations, and inspections of the 941  
board shall be considered civil actions for the purposes of 942  
section 2305.252 of the Revised Code. 943

(5) A report required to be submitted to the board under 944  
this chapter, a complaint, or information received by the board 945  
pursuant to an investigation or pursuant to an inspection under 946  
division (E) of section 4731.054 of the Revised Code is 947  
confidential and not subject to discovery in any civil action. 948

The board shall conduct all investigations or inspections 949  
and proceedings in a manner that protects the confidentiality of 950  
patients and persons who file complaints with the board. The 951  
board shall not make public the names or any other identifying 952  
information about patients or complainants unless proper consent 953  
is given or, in the case of a patient, a waiver of the patient 954  
privilege exists under division (B) of section 2317.02 of the 955  
Revised Code, except that consent or a waiver of that nature is 956

not required if the board possesses reliable and substantial 957  
evidence that no bona fide physician-patient relationship 958  
exists. 959

The board may share any information it receives pursuant 960  
to an investigation or inspection, including patient records and 961  
patient record information, with law enforcement agencies, other 962  
licensing boards, and other governmental agencies that are 963  
prosecuting, adjudicating, or investigating alleged violations 964  
of statutes or administrative rules. An agency or board that 965  
receives the information shall comply with the same requirements 966  
regarding confidentiality as those with which the state medical 967  
board must comply, notwithstanding any conflicting provision of 968  
the Revised Code or procedure of the agency or board that 969  
applies when it is dealing with other information in its 970  
possession. In a judicial proceeding, the information may be 971  
admitted into evidence only in accordance with the Rules of 972  
Evidence, but the court shall require that appropriate measures 973  
are taken to ensure that confidentiality is maintained with 974  
respect to any part of the information that contains names or 975  
other identifying information about patients or complainants 976  
whose confidentiality was protected by the state medical board 977  
when the information was in the board's possession. Measures to 978  
ensure confidentiality that may be taken by the court include 979  
sealing its records or deleting specific information from its 980  
records. 981

(6) On a quarterly basis, the board shall prepare a report 982  
that documents the disposition of all cases during the preceding 983  
three months. The report shall contain the following information 984  
for each case with which the board has completed its activities: 985

(a) The case number assigned to the complaint or alleged 986

violation;	987
(b) The type of license or certificate to practice, if	988
any, held by the individual against whom the complaint is	989
directed;	990
(c) A description of the allegations contained in the	991
complaint;	992
(d) The disposition of the case.	993
The report shall state how many cases are still pending	994
and shall be prepared in a manner that protects the identity of	995
each person involved in each case. The report shall be a public	996
record under section 149.43 of the Revised Code.	997
(G) If the secretary and supervising member determine both	998
of the following, they may recommend that the board suspend an	999
individual's license or certificate to practice or certificate	1000
to recommend without a prior hearing:	1001
(1) That there is clear and convincing evidence that an	1002
individual has violated division (B) of this section;	1003
(2) That the individual's continued practice presents a	1004
danger of immediate and serious harm to the public.	1005
Written allegations shall be prepared for consideration by	1006
the board. The board, upon review of those allegations and by an	1007
affirmative vote of not fewer than six of its members, excluding	1008
the secretary and supervising member, may suspend a license or	1009
certificate without a prior hearing. A telephone conference call	1010
may be utilized for reviewing the allegations and taking the	1011
vote on the summary suspension.	1012
The board shall issue a written order of suspension by	1013
certified mail or in person in accordance with section 119.07 of	1014

the Revised Code. The order shall not be subject to suspension 1015  
by the court during pendency of any appeal filed under section 1016  
119.12 of the Revised Code. If the individual subject to the 1017  
summary suspension requests an adjudicatory hearing by the 1018  
board, the date set for the hearing shall be within fifteen 1019  
days, but not earlier than seven days, after the individual 1020  
requests the hearing, unless otherwise agreed to by both the 1021  
board and the individual. 1022

Any summary suspension imposed under this division shall 1023  
remain in effect, unless reversed on appeal, until a final 1024  
adjudicative order issued by the board pursuant to this section 1025  
and Chapter 119. of the Revised Code becomes effective. The 1026  
board shall issue its final adjudicative order within seventy- 1027  
five days after completion of its hearing. A failure to issue 1028  
the order within seventy-five days shall result in dissolution 1029  
of the summary suspension order but shall not invalidate any 1030  
subsequent, final adjudicative order. 1031

(H) If the board takes action under division (B) (9), (11), 1032  
or (13) of this section and the judicial finding of guilt, 1033  
guilty plea, or judicial finding of eligibility for intervention 1034  
in lieu of conviction is overturned on appeal, upon exhaustion 1035  
of the criminal appeal, a petition for reconsideration of the 1036  
order may be filed with the board along with appropriate court 1037  
documents. Upon receipt of a petition of that nature and 1038  
supporting court documents, the board shall reinstate the 1039  
individual's license or certificate to practice. The board may 1040  
then hold an adjudication under Chapter 119. of the Revised Code 1041  
to determine whether the individual committed the act in 1042  
question. Notice of an opportunity for a hearing shall be given 1043  
in accordance with Chapter 119. of the Revised Code. If the 1044  
board finds, pursuant to an adjudication held under this 1045

division, that the individual committed the act or if no hearing 1046  
is requested, the board may order any of the sanctions 1047  
identified under division (B) of this section. 1048

(I) The license or certificate to practice issued to an 1049  
individual under this chapter and the individual's practice in 1050  
this state are automatically suspended as of the date of the 1051  
individual's second or subsequent plea of guilty to, or judicial 1052  
finding of guilt of, a violation of section 2919.123 or 2919.124 1053  
of the Revised Code. In addition, the license or certificate to 1054  
practice or certificate to recommend issued to an individual 1055  
under this chapter and the individual's practice in this state 1056  
are automatically suspended as of the date the individual pleads 1057  
guilty to, is found by a judge or jury to be guilty of, or is 1058  
subject to a judicial finding of eligibility for intervention in 1059  
lieu of conviction in this state or treatment or intervention in 1060  
lieu of conviction in another jurisdiction for any of the 1061  
following criminal offenses in this state or a substantially 1062  
equivalent criminal offense in another jurisdiction: aggravated 1063  
murder, murder, voluntary manslaughter, felonious assault, 1064  
kidnapping, rape, sexual battery, gross sexual imposition, 1065  
aggravated arson, aggravated robbery, or aggravated burglary. 1066  
Continued practice after suspension shall be considered 1067  
practicing without a license or certificate. 1068

The board shall notify the individual subject to the 1069  
suspension by certified mail or in person in accordance with 1070  
section 119.07 of the Revised Code. If an individual whose 1071  
license or certificate is automatically suspended under this 1072  
division fails to make a timely request for an adjudication 1073  
under Chapter 119. of the Revised Code, the board shall do 1074  
whichever of the following is applicable: 1075

(1) If the automatic suspension under this division is for 1076  
a second or subsequent plea of guilty to, or judicial finding of 1077  
guilt of, a violation of section 2919.123 or 2919.124 of the 1078  
Revised Code, the board shall enter an order suspending the 1079  
individual's license or certificate to practice for a period of 1080  
at least one year or, if determined appropriate by the board, 1081  
imposing a more serious sanction involving the individual's 1082  
license or certificate to practice. 1083

(2) In all circumstances in which division (I)(1) of this 1084  
section does not apply, enter a final order permanently revoking 1085  
the individual's license or certificate to practice. 1086

(J) If the board is required by Chapter 119. of the 1087  
Revised Code to give notice of an opportunity for a hearing and 1088  
if the individual subject to the notice does not timely request 1089  
a hearing in accordance with section 119.07 of the Revised Code, 1090  
the board is not required to hold a hearing, but may adopt, by 1091  
an affirmative vote of not fewer than six of its members, a 1092  
final order that contains the board's findings. In that final 1093  
order, the board may order any of the sanctions identified under 1094  
division (A) or (B) of this section. 1095

(K) Any action taken by the board under division (B) of 1096  
this section resulting in a suspension from practice shall be 1097  
accompanied by a written statement of the conditions under which 1098  
the individual's license or certificate to practice may be 1099  
reinstated. The board shall adopt rules governing conditions to 1100  
be imposed for reinstatement. Reinstatement of a license or 1101  
certificate suspended pursuant to division (B) of this section 1102  
requires an affirmative vote of not fewer than six members of 1103  
the board. 1104

(L) When the board refuses to grant or issue a license or 1105

certificate to practice to an applicant, revokes an individual's 1106  
license or certificate to practice, refuses to renew an 1107  
individual's license or certificate to practice, or refuses to 1108  
reinstate an individual's license or certificate to practice, 1109  
the board may specify that its action is permanent. An 1110  
individual subject to a permanent action taken by the board is 1111  
forever thereafter ineligible to hold a license or certificate 1112  
to practice and the board shall not accept an application for 1113  
reinstatement of the license or certificate or for issuance of a 1114  
new license or certificate. 1115

(M) Notwithstanding any other provision of the Revised 1116  
Code, all of the following apply: 1117

(1) The surrender of a license or certificate issued under 1118  
this chapter shall not be effective unless or until accepted by 1119  
the board. A telephone conference call may be utilized for 1120  
acceptance of the surrender of an individual's license or 1121  
certificate to practice. The telephone conference call shall be 1122  
considered a special meeting under division (F) of section 1123  
121.22 of the Revised Code. Reinstatement of a license or 1124  
certificate surrendered to the board requires an affirmative 1125  
vote of not fewer than six members of the board. 1126

(2) An application for a license or certificate made under 1127  
the provisions of this chapter may not be withdrawn without 1128  
approval of the board. 1129

(3) Failure by an individual to renew a license or 1130  
certificate to practice in accordance with this chapter or a 1131  
certificate to recommend in accordance with rules adopted under 1132  
section 4731.301 of the Revised Code shall not remove or limit 1133  
the board's jurisdiction to take any disciplinary action under 1134  
this section against the individual. 1135

(4) At the request of the board, a license or certificate holder shall immediately surrender to the board a license or certificate that the board has suspended, revoked, or permanently revoked.

(N) Sanctions shall not be imposed under division (B) (28) of this section against any person who waives deductibles and copayments as follows:

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

(2) For professional services rendered to any other person authorized to practice pursuant to this chapter, to the extent allowed by this chapter and rules adopted by the board.

(O) Under the board's investigative duties described in this section and subject to division (F) of this section, the board shall develop and implement a quality intervention program designed to improve through remedial education the clinical and communication skills of individuals authorized under this chapter to practice medicine and surgery, osteopathic medicine and surgery, and podiatric medicine and surgery. In developing and implementing the quality intervention program, the board may do all of the following:

(1) Offer in appropriate cases as determined by the board an educational and assessment program pursuant to an investigation the board conducts under this section;

(2) Select providers of educational and assessment

services, including a quality intervention program panel of case reviewers; 1165  
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(3) Make referrals to educational and assessment service providers and approve individual educational programs recommended by those providers. The board shall monitor the progress of each individual undertaking a recommended individual educational program. 1167  
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(4) Determine what constitutes successful completion of an individual educational program and require further monitoring of the individual who completed the program or other action that the board determines to be appropriate; 1172  
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(5) Adopt rules in accordance with Chapter 119. of the Revised Code to further implement the quality intervention program. 1176  
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An individual who participates in an individual educational program pursuant to this division shall pay the financial obligations arising from that educational program. 1179  
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(P) The board shall not refuse to issue a license to an applicant because of a conviction, plea of guilty, judicial finding of guilt, judicial finding of eligibility for intervention in lieu of conviction, or the commission of an act that constitutes a criminal offense, unless the refusal is in accordance with section 9.79 of the Revised Code. 1182  
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**Section 2.** That existing sections 2305.15, 2317.56, 2919.11, 3726.14, and 4731.22 of the Revised Code are hereby repealed. 1188  
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**Section 3.** That section 2317.561 of the Revised Code is hereby repealed. 1191  
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**Section 4.** Section 4731.22 of the Revised Code is 1193  
presented in this act as a composite of the section as amended 1194  
by H.B. 263, H.B. 442, and S.B. 260, all of the 133rd General 1195  
Assembly. The General Assembly, applying the principle stated in 1196  
division (B) of section 1.52 of the Revised Code that amendments 1197  
are to be harmonized if reasonably capable of simultaneous 1198  
operation, finds that the composite is the resulting version of 1199  
the section in effect prior to the effective date of the section 1200  
as presented in this act. 1201