As Introduced

135th General Assembly Regular Session

2023-2024

H. B. No. 545

Representatives McClain, Miller, M.

Cosponsors: Representatives Creech, Gross, Fowler Arthur, Klopfenstein

A BILL

Го	amend sections 3701.351, 4723.01, 4723.02,	1
	4723.03, 4723.06, 4723.07, 4723.08, 4723.271,	2
	4723.28, 4723.282, 4723.33, 4723.34, 4723.341,	3
	4723.35, 4723.41, 4723.43, 4723.431, 4723.432,	4
	4723.481, 4723.483, 4723.487, 4723.488,	5
	4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99,	6
	4731.22, and 4731.27 and to enact sections	7
	4723.53, 4723.54, 4723.55, 4723.551, 4723.56,	8
	4723.57, 4723.58, 4723.581, 4723.582, 4723.583,	9
	4723.584, 4723.59, 4723.60, 4724.01, 4724.02,	10
	4724.03, 4724.04, 4724.05, 4724.06, 4724.07,	11
	4724.08, 4724.09, 4724.10, 4724.11, 4724.12,	12
	4724.13, and 4724.99 of the Revised Code to	13
	regulate the practice of certified nurse-	14
	midwives, certified midwives, and licensed	15
	midwives.	16

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

Sec	ction 1.	That secti	ons 3701.	351, 4723.	.01, 4723.	.02,	17
4723.03,	4723.06,	4723.07,	4723.08,	4723.271,	4723.28,	4723.282,	18
4723 33.	4723 34.	4723 341.	4723 35.	4723 41.	4723 43.	4723 431.	1 0

4723.432, 4723.481, 4723.483, 4723.487, 4723.488, 4723.4810,	20
4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 4731.27 be	21
amended and sections 4723.53, 4723.54, 4723.55, 4723.551,	22
4723.56, 4723.57, 4723.58, 4723.581, 4723.582, 4723.583,	23
4723.584, 4723.59, 4723.60, 4724.01, 4724.02, 4724.03, 4724.04,	24
4724.05, 4724.06, 4724.07, 4724.08, 4724.09, 4724.10, 4724.11,	25
4724.12, 4724.13, and 4724.99 of the Revised Code be enacted to	26
read as follows:	27
Sec. 3701.351. (A) The governing body of every hospital	28
shall set standards and procedures to be applied by the hospital	29
and its medical staff in considering and acting upon	30
applications for staff membership or professional privileges.	31
These standards and procedures shall be available for public	32
inspection.	33
(B) The governing body of any hospital, in considering and	34
acting upon applications for staff membership or professional	35
privileges within the scope of the applicants' respective	36
licensures, shall not discriminate against a qualified person	37
solely on the basis of whether that person is licensed to	38
practice medicine, osteopathic medicine, or podiatry, is	39
licensed to practice dentistry or psychology, or is licensed to	40
practice nursing as an advanced practice registered nurse, or is	41
licensed to practice as a certified midwife or licensed midwife.	42
Staff membership or professional privileges shall be considered	43
and acted on in accordance with standards and procedures	44
established under division (A) of this section. This section	45
does not permit a psychologist to admit a patient to a hospital	46
in violation of section 3727.06 of the Revised Code.	47
(C) The governing body of any hospital that provides	48

maternity services, in considering and acting upon applications

for clinical privileges, shall not discriminate against a	50
qualified person solely on the basis that the person is	51
authorized to practice nurse-midwifery <u>or midwifery</u> . An	52
application from a certified nurse-midwife or certified midwife	53
who is not employed by the hospital shall contain the name of a	54
physician member of the hospital's medical staff who holds	55
clinical privileges in obstetrics at that hospital and who has	56
agreed to be the collaborating physician for the applicant in	57
accordance with section 4723.43 4723.431 of the Revised Code.	58
(D) Any person may apply to the court of common pleas for	59
temporary or permanent injunctions restraining a violation of	60
division (A), (B), or (C) of this section. This action is an	61
additional remedy not dependent on the adequacy of the remedy at	62
law.	63
(E)(1) If a hospital does not provide or permit the	64
provision of any diagnostic or treatment service for mental or	65
emotional disorders or any other service that may be legally	66
performed by a psychologist licensed under Chapter 4732. of the	67
Revised Code, this section does not require the hospital to	68
provide or permit the provision of any such service and the	69
hospital shall be exempt from requirements of this section	70
pertaining to psychologists.	71
(2) This section does not impair the right of a hospital	72
to enter into an employment, personal service, or any other kind	73
of contract with a licensed psychologist, upon any such terms as	74
the parties may mutually agree, for the provision of any service	75
that may be legally performed by a licensed psychologist.	76
Sec. 4723.01. As used in this chapter:	77

(A) "Registered nurse" means an individual who holds a

current, valid license issued under this chapter that authorizes	79
the practice of nursing as a registered nurse.	80
(B) "Practice of nursing as a registered nurse" means	81
providing to individuals and groups nursing care requiring	82
specialized knowledge, judgment, and skill derived from the	83
principles of biological, physical, behavioral, social, and	84
nursing sciences. Such nursing care includes:	85
(1) Identifying patterns of human responses to actual or	86
potential health problems amenable to a nursing regimen;	87
potential hearth problems amenable to a nursing regimen,	0 /
(2) Executing a nursing regimen through the selection,	88
performance, management, and evaluation of nursing actions;	89
(3) Assessing health status for the purpose of providing	90
nursing care;	91
(4) Providing health counseling and health teaching;	92
(5) Administering medications, treatments, and executing	93
regimens authorized by an individual who is authorized to	94
practice in this state and is acting within the course of the	95
individual's professional practice;	96
(6) Teaching, administering, supervising, delegating, and	97
evaluating nursing practice.	98
(C) "Nursing regimen" may include preventative,	99
restorative, and health-promotion activities.	100
(D) "Assessing health status" means the collection of data	101
through nursing assessment techniques, which may include	102
interviews, observation, and physical evaluations for the	103
purpose of providing nursing care.	104
(E) "Licensed practical nurse" means an individual who	105

holds a current, valid license issued under this chapter that	106
authorizes the practice of nursing as a licensed practical	107
nurse.	108
(F) "The practice of nursing as a licensed practical	109
nurse" means providing to individuals and groups nursing care	110
requiring the application of basic knowledge of the biological,	111
physical, behavioral, social, and nursing sciences at the	112
direction of a registered nurse or any of the following who is	113
authorized to practice in this state: a physician, physician	114
assistant, dentist, podiatrist, optometrist, or chiropractor.	115
Such nursing care includes:	116
(1) Observation, patient teaching, and care in a diversity	117
of health care settings;	118
(2) Contributions to the planning, implementation, and	119
evaluation of nursing;	120
(3) Administration of medications and treatments	121
authorized by an individual who is authorized to practice in	122
this state and is acting within the course of the individual's	123
<pre>professional practice;</pre>	124
(4) Administration to an adult of intravenous therapy	125
authorized by an individual who is authorized to practice in	126
this state and is acting within the course of the individual's	127
professional practice, on the condition that the licensed	128
practical nurse is authorized under section 4723.18 or 4723.181	129
of the Revised Code to perform intravenous therapy and performs	130
intravenous therapy only in accordance with those sections;	131
(5) Delegation of nursing tasks as directed by a	132
registered nurse;	133
(6) Teaching nursing tasks to licensed practical nurses	134

and individuals to whom the licensed practical nurse is	135
authorized to delegate nursing tasks as directed by a registered	136
nurse.	137
(G) "Certified registered nurse anesthetist" means an	138
advanced practice registered nurse who holds a current, valid	139
license issued under this chapter and is designated as a	140
certified registered nurse anesthetist in accordance with	141
section 4723.42 of the Revised Code and rules adopted by the	142
board of nursing.	143
board or nursing.	140
(H) "Clinical nurse specialist" means an advanced practice	144
registered nurse who holds a current, valid license issued under	145
this chapter and is designated as a clinical nurse specialist in	146
accordance with section 4723.42 of the Revised Code and rules	147
adopted by the board of nursing.	148
(I) "Certified nurse-midwife" means an advanced practice	149
registered nurse who holds a current, valid license issued under	150
this chapter and is designated as a certified nurse-midwife in	151
accordance with section 4723.42 of the Revised Code and rules	152
adopted by the board of nursing. A certified nurse-midwife does	153
not include a certified midwife, licensed midwife, or	154
traditional midwife.	155
(J) "Certified nurse practitioner" means an advanced	156
practice registered nurse who holds a current, valid license	157
issued under this chapter and is designated as a certified nurse	158
practitioner in accordance with section 4723.42 of the Revised	159
Code and rules adopted by the board of nursing.	160
(K) "Physician" means an individual authorized under	161
Chapter 4731. of the Revised Code to practice medicine and	162
surgery or osteopathic medicine and surgery.	163

(L) "Collaboration" or "collaborating" means the	164
following:	165
(1) In the case of a clinical nurse specialist or a	166
certified nurse practitioner, that one or more podiatrists	167
acting within the scope of practice of podiatry in accordance	168
with section 4731.51 of the Revised Code and with whom the nurse	169
has entered into a standard care arrangement or one or more	170
physicians with whom the nurse has entered into a standard care	171
arrangement are continuously available to communicate with the	172
clinical nurse specialist or certified nurse practitioner either	173
in person or by electronic communication;	174
(2) In the case of a certified nurse-midwife or certified	175
midwife, that one or more physicians with whom the certified	176
nurse-midwife or certified midwife has entered into a standard	177
care arrangement are continuously available to communicate with	178
the certified nurse-midwife or certified midwife either in	179
person or by electronic communication.	180
(M) "Supervision," as it pertains to a certified	181
registered nurse anesthetist, means that the certified	182
registered nurse anesthetist is under the direction of a	183
podiatrist acting within the podiatrist's scope of practice in	184
accordance with section 4731.51 of the Revised Code, a dentist	185
acting within the dentist's scope of practice in accordance with	186
Chapter 4715. of the Revised Code, or a physician, and, when	187
administering anesthesia, the certified registered nurse	188
anesthetist is in the immediate presence of the podiatrist,	189
dentist, or physician.	190
(N) "Standard care arrangement" means a written, formal	191
guide for planning and evaluating a patient's health care that	192
is developed by one or more collaborating physicians or	193

podiatrists and a clinical nurse specialist, certified nurse-	194
midwife, certified midwife , or certified nurse practitioner and	195
meets the requirements of section 4723.431 of the Revised Code.	196
(O) "Advanced practice registered nurse" means an	197
individual who holds a current, valid license issued under this	198
chapter that authorizes the practice of nursing as an advanced	199
practice registered nurse and is designated as any of the	200
following:	201
(1) A certified registered nurse anesthetist;	202
(2) A clinical nurse specialist;	203
(3) A certified nurse-midwife;	204
(4) A certified nurse practitioner.	205
(P) "Practice of nursing as an advanced practice	206
registered nurse" means providing to individuals and groups	207
nursing care that requires knowledge and skill obtained from	208
advanced formal education, training, and clinical experience.	209
Such nursing care includes the care described in section 4723.43	210
of the Revised Code.	211
(Q) "Dialysis care" means the care and procedures that a	212
dialysis technician or dialysis technician intern is authorized	213
to provide and perform, as specified in section 4723.72 of the	214
Revised Code.	215
(R) "Dialysis technician" means an individual who holds a	216
current, valid certificate to practice as a dialysis technician	217
issued under section 4723.75 of the Revised Code.	218
(S) "Dialysis technician intern" means an individual who	219
has not passed the dialysis technician certification examination	220
required by section 4723.751 of the Revised Code, but who has	221

successfully completed a dialysis training program approved by	222
the board of nursing under section 4723.74 of the Revised Code	223
within the previous eighteen months.	224
(T) "Certified community health worker" means an	225
individual who holds a current, valid certificate as a community	226
health worker issued under section 4723.85 of the Revised Code.	227
(U) "Medication aide" means an individual who holds a	228
current, valid certificate issued under this chapter that	229
authorizes the individual to administer medication in accordance	230
with section 4723.67 of the Revised Code;	231
(V) "Nursing specialty" means a specialty in practice as a	232
certified registered nurse anesthetist, clinical nurse	233
specialist, certified nurse-midwife, or certified nurse	234
practitioner.	235
(W) "Physician assistant" means an individual who is	236
licensed to practice as a physician assistant under Chapter	237
4730. of the Revised Code.	238
(X) "Certified midwife" means an individual who is	239
licensed under section 4723.56 of the Revised Code and engages	240
in one or more of the activities described in that section. A	241
certified midwife does not include a certified nurse-midwife,	242
licensed midwife, or traditional midwife.	243
(Y) "Licensed midwife" has the same meaning as in section	244
4724.01 of the Revised Code. A licensed midwife does not include	245
a certified nurse-midwife, certified midwife, or traditional	246
<pre>midwife.</pre>	247
(Z) "Traditional midwife" has the same meaning as in	248
section 4724.01 of the Revised Code.	249

Sec. 4723.02. The board of nursing shall assume and	250
exercise all the powers and perform all the duties conferred and	251
imposed on it by this chapter.	252

The board shall consist of thirteen fifteen members who 253 shall be citizens of the United States and residents of Ohio. 254 Eight members shall be registered nurses, each of whom shall be 255 a graduate of an approved program of nursing education that 256 prepares persons for licensure as a registered nurse, shall hold 257 a currently active license issued under this chapter to practice 258 nursing as a registered nurse, and shall have been actively 259 engaged in the practice of nursing as a registered nurse for the 260 five years immediately preceding the member's initial 261 appointment to the board. Of the eight members who are 262 registered nurses, at least two shall hold a current, valid 263 license issued under this chapter that authorizes the practice 264 of nursing as an advanced practice registered nurse. Four 265 members shall be licensed practical nurses, each of whom shall 266 be a graduate of an approved program of nursing education that 267 prepares persons for licensure as a practical nurse, shall hold 268 a currently active license issued under this chapter to practice 269 nursing as a licensed practical nurse, and shall have been 270 actively engaged in the practice of nursing as a licensed 271 practical nurse for the five years immediately preceding the 272 member's initial appointment to the board. Two members shall be 273 a certified nurse-midwife and a certified midwife, with one 274 practicing in an urban setting and the other practicing in a 275 rural setting. One member shall represent the interests of 276 consumers of health care. Neither this member nor any person in 277 the member's immediate family shall be a member of or associated 278 with a health care provider or profession or shall have a 279 financial interest in the delivery or financing of health care. 280

Representation of nursing service and nursing education and of	281
the various geographical areas of the state shall be considered	282
in making appointments.	283
As the term of any member of the board expires, a	284

As the term of any member of the board expires, a successor shall be appointed who has the qualifications the vacancy requires. Terms of office shall be for four years, commencing on the first day of January and ending on the thirty-first day of December.

A current or former board member who has served not more than one full term or one full term and not more than thirty months of another term may be reappointed for one additional term.

Each member shall hold office from the date of appointment until the end of the term for which the member was appointed.

The term of a member shall expire if the member ceases to meet any requirement of this section for the member's position on the board. Any member appointed to fill a vacancy occurring prior to the expiration of the term for which the member's predecessor was appointed shall hold office for the remainder of such term.

Any member shall continue in office subsequent to the expiration date of the member's term until the member's successor takes office, or until a period of sixty days has elapsed, whichever occurs first.

Nursing organizations of this state may each submit to the
governor the names of not more than five nominees for each
position to be filled on the board. From the names so submitted
or from others, at the governor's discretion, the governor with
the advice and consent of the senate shall make such
appointments.

Any member of the board may be removed by the governor for	310
neglect of any duty required by law or for incompetency or	311
unprofessional or dishonorable conduct, after a hearing as	
provided in Chapter 119. of the Revised Code.	313
$rac{ ext{Seven-Eight}}{ ext{Eight}}$ members of the board, including at least four	314
registered nurses and at least one licensed practical nurse	315
shall at all times constitute a quorum.	316
Each member of the board shall receive an amount fixed	317
pursuant to division (J) of section 124.15 of the Revised Code	318
for each day in attendance at board meetings and in discharge of	319
official duties, and in addition thereto, necessary expense	320
incurred in the performance of such duties.	321
The board shall elect one of its nurse members as	322
president and one as vice-president. The board shall elect one	323
of its registered nurse members to serve as the supervising	
member for disciplinary matters.	325
The board may establish advisory groups to serve in	326
consultation with the board or the executive director. Each	327
advisory group shall be given a specific charge in writing and	328
shall report to the board. Members of advisory groups shall	329
serve without compensation but shall receive their actual and	330
necessary expenses incurred in the performance of their official	331
duties.	332
Sec. 4723.03. (A) No person shall engage in the practice	333
of nursing as a registered nurse, represent the person as being	334
a registered nurse, or use the title "registered nurse," the	335
initials "R.N.," or any other title implying that the person is	336
a registered nurse, for a fee, salary, or other consideration,	337
or as a volunteer, without holding a current, valid license as a	338

registered nurse under this chapter.	339
(B) No person shall knowingly do any of the following	340
without holding a current, valid license to practice nursing as	341
an advanced practice registered nurse issued under this chapter:	342
(1) Engage in the practice of nursing as an advanced	343
<pre>practice registered nurse;</pre>	344
(2) Represent the person as being an advanced practice	345
registered nurse;	346
(3) Use the title "advanced practice registered nurse,"	347
the initials "A.P.R.N.," or any other title implying that the	348
person is an advanced practice registered nurse, for a fee,	349
salary, or other consideration, or as a volunteer.	350
(C) No person who is not otherwise authorized to do so	351
shall knowingly prescribe or personally furnish drugs or	352
therapeutic devices without holding a current, valid license to	353
practice nursing as an advanced practice registered nurse issued	354
under this chapter and being designated as a clinical nurse	355
specialist, certified nurse-midwife, or certified nurse	356
practitioner under section 4723.42 of the Revised Code;	357
(D) No person shall engage in the practice of nursing as a	358
licensed practical nurse, represent the person as being a	359
licensed practical nurse, or use the title "licensed practical	360
nurse," the initials "L.P.N.," or any other title implying that	361
the person is a licensed practical nurse, for a fee, salary, or	362
other consideration, or as a volunteer, without holding a	363
current, valid license as a practical nurse under this chapter.	364
(E) No person shall use the titles or initials "graduate	365
nurse," "G.N.," "professional nurse," "P.N.," "graduate	366
practical nurse, " "G.P.N., " "practical nurse, " "P.N., " "trained	367

nurse," "T.N.," or any other statement, title, or initials that	368
would imply or represent to the public that the person is	369
authorized to practice nursing in this state, except as follows:	370
(1) A person licensed under this chapter to practice	371
nursing as a registered nurse may use that title and the	372
initials "R.N.";	373
(2) A person licensed under this chapter to practice	374
nursing as a licensed practical nurse may use that title and the	375
initials "L.P.N.";	376
(3) A person licensed under this chapter to practice	377
nursing as an advanced practice registered nurse and designated	378
as a certified registered nurse anesthetist may use that title	379
or the initials "A.P.R.NC.R.N.A.";	380
(4) A person licensed under this chapter to practice	381
nursing as an advanced practice registered nurse and designated	382
as a clinical nurse specialist may use that title or the	383
initials "A.P.R.NC.N.S.";	384
(5) A person licensed under this chapter to practice	385
nursing as an advanced practice registered nurse and designated	386
as a certified nurse-midwife may use that title or the initials	387
"A.P.R.NC.N.M.";	388
(6) A person licensed under this chapter to practice	389
nursing as an advanced practice registered nurse and designated	390
as a certified nurse practitioner may use that title or the	391
initials "A.P.R.NC.N.P.";	392
(7) A person licensed under this chapter to practice	393
nursing as an advanced practice registered nurse may use the	394
title "advanced practice registered nurse" or the initials	395
"A.P.R.N."	396

(F) No person shall employ a person not licensed as a	397
registered nurse under this chapter to engage in the practice of	398
nursing as a registered nurse.	399
No person shall knowingly employ a person not licensed as	400
an advanced practice registered nurse under this chapter to	401
engage in the practice of nursing as an advanced practice	
registered nurse.	403
No person shall employ a person not licensed as a	404
practical nurse under this chapter to engage in the practice of	405
nursing as a licensed practical nurse.	406
(G) No person shall sell or fraudulently obtain or furnish	407
any nursing diploma, license, certificate, renewal, or record,	408
or aid or abet such acts.	409
(H)(1) No person shall knowingly use the title "certified	410
nurse-midwife" or any other title implying that the person is a	411
certified nurse-midwife without holding a current, valid license	412
as a certified nurse-midwife under this chapter.	413
(2) No person shall knowingly use the title "certified	414
midwife" or any other title implying that the person is a	415
certified midwife without holding a current, valid license as a	416
certified midwife under this chapter.	417
Sec. 4723.06. (A) The board of nursing shall:	418
(1) Administer and enforce the provisions of this chapter,	419
including the taking of disciplinary action for violations of	420
section 4723.28 of the Revised Code, any other provisions of	421
this chapter, or rules adopted under this chapter;	422
(2) Develop criteria that an applicant must meet to be	423
eligible to sit for the examination for licensure to practice as	424

a registered nurse or as a licensed practical nurse;	425
(3) Issue and renew nursing licenses, certified midwife	426
licenses, dialysis technician certificates, medication aide	427
certificates, and community health worker certificates, as	
provided in this chapter;	429
(4) Define the minimum educational standards for the	430
schools and programs of registered nursing and practical nursing	431
in this state;	432
(5) Survey, inspect, and grant full approval to	433
prelicensure nursing education programs in this state that meet	434
the standards established by rules adopted under section 4723.07	435
of the Revised Code. Prelicensure nursing education programs	436
include, but are not limited to, diploma, associate degree,	437
baccalaureate degree, master's degree, and doctor of nursing	438
programs leading to initial licensure to practice nursing as a	439
registered nurse and practical nurse programs leading to initial	440
licensure to practice nursing as a licensed practical nurse.	441
(6) Grant conditional approval, by a vote of a quorum of	442
the board, to a new prelicensure nursing education program or a	443
program that is being reestablished after having ceased to	444
operate, if the program meets and maintains the minimum	445
standards of the board established by rules adopted under	446
section 4723.07 of the Revised Code. If the board does not grant	447
conditional approval, it shall hold an adjudication under	448
Chapter 119. of the Revised Code to consider conditional	449
approval of the program. If the board grants conditional	450
approval, at the first meeting following completion of the	451
survey process required by division (A)(5) of this section, the	452
board shall determine whether to grant full approval to the	453
program. If the board does not grant full approval or if it	454

appears that the program has failed to meet and maintain	455
standards established by rules adopted under section 4723.07 of	456
the Revised Code, the board shall hold an adjudication under	457
Chapter 119. of the Revised Code to consider the program. Based	458
on results of the adjudication, the board may continue or	459
withdraw conditional approval, or grant full approval.	460
(7) Place on provisional approval, for a period of time	461
specified by the board, a prelicensure nursing education program	462
that has ceased to meet and maintain the minimum standards of	463
the board established by rules adopted under section 4723.07 of	464
the Revised Code. Prior to or at the end of the period, the	465
board shall reconsider whether the program meets the standards	466
and shall grant full approval if it does. If it does not, the	467
board may withdraw approval, pursuant to an adjudication under	468
Chapter 119. of the Revised Code.	469
(8) Approve continuing education programs and courses	470
under standards established in rules adopted under sections	471
4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code;	472
(9) Establish a substance use disorder monitoring program	473
in accordance with section 4723.35 of the Revised Code;	474
(10) Establish the practice intervention and improvement	475
program in accordance with section 4723.282 of the Revised Code;	476
(11) Grant approval to the course of study in advanced	477
pharmacology and related topics described in section 4723.482 or	478
4723.551 of the Revised Code;	479
(12) Make an annual edition of the exclusionary formulary	480
established in rules adopted under section 4723.50 of the	481
Revised Code available to the public by electronic means and, as	482
soon as possible after any revision of the formulary becomes	483

effective, make the revision available to the public by	484
electronic means;	485
(13) Approve under section 4723.46 of the Revised Code	486
national certifying organizations for examination and licensure	487
of advanced practice registered nurses, which may include	488
separate organizations for each nursing specialty;	489
(14) Provide guidance and make recommendations to the	490
general assembly, the governor, state agencies, and the federal	491
government with respect to the regulation of the practice of	492
nursing and the enforcement of this chapter;	493
(15) Make an annual report to the governor, which shall be	494
open for public inspection;	495
(16) Maintain and have open for public inspection the	496
following records:	497
(a) A record of all its meetings and proceedings;	498
(b) A record of all applicants for, and holders of,	499
licenses and certificates issued by the board under this chapter	500
or in accordance with rules adopted under this chapter. The	501
record shall be maintained in a format determined by the board.	502
(c) A list of education and training programs approved by	503
the board.	504
(17) Deny conditional approval to a new prelicensure	505
nursing education program or a program that is being	506
reestablished after having ceased to operate if the program or a	507
person acting on behalf of the program submits or causes to be	508
submitted to the board false, misleading, or deceptive	509
statements, information, or documentation in the process of	510
applying for approval of the program. If the board proposes to	511

deny approval of the program, it shall do so pursuant to an	512
adjudication conducted under Chapter 119. of the Revised Code.	513
(B) The board may fulfill the requirement of division (A)	514
(8) of this section by authorizing persons who meet the	
standards established in rules adopted under section 4723.07 of	
the Revised Code to approve continuing education programs and	517
courses. Persons so authorized shall approve continuing	518
education programs and courses in accordance with standards	519
established in rules adopted under section 4723.07 of the	520
Revised Code.	521
Persons seeking authorization to approve continuing	522
education programs and courses shall apply to the board and pay	523
the appropriate fee established under section 4723.08 of the	524
Revised Code. Authorizations to approve continuing education	525
programs and courses shall expire and may be renewed according	526
to the schedule established in rules adopted under section	527
4723.07 of the Revised Code.	528
In addition to approving continuing education programs	529
under division (A)(8) of this section, the board may sponsor	530
continuing education activities that are directly related to the	531
statutes and rules the board enforces.	532
(C)(1) The board may deny conditional approval to a new	533
prelicensure nursing education program or program that is being	534
reestablished after having ceased to operate if the program is	535
controlled by a person who controls or has controlled a program	536
that had its approval withdrawn, revoked, suspended, or	537
restricted by the board or a board of another jurisdiction that	538
is a member of the national council of state boards of nursing.	539
If the board proposes to deny approval, it shall do so pursuant	540
to an adjudication conducted under Chapter 119. of the Revised	541

Code.	542
(2) As used in this division, "control" means any of the	543
following:	544
(a) Holding fifty per cent or more of the outstanding	545
voting securities or membership interest of a prelicensure	546
nursing education program;	547
(b) In the case of an unincorporated prelicensure nursing	548
education program, having the right to fifty per cent or more of	549
the program's profits or in the event of a dissolution, fifty	550
per cent or more of the program's assets;	551
(c) In the case of a prelicensure nursing education	552
program that is a for-profit or not-for-profit corporation,	553
having the contractual authority presently to designate fifty	554
per cent or more of its directors;	555
(d) In the case of a prelicensure nursing education	556
program that is a trust, having the contractual authority	557
presently to designate fifty per cent or more of its trustees;	558
(e) Having the authority to direct the management,	559
policies, or investments of a prelicensure nursing education	560
program.	561
(D)(1) When an action taken by the board under division	562
(A)(6), (7), or (17) or (C)(1) of this section is required to be	563
taken pursuant to an adjudication conducted under Chapter 119.	564
of the Revised Code, the board may, in lieu of an adjudication	565
hearing, enter into a consent agreement to resolve the matter. A	566
consent agreement, when ratified by a vote of a quorum of the	567
board, constitutes the findings and order of the board with	568
respect to the matter addressed in the agreement. If the board	569
refuses to ratify a consent agreement, the admissions and	570

findings contained in the agreement are of no effect.	571
(2) In any instance in which the board is required under	572
Chapter 119. of the Revised Code to give notice to a person	573
seeking approval of a prelicensure nursing education program of	574
an opportunity for a hearing and the person does not make a	575
timely request for a hearing in accordance with section 119.07	576
of the Revised Code, the board is not required to hold a	577
hearing, but may adopt, by a vote of a quorum, a final order	578
that contains the board's findings.	579
(3) When the board denies or withdraws approval of a	580
prelicensure nursing education program, the board may specify	581
that its action is permanent. A program subject to a permanent	582
action taken by the board is forever ineligible for approval and	583
the board shall not accept an application for the program's	584
reinstatement or approval.	585
Sec. 4723.07. In accordance with Chapter 119. of the	586
Revised Code, the board of nursing shall adopt and may amend and	587
rescind rules that establish all of the following:	588
(A) Provisions for the board's government and control of	589
its actions and business affairs;	590
(B) Subject to section 4723.072 of the Revised Code,	591
minimum standards for nursing education programs that prepare	592
graduates to be licensed under this chapter and procedures for	593
granting, renewing, and withdrawing approval of those programs;	594
(C) Criteria that applicants for licensure must meet to be	595
eligible to take examinations for licensure;	596
(D) Standards and procedures for renewal of the licenses	597
and certificates issued by the board;	598

(E) Standards for approval of continuing nursing education	599
programs and courses for registered nurses, advanced practice	600
registered nurses, and licensed practical nurses. The standards	601
may provide for approval of continuing nursing education	602
programs and courses that have been approved by other state	603
boards of nursing or by national accreditation systems for	604
nursing, including, but not limited to, the American nurses'	605
credentialing center and the national association for practical	606
nurse education and service.	607
(F) Standards that persons must meet to be authorized by	608
the board to approve continuing education programs and courses	609
and a schedule by which that authorization expires and may be	610
renewed;	611
(G) Requirements, including continuing education	612
requirements, for reactivating inactive licenses or	613
certificates, and for reinstating licenses or certificates that	614
have lapsed;	615
(H) Conditions that may be imposed for reinstatement of a	616
license or certificate following action taken under section	617
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised	618
Code resulting in a license or certificate suspension;	619
(I) Criteria for evaluating the qualifications of an	620
applicant for a license to practice nursing as a registered	621
nurse, a license to practice nursing as an advanced practice	622
registered nurse, or a license to practice nursing as a licensed	623
practical nurse for the purpose of issuing the license by the	624
board's endorsement of the applicant's authority to practice	625
issued by the licensing agency of another state;	626

(J) Universal and standard precautions that shall be used

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by each licensee or certificate holder. The rules shall define	628
and establish requirements for universal and standard	629
precautions that include the following:	630
(1) Appropriate use of hand washing;	631
(2) Disinfection and sterilization of equipment;	632
(3) Handling and disposal of needles and other sharp	633
instruments;	634
(4) Wearing and disposal of gloves and other protective	635
garments and devices.	636
(K) Quality assurance standards for advanced practice	637
registered nurses;	638
(L) Additional criteria for the standard care arrangement	639
required by section 4723.431 of the Revised Code entered into by	640
a <u>certified midwife</u> , clinical nurse specialist, certified nurse-	641
midwife, or certified nurse practitioner and the nurse's	642
collaborating physician or podiatrist;	643
(M) For purposes of division (B)(31) of section 4723.28 of	644
the Revised Code, the actions, omissions, or other circumstances	645
that constitute failure to establish and maintain professional	646
boundaries with a patient;	647
(N) Standards and procedures for delegation under section	648
4723.48 of the Revised Code of the authority to administer	649
drugs.	650
The board may adopt other rules necessary to carry out the	651
provisions of this chapter. The rules shall be adopted in	652
accordance with Chapter 119. of the Revised Code.	653
Coc 4722 00 (7) The board of nursing may impose food not	65/

to exceed the following limits:	655
(1) For application for licensure by examination or	656
endorsement to practice nursing as a registered nurse or as a	657
licensed practical nurse submitted under division (A) or (B) of	658
section 4723.09 of the Revised Code, seventy-five dollars;	659
(2) For application for licensure to practice nursing as	660
an advanced practice registered nurse submitted under division	661
(A) or (B)(2) of section 4723.41 of the Revised Code, one	662
hundred fifty dollars;	663
(3) For application for a dialysis technician certificate,	664
the amount specified in rules adopted under section 4723.79 of	665
the Revised Code;	666
(4) For providing, pursuant to division (B) of section	667
4723.271 of the Revised Code, written verification of a nursing	668
license, dialysis technician certificate, medication aide	669
certificate, or community health worker certificate to another	670
jurisdiction, fifteen dollars;	671
(5) For providing, pursuant to division (A) of section	672
4723.271 of the Revised Code, a replacement copy of a wall	673
certificate suitable for framing as described in that division,	674
<pre>twenty-five dollars;</pre>	675
(6) For renewal of a license to practice as a registered	676
nurse or licensed practical nurse, sixty-five dollars;	677
(7) For renewal of a license to practice as an advanced	678
practice registered nurse, one hundred thirty-five dollars;	679
(8) For renewal of a dialysis technician certificate, the	680
amount specified in rules adopted under section 4723.79 of the	681
Revised Code;	682

(9) For processing a late application for renewal of a	683
nursing license or dialysis technician certificate, fifty	684
dollars;	685
(10) For application for authorization to approve	686
continuing education programs and courses from an applicant	687
accredited by a national accreditation system for nursing, five	688
hundred dollars;	689
(11) For application for authorization to approve	690
continuing education programs and courses from an applicant not	691
accredited by a national accreditation system for nursing, one	692
thousand dollars;	693
(12) For each year for which authorization to approve	694
continuing education programs and courses is renewed, one	695
hundred fifty dollars;	696
(13) For application for approval to operate a dialysis	697
training program, the amount specified in rules adopted under	698
section 4723.79 of the Revised Code;	699
(14) For reinstatement of a lapsed license or certificate	700
issued under this chapter, one hundred dollars except as	701
provided in section 5903.10 of the Revised Code;	702
(15) For processing a check returned to the board by a	703
financial institution, twenty-five dollars;	704
(16) The amounts specified in rules adopted under section	705
4723.88 of the Revised Code pertaining to the issuance of	706
certificates to community health workers, including fees for	707
application for a certificate, renewal of a certificate,	708
processing a late application for renewal of a certificate,	709
reinstatement of a lapsed certificate, application for approval	710
of a community health worker training program for community	711

health workers, and renewal of the approval of a training	712
program for community health workers;	713
(17) For application for licensure to practice as a	714
certified midwife, forty-five dollars;	715
(10) For reposal of a license to proctice as a contified	717
(18) For renewal of a license to practice as a certified	716
midwife, twenty dollars.	717
(B) Each quarter, for purposes of transferring funds under	718
section 4743.05 of the Revised Code to the nurse education	719
assistance fund created in section 3333.28 of the Revised Code,	720
the board of nursing shall certify to the director of budget and	721
management the number of licenses renewed under this chapter	722
during the preceding quarter and the amount equal to that number	723
times five dollars.	724
(C) The board may charge a participant in a board-	725
sponsored continuing education activity an amount not exceeding	726
fifteen dollars for each activity.	727
(D) The board may contract for services pertaining to the	728
process of providing written verification of a license or	729
certificate when the verification is performed for purposes	730
other than providing verification to another jurisdiction. The	731
contract may include provisions pertaining to the collection of	732
the fee charged for providing the written verification. As part	733
of these provisions, the board may permit the contractor to	734
retain a portion of the fees as compensation, before any amounts	735
are deposited into the state treasury.	736
Sec. 4723.271. (A) Upon request of the holder of a nursing	737
license, certified midwife license, dialysis technician	738
certificate, medication aide certificate, or community health	739
worker certificate issued under this chapter, the presentment of	740

proper identification as prescribed in rules adopted by the	741
board of nursing, and payment of the fee authorized under	742
section 4723.08 of the Revised Code, the board of nursing shall	743
provide to the requestor a replacement copy of a wall	744
certificate suitable for framing.	745
(B) Upon request of the holder of a nursing license,	746
certified midwife license, volunteer's certificate, dialysis	747
technician certificate, medication aide certificate, or	748
community health worker certificate issued under this chapter	749
and payment of the fee authorized under section 4723.08 of the	750
Revised Code, the board shall verify to an agency of another	751
jurisdiction or foreign country the fact that the person holds	752
such nursing license, certified midwife license, volunteer's	753
certificate, dialysis technician certificate, medication aide	754
certificate, or community health worker certificate.	755
Sec. 4723.28. (A) The board of nursing, by a vote of a	756
quorum, may impose one or more of the following sanctions if it	757
finds that a person committed fraud in passing an examination	758
required to obtain a license or dialysis technician certificate	759
issued by the board or to have committed fraud,	760
misrepresentation, or deception in applying for or securing any	761
nursing license, certified midwife license, or dialysis	762
technician certificate issued by the board: deny, revoke,	763
suspend, or place restrictions on any nursing license, certified	764
midwife license, or dialysis technician certificate issued by	765
the board; reprimand or otherwise discipline a holder of a	766
nursing license, certified midwife license, or dialysis	767
technician certificate; or impose a fine of not more than five	768

(B) Except as provided in section 4723.092 of the Revised

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hundred dollars per violation.

Code, the board of nursing, by a vote of a quorum, may impose	771
one or more of the following sanctions: deny, revoke, suspend,	772
or place restrictions on any nursing license, certified midwife	773
license, or dialysis technician certificate issued by the board;	774
reprimand or otherwise discipline a holder of a nursing license	775
certified midwife license, or dialysis technician certificate;	776
or impose a fine of not more than five hundred dollars per	777
violation. The sanctions may be imposed for any of the	778
following:	779
(1) Denial, revocation, suspension, or restriction of	780
authority to engage in a licensed profession or practice a	781
health care occupation, including nursing $_{m L}$ or practice as a	782
<pre>certified midwife or dialysis technician, for any reason other</pre>	783
than a failure to renew, in Ohio or another state or	784
jurisdiction;	785
(2) Engaging in the practice of nursing or engaging in	786
practice as a <u>certified midwife or</u> dialysis technician, having	787
failed to renew a nursing license, certified midwife license, or	788
dialysis technician certificate issued under this chapter, or	789
while a nursing license, certified midwife license, or dialysis	790
technician certificate is under suspension;	791
(3) Conviction of, a plea of guilty to, a judicial finding	792
of guilt of, a judicial finding of guilt resulting from a plea	793
of no contest to, or a judicial finding of eligibility for a	794
pretrial diversion or similar program or for intervention in	795
lieu of conviction for, a misdemeanor committed in the course of	796
practice;	797
(4) Conviction of, a plea of guilty to, a judicial finding	798
of guilt of, a judicial finding of guilt resulting from a plea	799

of no contest to, or a judicial finding of eligibility for a

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pretrial diversion or similar program or for intervention in	801
lieu of conviction for, any felony or of any crime involving	802
gross immorality or moral turpitude;	803
(5) Selling, giving away, or administering drugs or	804
therapeutic devices for other than legal and legitimate	805
therapeutic purposes; or conviction of, a plea of guilty to, a	806
judicial finding of guilt of, a judicial finding of guilt	807
resulting from a plea of no contest to, or a judicial finding of	808
eligibility for a pretrial diversion or similar program or for	809
intervention in lieu of conviction for, violating any municipal,	810
state, county, or federal drug law;	811
(6) Conviction of, a plea of guilty to, a judicial finding	812
of guilt of, a judicial finding of guilt resulting from a plea	813
of no contest to, or a judicial finding of eligibility for a	814
pretrial diversion or similar program or for intervention in	815
lieu of conviction for, an act in another jurisdiction that	816
would constitute a felony or a crime of moral turpitude in Ohio;	817
(7) Conviction of, a plea of guilty to, a judicial finding	818
of guilt of, a judicial finding of guilt resulting from a plea	819
of no contest to, or a judicial finding of eligibility for a	820
pretrial diversion or similar program or for intervention in	821
lieu of conviction for, an act in the course of practice in	822
another jurisdiction that would constitute a misdemeanor in	823
Ohio;	824
(8) Self-administering or otherwise taking into the body	825
any dangerous drug, as defined in section 4729.01 of the Revised	826
Code, in any way that is not in accordance with a legal, valid	827
prescription issued for that individual, or self-administering	828
or otherwise taking into the body any drug that is a schedule I	829
controlled substance;	830

(9) Habitual or excessive use of controlled substances,	831
other habit-forming drugs, or alcohol or other chemical	832
substances to an extent that impairs the individual's ability to	833
provide safe nursing care, safe care as a certified midwife, or	834
safe dialysis care;	835
(10) Impairment of the ability to practice according to	836
acceptable and prevailing standards of safe nursing care, safe	837
care as a certified midwife, or safe dialysis care because of	838
the use of drugs, alcohol, or other chemical substances;	839
(11) Impairment of the ability to practice according to	840
acceptable and prevailing standards of safe nursing care, safe	841
<pre>care as a certified midwife, or safe dialysis care because of a</pre>	842
physical or mental disability;	843
(12) Assaulting or causing harm to a patient or depriving	844
a patient of the means to summon assistance;	845
(13) Misappropriation or attempted misappropriation of	846
money or anything of value in the course of practice;	847
(14) Adjudication by a probate court of being mentally ill	848
or mentally incompetent. The board may reinstate the person's	849
nursing license, certified midwife license, or dialysis	850
technician certificate upon adjudication by a probate court of	851
the person's restoration to competency or upon submission to the	852
board of other proof of competency.	853
(15) The suspension or termination of employment by the	854
United States department of defense or department of veterans	855
affairs for any act that violates or would violate this chapter;	856
(16) Violation of this chapter or any rules adopted under	857
it;	858

(17) Violation of any restrictions placed by the board on	859
a nursing license, certified midwife license, or dialysis	860
technician certificate;	861
(18) Failure to use universal and standard precautions	862
established by rules adopted under section 4723.07 of the	863
Revised Code;	864
(19) Failure to practice in accordance with acceptable and	865
prevailing standards of safe nursing care, safe care as a	866
<pre>certified midwife, or safe dialysis care;</pre>	867
(20) In the case of a registered nurse, engaging in	868
activities that exceed the practice of nursing as a registered	869
nurse;	870
(21) In the case of a licensed practical nurse, engaging	871
in activities that exceed the practice of nursing as a licensed	872
<pre>practical nurse;</pre>	873
(22) In the case of a dialysis technician, engaging in	874
activities that exceed those permitted under section 4723.72 of	875
the Revised Code;	876
(23) Aiding and abetting a person in that person's	877
practice of nursing or as a certified midwife without a license	878
or practice as a dialysis technician without a certificate	879
issued under this chapter;	880
(24) In the case of an advanced practice registered nurse,	881
except as provided in division (M) of this section, either of	882
the following:	883
(a) Waiving the payment of all or any part of a deductible	884
or copayment that a patient, pursuant to a health insurance or	885
health care policy, contract, or plan that covers such nursing	886

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prescribe drugs and therapeutic devices in accordance with	915
section 4723.481 of the Revised Code;	916
(30) Prescribing any drug or device to perform or induce	917
an abortion, or otherwise performing or inducing an abortion;	918
(31) Failure to establish and maintain professional	919
boundaries with a patient, as specified in rules adopted under	920
section 4723.07 of the Revised Code;	921
(32) Regardless of whether the contact or verbal behavior	922
is consensual, engaging with a patient other than the spouse of	923
the registered nurse, licensed practical nurse, certified	924
<pre>midwife, or dialysis technician in any of the following:</pre>	925
(a) Sexual contact, as defined in section 2907.01 of the	926
Revised Code;	927
(b) Verbal behavior that is sexually demeaning to the	928
patient or may be reasonably interpreted by the patient as	929
sexually demeaning.	930
(33) Assisting suicide, as defined in section 3795.01 of	931
the Revised Code;	932
(34) Failure to comply with the requirements in section	933
3719.061 of the Revised Code before issuing for a minor a	934
prescription for an opioid analgesic, as defined in section	935
3719.01 of the Revised Code;	936
(35) Failure to comply with section 4723.487 of the	937
Revised Code, unless the state board of pharmacy no longer	938
maintains a drug database pursuant to section 4729.75 of the	939
Revised Code;	940
(36) The revocation, suspension, restriction, reduction,	941
or termination of clinical privileges by the United States	942

department of defense or department of veterans affairs or the	943
termination or suspension of a certificate of registration to	944
prescribe drugs by the drug enforcement administration of the	945
United States department of justice;	946
(37) In the case of an advanced practice registered nurse	947
who is designated as a clinical nurse specialist, certified	948
nurse-midwife, or certified nurse practitioner, failure to	949
comply with the terms of a consult agreement entered into with a	950
pharmacist pursuant to section 4729.39 of the Revised Code;	951
(38) In the case of a certified midwife:	952
(a) Engaging in activities that exceed those permitted	953
under section 4723.57 of the Revised Code;	954
(b) Failure to prescribe drugs and therapeutic devices in	955
accordance with section 4723.481 of the Revised Code;	956
(c) Failure to maintain a standard care arrangement in	957
accordance with section 4723.431 of the Revised Code or to	958
practice in accordance with the standard care arrangement.	959
(C) Disciplinary actions taken by the board under	960
divisions (A) and (B) of this section shall be taken pursuant to	961
an adjudication conducted under Chapter 119. of the Revised	962
Code, except that in lieu of a hearing, the board may enter into	963
a consent agreement with an individual to resolve an allegation	964
of a violation of this chapter or any rule adopted under it. A	965
consent agreement, when ratified by a vote of a quorum, shall	966
constitute the findings and order of the board with respect to	967
the matter addressed in the agreement. If the board refuses to	968
ratify a consent agreement, the admissions and findings	969
contained in the agreement shall be of no effect.	970
(D) The hearings of the board shall be conducted in	971

accordance with Chapter 119. of the Revised Code, the board may appoint a hearing examiner, as provided in section 119.09 of the	972
	973
Revised Code, to conduct any hearing the board is authorized to	974
hold under Chapter 119. of the Revised Code.	975

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In any instance in which the board is required under 976 Chapter 119. of the Revised Code to give notice of an 977 opportunity for a hearing and the applicant, licensee, or 978 certificate holder does not make a timely request for a hearing 979 in accordance with section 119.07 of the Revised Code, the board 980 is not required to hold a hearing, but may adopt, by a vote of a 981 quorum, a final order that contains the board's findings. In the 982 final order, the board may order any of the sanctions listed in 983 division (A) or (B) of this section. 984

(E) If a criminal action is brought against a registered 985 nurse, licensed practical nurse, <u>certified midwife</u>, or dialysis 986 technician for an act or crime described in divisions (B)(3) to 987 (7) of this section and the action is dismissed by the trial 988 court other than on the merits, the board shall conduct an 989 adjudication to determine whether the registered nurse, licensed 990 practical nurse, certified midwife, or dialysis technician 991 committed the act on which the action was based. If the board 992 determines on the basis of the adjudication that the registered 993 nurse, licensed practical nurse, <u>certified midwife</u>, or dialysis 994 technician committed the act, or if the registered nurse, 995 licensed practical nurse, certified midwife, or dialysis 996 technician fails to participate in the adjudication, the board 997 may take action as though the registered nurse, licensed 998 practical nurse, <u>certified midwife</u>, or dialysis technician had 999 been convicted of the act. 1000

If the board takes action on the basis of a conviction,

plea, or a judicial finding as described in divisions (B)(3) to	1002
(7) of this section that is overturned on appeal, the registered	1003
nurse, licensed practical nurse, <u>certified midwife</u> , or dialysis	1004
technician may, on exhaustion of the appeal process, petition	1005
the board for reconsideration of its action. On receipt of the	1006
petition and supporting court documents, the board shall	1007
temporarily rescind its action. If the board determines that the	1008
decision on appeal was a decision on the merits, it shall	1009
permanently rescind its action. If the board determines that the	1010
decision on appeal was not a decision on the merits, it shall	1011
conduct an adjudication to determine whether the registered	1012
nurse, licensed practical nurse, certified midwife, or dialysis	1013
technician committed the act on which the original conviction,	1014
plea, or judicial finding was based. If the board determines on	1015
the basis of the adjudication that the registered nurse,	1016
licensed practical nurse, certified midwife, or dialysis	1017
technician committed such act, or if the registered nurse,	1018
licensed practical nurse, <u>certified midwife</u> , or dialysis	1019
technician does not request an adjudication, the board shall	1020
reinstate its action; otherwise, the board shall permanently	1021
rescind its action.	1022

Notwithstanding the provision of division (D)(2) of 1023 section 2953.32 or division (F)(1) of section 2953.39 of the 1024 Revised Code specifying that if records pertaining to a criminal 1025 case are sealed or expunged under that section the proceedings 1026 in the case shall be deemed not to have occurred, sealing or 1027 expungement of the following records on which the board has 1028 based an action under this section shall have no effect on the 1029 board's action or any sanction imposed by the board under this 1030 section: records of any conviction, guilty plea, judicial 1031 finding of guilt resulting from a plea of no contest, or a 1032

judicial finding of eligibility for a pretrial diversion program	1033
or intervention in lieu of conviction.	1034
The board shall not be required to seal, destroy, redact,	1035
or otherwise modify its records to reflect the court's sealing	1036
or expungement of conviction records.	1037
(F) The board may investigate an individual's criminal	1038
background in performing its duties under this section. As part	1039
of such investigation, the board may order the individual to	1040
submit, at the individual's expense, a request to the bureau of	1041
criminal identification and investigation for a criminal records	1042
check and check of federal bureau of investigation records in	1043
accordance with the procedure described in section 4723.091 of	1044
the Revised Code.	1045
(G) During the course of an investigation conducted under	1046
this section, the board may compel any registered nurse,	1047
licensed practical nurse, certified midwife, or dialysis	1048
technician or applicant under this chapter to submit to a mental	1049
or physical examination, or both, as required by the board and	1050
at the expense of the individual, if the board finds reason to	1051
believe that the individual under investigation may have a	1052
physical or mental impairment that may affect the individual's	1053
ability to provide safe nursing care. Failure of any individual	1054
to submit to a mental or physical examination when directed	1055
constitutes an admission of the allegations, unless the failure	1056
is due to circumstances beyond the individual's control, and a	1057
default and final order may be entered without the taking of	1058
testimony or presentation of evidence.	1059
If the board finds that an individual is impaired, the	1060
board shall require the individual to submit to care,	1061

counseling, or treatment approved or designated by the board, as

a condition for initial, continued, reinstated, or renewed	1063
authority to practice. The individual shall be afforded an	1064
opportunity to demonstrate to the board that the individual can	1065
begin or resume the individual's occupation in compliance with	1066
acceptable and prevailing standards of care under the provisions	1067
of the individual's authority to practice.	1068

For purposes of this division, any registered nurse, 1069 licensed practical nurse, <u>certified midwife</u>, or dialysis 1070 technician or applicant under this chapter shall be deemed to 1071 have given consent to submit to a mental or physical examination 1072 when directed to do so in writing by the board, and to have 1073 waived all objections to the admissibility of testimony or 1074 examination reports that constitute a privileged communication. 1075

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- (H) The board shall investigate evidence that appears to show that any person has violated any provision of this chapter 1077 or any rule of the board. Any person may report to the board any information the person may have that appears to show a violation of any provision of this chapter or rule of the board. In the absence of bad faith, any person who reports such information or who testifies before the board in any adjudication conducted under Chapter 119. of the Revised Code shall not be liable for civil damages as a result of the report or testimony.
- (I) All of the following apply under this chapter with respect to the confidentiality of information:
- (1) Information received by the board pursuant to a 1087 complaint or an investigation is confidential and not subject to 1088 discovery in any civil action, except that the board may 1089 disclose information to law enforcement officers and government 1090 entities for purposes of an investigation of either a licensed 1091 health care professional, including a registered nurse, licensed 1092

practical nurse, <u>certified midwife</u> , or dialysis technician, or a	1093
person who may have engaged in the unauthorized practice of	1094
nursing, certified midwifery, or dialysis care. No law	1095
enforcement officer or government entity with knowledge of any	1096
information disclosed by the board pursuant to this division	1097
shall divulge the information to any other person or government	1098
entity except for the purpose of a government investigation, a	1099
prosecution, or an adjudication by a court or government entity.	1100
(2) If an investigation requires a review of patient	1101
records, the investigation and proceeding shall be conducted in	1102
such a manner as to protect patient confidentiality.	1103
(3) All adjudications and investigations of the board	1104
shall be considered civil actions for the purposes of section	1105
2305.252 of the Revised Code.	1106
(4) Any board activity that involves continued monitoring	1107
of an individual as part of or following any disciplinary action	1108
taken under this section shall be conducted in a manner that	1109
maintains the individual's confidentiality. Information received	1110
or maintained by the board with respect to the board's	1111
monitoring activities is not subject to discovery in any civil	1112
action and is confidential, except that the board may disclose	1113
information to law enforcement officers and government entities	1114
for purposes of an investigation of a licensee or certificate	1115
holder.	1116
(J) Any action taken by the board under this section	1117
resulting in a suspension from practice shall be accompanied by	1118
a written statement of the conditions under which the person may	1119
be reinstated to practice.	1120

(K) When the board refuses to grant a license or

certificate to an applicant, revokes a license or certificate,	1122
or refuses to reinstate a license or certificate, the board may	1123
specify that its action is permanent. An individual subject to	1124
permanent action taken by the board is forever ineligible to	1125
hold a license or certificate of the type that was refused or	1126
revoked and the board shall not accept from the individual an	1127
application for reinstatement of the license or certificate or	1128
for a new license or certificate.	1129
(L) No unilateral surrender of a nursing license,	1130
<pre>certified midwife license, or dialysis technician certificate</pre>	1131
issued under this chapter shall be effective unless accepted by	1132
majority vote of the board. No application for a nursing	1133
license, certified midwife license, or dialysis technician	1134
certificate issued under this chapter may be withdrawn without a	1135
majority vote of the board. The board's jurisdiction to take	1136
disciplinary action under this section is not removed or limited	1137
when an individual has a license or certificate classified as	1138
inactive or fails to renew a license or certificate.	1139
(M) Sanctions shall not be imposed under division (B) (24)	1140
of this section against any licensee who waives deductibles and	1141
copayments as follows:	1142
(1) In compliance with the health benefit plan that	1143
expressly allows such a practice. Waiver of the deductibles or	1144
copayments shall be made only with the full knowledge and	1145
consent of the plan purchaser, payer, and third-party	1146
administrator. Documentation of the consent shall be made	1147
available to the board upon request.	1148
(2) For professional services rendered to any other person	1149
licensed pursuant to this chapter to the extent allowed by this	1150
chapter and the rules of the board.	1151

Sec. 4723.282. (A) As used in this section, "practice	1152
deficiency" means any activity that does not meet acceptable and	1153
prevailing standards of safe and effective nursing care or	1154
dialysis care or safe and effective care as a certified midwife.	1155
(B) The board of nursing may abstain from taking	1156
disciplinary action under section 4723.28 of the Revised Code	1157
against the holder of a license or certificate issued under this	1158
chapter who has a practice deficiency that has been identified	1159
by the board through an investigation conducted under section	1160
4723.28 of the Revised Code. The board may abstain from taking	1161
action only if the board has reason to believe that the	1162
individual's practice deficiency can be corrected through	1163
remediation, and if the individual enters into an agreement with	1164
the board to seek remediation as prescribed by the board,	1165
complies with the terms and conditions of the remediation, and	1166
successfully completes the remediation. If an individual fails	1167
to complete the remediation or the board determines that	1168
remediation cannot correct the individual's practice deficiency,	1169
the board shall proceed with disciplinary action in accordance	1170
with section 4723.28 of the Revised Code.	1171
(C) To implement its authority under this section to	1172
abstain from taking disciplinary action, the board shall	1173
establish a practice intervention and improvement program. The	1174
board shall designate an administrator to operate the program	1175
and, in accordance with Chapter 119. of the Revised Code, adopt	1176
rules for the program that establish the following:	1177
(1) Criteria for use in identifying an individual's	1178
<pre>practice deficiency;</pre>	1179
(2) Requirements that an individual must meet to be	1180
eligible for remediation and the board's abstention from	1181

disciplinary action;	1182
(3) Standards and procedures for prescribing remediation	1183
that is appropriate for an individual's identified practice	1184
deficiency;	1185
(4) Terms and conditions that an individual must meet to	1186
be successful in completing the remediation prescribed;	1187
(5) Procedures for the board's monitoring of the	1188
<pre>individual's remediation;</pre>	1189
(6) Procedures for maintaining confidential records	1190
regarding individuals who participate in remediation;	1191
(7) Any other requirements or procedures necessary to	1192
develop and administer the program.	1193
(D) All records held by the board for purposes of the	1194
program shall be confidential, are not public records for	1195
purposes of section 149.43 of the Revised Code, and are not	1196
subject to discovery by subpoena or admissible as evidence in	1197
any judicial proceeding. The administrator of the program shall	1198
maintain all records in the board's office in accordance with	1199
the board's record retention schedule.	1200
(E) When an individual begins the remediation prescribed	1201
by the board, the individual shall sign a waiver permitting any	1202
entity that provides services related to the remediation to	1203
release to the board information regarding the individual's	1204
progress. An entity that provides services related to	1205
remediation shall report to the board if the individual fails to	1206
complete the remediation or does not make satisfactory progress	1207
in remediation.	1208
In the absence of fraud or bad faith, an entity that	1209

reports to the board regarding an individual's practice	1210
deficiency, or progress or lack of progress in remediation, is	1211
not liable in damages to any person as a result of making the	1212
report.	1213
(F) An individual participating in remediation prescribed	1214
under this section is responsible for all financial obligations	1215
that may arise from obtaining or completing the remediation.	1216
Sec. 4723.33. A registered nurse, licensed practical	1217
nurse, <u>certified midwife</u> , dialysis technician, community health	1218
worker, or medication aide who in good faith makes a report	1219
under this chapter or any other provision of the Revised Code	1220
regarding a violation of this chapter or any other provision of	1221
the Revised Code, or participates in any investigation,	1222
administrative proceeding, or judicial proceeding resulting from	1223
the report, has the full protection against retaliatory action	1224
provided by sections 4113.51 to 4113.53 of the Revised Code.	1225
Sec. 4723.34. (A) A person or governmental entity that	1226
employs, or contracts directly or through another person or	1227
governmental entity for the provision of services by, registered	1228
nurses, licensed practical nurses, nurses holding multistate	1229
licenses to practice registered or licensed practical nursing	1230
issued pursuant to section 4723.11 of the Revised Code,	1231
certified midwives, dialysis technicians, medication aides, or	1232
certified community health workers and that knows or has reason	1233
to believe that a current or former employee or person providing	1234
services under a contract who holds a license or certificate	1235
issued under this chapter engaged in conduct that would be	1236
grounds for disciplinary action by the board of nursing under	1237
this chapter or rules adopted under it shall report to the board	1238
of nursing the name of such current or former employee or person	1239

providing services under a contract. The report shall be made on	1240
the person's or governmental entity's behalf by an individual	1241
licensed by the board who the person or governmental entity has	1242
designated to make such reports.	1243
A prosecutor in a case described in divisions (B)(3) to	1244

A prosecutor in a case described in divisions (B)(3) to (5) of section 4723.28 of the Revised Code, or in a case where 1245 the trial court issued an order of dismissal upon technical or 1246 procedural grounds of a charge of a misdemeanor committed in the 1247 course of practice, a felony charge, or a charge of gross 1248 1249 immorality or moral turpitude, who knows or has reason to believe that the person charged is licensed under this chapter 1250 to practice nursing as a registered nurse or as a licensed 1251 practical nurse, is licensed under this chapter to practice as a 1252 <u>certified midwife</u>, or holds a certificate issued under this 1253 chapter to practice as a dialysis technician shall notify the 1254 board of nursing of the charge. With regard to certified 1255 community health workers and medication aides, the prosecutor in 1256 a case involving a charge of a misdemeanor committed in the 1257 course of employment, a felony charge, or a charge of gross 1258 immorality or moral turpitude, including a case dismissed on 1259 technical or procedural grounds, who knows or has reason to 1260 believe that the person charged holds a community health worker 1261 or medication aide certificate issued under this chapter shall 1262 notify the board of the charge. 1263

Each notification from a prosecutor shall be made on forms 1264 prescribed and provided by the board. The report shall include 1265 the name and address of the license or certificate holder, the 1266 charge, and the certified court documents recording the action. 1267

(B) If any person or governmental entity fails to provide 1268 a report required by this section, the board may seek an order 1269

from a court of competent jurisdiction compelling submission of	1270
the report.	1271
Sec. 4723.341. (A) As used in this section, "person" has	1272
the same meaning as in section 1.59 of the Revised Code and also	1273
includes the board of nursing and its members and employees;	1274
health care facilities, associations, and societies; insurers;	1275
and individuals.	1276
(B) In the absence of fraud or bad faith, no person	1277
reporting to the board of nursing or testifying in an	1278
adjudication conducted under Chapter 119. of the Revised Code	1279
with regard to alleged incidents of negligence or malpractice or	1280
matters subject to this chapter or sections 3123.41 to 3123.50	1281
of the Revised Code and any applicable rules adopted under	1282
section 3123.63 of the Revised Code shall be subject to either	1283
of the following based on making the report or testifying:	1284
(1) Liability in damages in a civil action for injury,	1285
death, or loss to person or property;	1286
(2) Discipline or dismissal by an employer.	1287
(C) An individual who is disciplined or dismissed in	1288
violation of division (B)(2) of this section has the same rights	1289
and duties accorded an employee under sections 4113.52 and	1290
4113.53 of the Revised Code.	1291
(D) In the absence of fraud or bad faith, no professional	1292
association of registered nurses, advanced practice registered	1293
nurses, licensed practical nurses, <u>certified midwives</u> , dialysis	1294
technicians, community health workers, or medication aides that	1295
sponsors a committee or program to provide peer assistance to	1296
individuals with substance abuse problems, no representative or	1297
agent of such a committee or program, and no member of the board	1298

of nursing shall be liable to any person for damages in a civil	1299
action by reason of actions taken to refer a nurse, certified	1300
<pre>midwife, dialysis technician, community health worker, or</pre>	1301
medication aide to a treatment provider or actions or omissions	1302
of the provider in treating a nurse, certified midwife, dialysis	1303
technician, community health worker, or medication aide.	1304
Sec. 4723.35. (A) As used in this section, "substance use	1305
disorder" means either of the following:	1306
(1) The chronic and habitual use of alcoholic beverages to	1307
the extent that the user no longer can control the use of	1308
alcohol or endangers the user's health, safety, or welfare or	1309
that of others;	1310
(2) The use of a controlled substance as defined in	1311
section 3719.01 of the Revised Code, a harmful intoxicant as	1312
defined in section 2925.01 of the Revised Code, or a dangerous	1313
drug as defined in section 4729.01 of the Revised Code, to the	1314
extent that the user becomes physically or psychologically	1315
dependent on the substance, intoxicant, or drug or endangers the	1316
user's health, safety, or welfare or that of others.	1317
(B) The board of nursing may abstain from taking	1318
disciplinary action under section 4723.28 or 4723.86 of the	1319
Revised Code against an individual with a substance use disorder	1320
if it finds that the individual can be treated effectively and	1321
there is no impairment of the individual's ability to practice	1322
according to acceptable and prevailing standards of safe care.	1323
The board shall establish a substance use disorder monitoring	1324
program to monitor the registered nurses, licensed practical	1325
nurses, certified midwives, dialysis technicians, and certified	1326
community health workers against whom the board has abstained	1327
from taking action. The board shall either develop the program,	1328

select the program's name, and designate a coordinator to	1329
administer the program or, in the alternative, the board may	1330
contract with a third-party vendor to administer the program.	1331
(C) Determinations regarding an individual's eligibility	1332
for admission to, continued participation in, and successful	1333
completion of the monitoring program shall be made by the	1334
board's supervising member for disciplinary matters in	1335
accordance with rules adopted under division (D) of this	1336
section.	1337
(D) The board shall adopt rules in accordance with Chapter	1338
119. of the Revised Code that establish the following:	1339
(1) Eligibility requirements for admission to and	1340
continued participation in the monitoring program;	1341
(2) Terms and conditions that must be met to participate	1342
in and successfully complete the program;	1343
(3) Procedures for keeping confidential records regarding	1344
participants;	1345
(4) Any other requirements or procedures necessary to	1346
establish and administer the program.	1347
(E)(1) As a condition of being admitted to the monitoring	1348
program, an individual shall surrender to the program	1349
coordinator the license or certificate that the individual	1350
holds. While the surrender is in effect, the individual is	1351
prohibited from engaging in the practice of nursing, engaging in	1352
practice as a certified midwife, engaging in the provision of	1353
dialysis care, or engaging in the provision of services that	1354
were being provided as a certified community health worker.	1355
If the board's supervising member for disciplinary matters	1356

determines that a participant is capable of resuming practice	1357
according to acceptable and prevailing standards of safe care,	1358
the program coordinator shall return the participant's license	1359
or certificate. If the participant violates the terms and	1360
conditions of resumed practice, the coordinator shall require	1361
the participant to surrender the license or certificate as a	1362
condition of continued participation in the program. The	1363
coordinator may require the surrender only on the approval of	1364
the board's supervising member for disciplinary matters.	1365
The surrender of a license or certificate on admission to	1366

The surrender of a license or certificate on admission to the monitoring program or while participating in the program does not constitute an action by the board under section 4723.28 or 4723.86 of the Revised Code. The participant may rescind the surrender at any time and the board may proceed by taking action under section 4723.28 or 4723.86 of the Revised Code.

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- (2) If the program coordinator or third-party vendor 1372 determines that a participant is significantly out of compliance 1373 with the terms and conditions for participation, the coordinator 1374 or other staff designated by the board shall notify the board's 1375 supervising member for disciplinary matters and the supervising 1376 member shall determine whether to temporarily suspend the 1377 participant's license or certificate. The board shall notify the 1378 participant of the suspension by certified mail sent to the 1379 participant's last known address and shall refer the matter to 1380 the board for formal action under section 4723.28 or 4723.86 of 1381 the Revised Code. 1382
- (F) All of the following apply with respect to the 1383 receipt, release, and maintenance of records and information by 1384 the monitoring program: 1385
 - (1) The program coordinator or third-party vendor shall

maintain all program records in a manner that protects the	1387
confidentiality of the record, and for each participant, shall	1388
retain the records for a period of two years following the	1389
participant's date of successful completion of the program.	1390
(2) When applying to participate in the monitoring	1391
program, the applicant shall sign a waiver permitting the board	1392
to receive and release information necessary to determine	1393
whether the individual is eligible for admission. After being	1394
admitted, the participant shall sign a waiver permitting the	1395
board to receive and release information necessary to determine	1396
whether the individual is eligible for continued participation	1397
in the program. Information that may be necessary for the	1398
board's supervising member for disciplinary matters to determine	1399
eligibility for admission or continued participation in the	1400
monitoring program includes, but is not limited to, information	1401
provided to and by employers, probation officers, law	1402
enforcement agencies, peer assistance programs, health	1403
professionals, and treatment providers. No entity with knowledge	1404
that the information has been provided to the monitoring program	1405
shall divulge that knowledge to any other person.	1406
(3) Except as provided in division (F)(4) of this section,	1407
all records pertaining to an individual's application for or	1408
participation in the monitoring program, including medical	1409
records, treatment records, and mental health records, shall be	1410
confidential. The records are not public records for the	1411
purposes of section 149.43 of the Revised Code and are not	1412

(4) The board may disclose information regarding a 1415 participant's progress in the program to any person or 1416

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subject to discovery by subpoena or admissible as evidence in

any judicial proceeding.

government entity that the participant authorizes in writing to	1417
be given the information. In disclosing information under this	1418
division, the board shall not include any information that is	1419
protected under section 5119.27 of the Revised Code or any	1420
federal statute or regulation that provides for the	1421
confidentiality of medical, mental health, or substance abuse	1422
records.	1423
(G) In the absence of fraud or bad faith, the board as a	1424
whole, its individual members, and its employees and	1425
representatives are not liable for damages in any civil action	1426
as a result of disclosing information in accordance with	1427
division (F)(4) of this section. In the absence of fraud or bad	1428
faith, any person reporting to the program with regard to an	1429
individual's substance use disorder, or the progress or lack of	1430
progress of that individual with regard to treatment, is not	1431
liable for damages in any civil action as a result of the	1432
report.	1433
Sec. 4723.41. (A) Each person who desires to practice	1434
nursing as a certified nurse-midwife and has not been authorized	1435
to practice midwifery nurse-midwifery prior to December 1, 1967,	1436
and each person who desires to practice nursing as a certified	1437
registered nurse anesthetist, clinical nurse specialist, or	1438
certified nurse practitioner shall file with the board of	1439
nursing a written application for a license to practice nursing	1440
as an advanced practice registered nurse and designation in the	1441
desired specialty. The application must be filed, under oath, on	1442
a form prescribed by the board accompanied by the application	1443
fee required by section 4723.08 of the Revised Code.	1444
Except as provided in division (B), (C), or (D) of this	1445

section, at the time of making application, the applicant shall

meet all of the following requirements:	1447
(1) Be a registered nurse;	1448
(2) Submit documentation satisfactory to the board that	1449
the applicant has earned a master's or doctoral degree with a	1450
major in a nursing specialty or in a related field that	1451
qualifies the applicant to sit for the certification examination	1452
of a national certifying organization approved by the board	1453
under section 4723.46 of the Revised Code;	1454
(3) Submit documentation satisfactory to the board of	1455
having passed the certification examination of a national	1456
certifying organization approved by the board under section	1457
4723.46 of the Revised Code to examine and certify, as	1458
applicable, nurse-midwives, registered nurse anesthetists,	1459
clinical nurse specialists, or nurse practitioners;	1460
(4) Submit an affidavit with the application that states	1461
all of the following:	1462
(a) That the applicant is the person named in the	1463
documents submitted under this section and is the lawful	1464
possessor thereof;	1465
(b) The applicant's age, residence, the school at which	1466
the applicant obtained education in the applicant's nursing	1467
specialty, and any other facts that the board requires;	1468
(c) The specialty in which the applicant seeks	1469
designation.	1470
(B)(1) A certified registered nurse anesthetist, clinical	1471
nurse specialist, certified nurse-midwife, or certified nurse	1472
practitioner who is practicing or has practiced as such in	1473
another jurisdiction other than another state may apply for a	1474

license by endorsement to practice nursing as an advanced	1475
practice registered nurse and designation as a certified	1476
registered nurse anesthetist, clinical nurse specialist,	1477
certified nurse-midwife, or certified nurse practitioner in this	1478
state if the nurse meets the requirements set forth in division	1479
(A) of this section or division (B)(2) of this section.	1480
(2) If an applicant who is practicing or has practiced in	1481
another jurisdiction other than another state applies for	1482
designation under division (B)(2) of this section, the	1483
application shall be submitted to the board in the form	1484
prescribed by rules of the board and be accompanied by the	1485
application fee required by section 4723.08 of the Revised Code.	1486
The application shall include evidence that the applicant meets	1487
the requirements of division (B)(2) of this section, holds	1488
authority to practice nursing and is in good standing in another	1489
jurisdiction other than another state granted after meeting	1490
requirements approved by the entity of that jurisdiction that	1491
regulates nurses, and other information required by rules of the	1492
board of nursing.	1493
With respect to the educational requirements and national	1494
certification requirements that an applicant under division (B)	1495
(2) of this section must meet, both of the following apply:	1496
(a) If the applicant is a certified registered nurse	1497
anesthetist, certified nurse-midwife, or certified nurse	1498
practitioner who, on or before December 31, 2000, obtained	1499
certification in the applicant's nursing specialty with a	1500
national certifying organization listed in division (A)(3) of	1501
section 4723.41 of the Revised Code as that division existed	1502
prior to March 20, 2013, or that was at that time approved by	1503

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the board under section 4723.46 of the Revised Code, the

applicant must have maintained the certification. The applicant	1505
is not required to have earned a master's or doctoral degree	1506
with a major in a nursing specialty or in a related field that	1507
qualifies the applicant to sit for the certification	1508
examination.	1509
(b) If the applicant is a clinical nurse specialist, one	1510
of the following must apply to the applicant:	1511
(i) On or before December 31, 2000, the applicant obtained	1512
a master's or doctoral degree with a major in a clinical area of	1513
nursing from an educational institution accredited by a national	1514
or regional accrediting organization. The applicant is not	1515
required to have passed a certification examination.	1516
(ii) On or before December 31, 2000, the applicant	1517
obtained a master's or doctoral degree in nursing or a related	1518
field and was certified as a clinical nurse specialist by the	1519
American nurses credentialing center or another national	1520
certifying organization that was at that time approved by the	1521
board under section 4723.46 of the Revised Code.	1522
(3) The board shall grant a license to practice nursing as	1523
an advanced practice registered nurse in accordance with Chapter	1524
4796. of the Revised Code to an applicant if either of the	1525
following applies:	1526
(a) The applicant holds a license in another state.	1527
(b) The applicant has satisfactory work experience, a	1528
government certification, or a private certification as	1529
described in that chapter as an advanced practice registered	1530
nurse in a state that does not issue that license.	1531
(4) The board may grant a nonrenewable temporary permit to	1532
practice nursing as an advanced practice registered nurse to an	1533

applicant for licensure under division (B)(2) or (3) of this	1534
section if the board is satisfied by the evidence that the	1535
applicant holds a valid, unrestricted license in or equivalent	1536
authorization from another jurisdiction. Chapter 4796. of the	1537
Revised Code does not apply to a temporary permit issued under	1538
this division. The temporary permit shall expire at the earlier	1539
of one hundred eighty days after issuance or upon the issuance	1540
of a license under division (B)(2) or (3) of this section.	1541
(C) An applicant who desires to practice nursing as a	1542
certified registered nurse anesthetist, certified nurse-midwife,	1543
or certified nurse practitioner is exempt from the educational	1544
requirements in division (A)(2) of this section if all of the	1545
following are the case:	1546
(1) Before January 1, 2001, the board issued to the	1547
applicant a certificate of authority to practice as a certified	1548
registered nurse anesthetist, certified nurse-midwife, or	1549
certified nurse practitioner;	1550
(2) The applicant submits documentation satisfactory to	1551
the board that the applicant obtained certification in the	1552
applicant's nursing specialty with a national certifying	1553
organization listed in division (A)(3) of section 4723.41 of the	1554
Revised Code as that division existed prior to March 20, 2013,	1555
or that was at that time approved by the board under section	1556
4723.46 of the Revised Code;	1557
(3) The applicant submits documentation satisfactory to	1558
the board that the applicant has maintained the certification	1559
described in division (C)(2) of this section.	1560

(D) An applicant who desires to practice as a clinical

nurse specialist is exempt from the examination requirement in

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division (A)(3) of this section if both of the following are the	1563
case:	1564
(1) Before January 1, 2001, the board issued to the	1565
applicant a certificate of authority to practice as a clinical	1566
nurse specialist;	1567
(2) The applicant submits documentation satisfactory to	1568
the board that the applicant earned either of the following:	1569
(a) A master's or doctoral degree with a major in a	1570
clinical area of nursing from an educational institution	1571
accredited by a national or regional accrediting organization;	1572
(b) A master's or doctoral degree in nursing or a related	1573
field and was certified as a clinical nurse specialist by the	1574
American nurses credentialing center or another national	1575
certifying organization that was at that time approved by the	1576
board under section 4723.46 of the Revised Code.	1577
Sec. 4723.43. A certified registered nurse anesthetist,	1578
clinical nurse specialist, certified nurse-midwife, or certified	1579
nurse practitioner may provide to individuals and groups nursing	1580
care that requires knowledge and skill obtained from advanced	1581
formal education and clinical experience. In this capacity as an	1582
advanced practice registered nurse, a certified nurse-midwife is	1583
subject to division (A) of this section, a certified registered	1584
nurse anesthetist is subject to division (B) of this section, a	1585
certified nurse practitioner is subject to division (C) of this	1586
section, and a clinical nurse specialist is subject to division	1587
(D) of this section.	1588
(A) A-Subject to sections 4723.58 to 4723.584 of the	1589
Revised Code, a nurse authorized to practice as a certified	1590
nurse-midwife, in collaboration with one or more physicians, may	1591

provide the management of preventive services and those primary	1592
care services necessary to provide health care to women	1593
antepartally, intrapartally, postpartally, and gynecologically,	1594
consistent with the nurse's education and certification, and in	1595
accordance with rules adopted by the board of nursing.	1596
No certified nurse-midwife may perform version, deliver-	1597
breech or face presentation, use forceps, do any obstetric	1598
operation, or treat any other abnormal condition, except in	1599
emergencies. No certified nurse-midwife may deliver breech or	1600
face presentation except in an emergency or as provided in	1601
section 4723.581 of the Revised Code. Division (A) of this	1602
section does not prohibit a certified nurse-midwife from	1603
performing episiotomies or normal vaginal deliveries, or	1604
repairing vaginal tears. A certified nurse-midwife may, in	1605
collaboration with one or more physicians, prescribe drugs and	1606
therapeutic devices in accordance with section 4723.481 of the	1607
Revised Code. A certified nurse-midwife may, in collaboration	1608
with one or more physicians, attend births in hospitals, homes,	1609
medical offices, and freestanding birthing centers and provide	1610
care for normal newborns during the first twenty-eight days of	1611
life.	1612
(B) A nurse authorized to practice as a certified	1613
registered nurse anesthetist, consistent with the nurse's	1614
education and certification and in accordance with rules adopted	1615
by the board, may do the following:	1616
(1) With supervision and in the immediate presence of a	1617
physician, podiatrist, or dentist, administer anesthesia and	1618
perform anesthesia induction, maintenance, and emergence;	1619
(2) With supervision, obtain informed consent for	1620
anesthesia care and perform preanesthetic preparation and	1621

evaluation, postanesthetic preparation and evaluation,	1622
postanesthesia care, and, subject to section 4723.433 of the	1623
Revised Code, clinical support functions;	1624
(3) With supervision and in accordance with section	1625
4723.434 of the Revised Code, engage in the activities described	1626
in division (A) of that section.	1627
The physician, podiatrist, or dentist supervising a	1628
certified registered nurse anesthetist must be actively engaged	1629
in practice in this state. When a certified registered nurse	1630
anesthetist is supervised by a podiatrist, the nurse's scope of	1631
practice is limited to the anesthesia procedures that the	1632
podiatrist has the authority under section 4731.51 of the	1633
Revised Code to perform. A certified registered nurse	1634
anesthetist may not administer general anesthesia under the	1635
supervision of a podiatrist in a podiatrist's office. When a	1636
certified registered nurse anesthetist is supervised by a	1637
dentist, the nurse's scope of practice is limited to the	1638
anesthesia procedures that the dentist has the authority under	1639
Chapter 4715. of the Revised Code to perform.	1640
(C) A nurse authorized to practice as a certified nurse	1641
practitioner, in collaboration with one or more physicians or	1642
podiatrists, may provide preventive and primary care services,	1643
provide services for acute illnesses, and evaluate and promote	1644
patient wellness within the nurse's nursing specialty,	1645
consistent with the nurse's education and certification, and in	1646
accordance with rules adopted by the board. A certified nurse	1647
practitioner may, in collaboration with one or more physicians	1648
or podiatrists, prescribe drugs and therapeutic devices in	1649
accordance with section 4723.481 of the Revised Code.	1650
When a certified nurse practitioner is collaborating with	1651

a podiatrist, the nurse's scope of practice is limited to the	1652
procedures that the podiatrist has the authority under section	1653
4731.51 of the Revised Code to perform.	1654
(D) A nurse authorized to practice as a clinical nurse	1655
specialist, in collaboration with one or more physicians or	1656
podiatrists, may provide and manage the care of individuals and	1657
groups with complex health problems and provide health care	1658
services that promote, improve, and manage health care within	1659
the nurse's nursing specialty, consistent with the nurse's	1660
education and in accordance with rules adopted by the board. A	1661
clinical nurse specialist may, in collaboration with one or more	1662
physicians or podiatrists, prescribe drugs and therapeutic	1663
devices in accordance with section 4723.481 of the Revised Code.	1664
When a clinical nurse specialist is collaborating with a	1665
podiatrist, the nurse's scope of practice is limited to the	1666
procedures that the podiatrist has the authority under section	1667
4731.51 of the Revised Code to perform.	1668
Sec. 4723.431. (A) (1) An A certified midwife or an	1669
advanced practice registered nurse who is designated as a	1670
clinical nurse specialist, certified nurse-midwife, or certified	1671
nurse practitioner may practice only in accordance with a	1672
standard care arrangement entered into with each physician or	1673
podiatrist with whom the <u>certified midwife or</u> nurse	1674
collaborates. A copy of the standard care arrangement shall be	1675
retained on file by the <u>certified midwife's or nurse's employer.</u>	1676
Prior approval of the standard care arrangement by the board of	1677
nursing is not required, but the board may periodically review	1678
it for compliance with this section.	1679
A <u>certified midwife</u> , clinical nurse specialist, certified	1680

nurse-midwife, or certified nurse practitioner may enter into a

standard care arrangement with one or more collaborating	1682
physicians or podiatrists. If a collaborating physician or	1683
podiatrist enters into standard care arrangements with more than	1684
five <u>certified midwives or </u> nurses, the physician or podiatrist	1685
shall not collaborate at the same time with more than five	1686
certified midwives or nurses in the prescribing component of	1687
their practices.	1688
Not later than thirty days after first engaging in the	1689
practice of midwifery as a certified midwife or the practice of	1690
nursing as a clinical nurse specialist, certified nurse-midwife,	1691
or certified nurse practitioner, the <u>certified midwife or</u> nurse	1692
shall submit to the board the name and business address of each	1693
collaborating physician or podiatrist. Thereafter, the <u>certified</u>	1694
<pre>midwife or nurse shall notify the board of any additions or</pre>	1695
deletions to the <u>certified midwife's or</u> nurse's collaborating	1696
physicians or podiatrists. Except as provided in division (D) of	1697
this section, the notice must be provided not later than thirty	1698
days after the change takes effect.	1699
(2) All of the following conditions apply with respect to	1700
the practice of a collaborating physician or podiatrist with	1701
whom a <u>certified midwife</u> , clinical nurse specialist, certified	1702
nurse-midwife, or certified nurse practitioner may enter into a	1703
standard care arrangement:	1704
(a) The physician or podiatrist must be authorized to	1705
practice in this state.	1706
(b) Except as provided in division (A)(2)(c) of this	1707
section, the physician or podiatrist must be practicing in a	1708
specialty that is the same as or similar to the certified	1709

1710

midwife's specialty or nurse's nursing specialty.

(c) If the nurse is a clinical nurse specialist who is	1711
certified as a psychiatric-mental health CNS by the American	1712
nurses credentialing center or a certified nurse practitioner	1713
who is certified as a psychiatric-mental health NP by the	1714
American nurses credentialing center, the nurse may enter into a	1715
standard care arrangement with a physician but not a podiatrist	1716
and the collaborating physician must be practicing in one of the	1717
following specialties:	1718
(i) Psychiatry;	1719
(ii) Pediatrics;	1720
(iii) Primary care or family practice.	1721
(B) A standard care arrangement shall be in writing and	1722
shall contain all of the following:	1723
(1) Criteria for referral of a patient by the <u>certified</u>	1724
<pre>midwife, clinical nurse specialist, certified nurse-midwife, or</pre>	1725
certified nurse practitioner to a collaborating physician or	1726
podiatrist or another physician or podiatrist;	1727
(2) A process for the <u>certified midwife</u> , clinical nurse	1728
specialist, certified nurse-midwife, or certified nurse	1729
practitioner to obtain a consultation with a collaborating	1730
physician or podiatrist or another physician or podiatrist;	1731
(3) A plan for coverage in instances of emergency or	1732
planned absences of either the <u>certified midwife</u> , clinical nurse	1733
specialist, certified nurse-midwife, or certified nurse	1734
practitioner or a collaborating physician or podiatrist that	1735
provides the means whereby a physician or podiatrist is	1736
available for emergency care;	1737
(4) The process for resolution of disagreements regarding	1738

matters of patient management between the <u>certified midwife</u> ,	1739
clinical nurse specialist, certified nurse-midwife, or certified	1740
nurse practitioner and a collaborating physician or podiatrist;	1741
(5) Any other criteria required by rule of the board	1742
adopted pursuant to section 4723.07 or 4723.50 of the Revised	1743
Code.	1744
(C)(1) A standard care arrangement entered into pursuant	1745
to this section may permit a clinical nurse specialist,	1746
certified nurse-midwife, or certified nurse practitioner to	1747
supervise services provided by a home health agency as defined	1748
in section 3740.01 of the Revised Code.	1749
(2) A standard care arrangement entered into pursuant to	1750
this section may permit a clinical nurse specialist, certified	1751
nurse-midwife, or certified nurse practitioner to admit a	1752
patient to a hospital in accordance with section 3727.06 of the	1753
Revised Code.	1754
(D)(1) Except as provided in division (D)(2) of this	1755
section, if a physician or podiatrist terminates the	1756
collaboration between the physician or podiatrist and a	1757
<pre>certified midwife, certified nurse-midwife, certified nurse</pre>	1758
practitioner, or clinical nurse specialist before their standard	1759
care arrangement expires, all of the following apply:	1760
(a) The physician or podiatrist must give the <u>certified</u>	1761
<pre>midwife or nurse written or electronic notice of the</pre>	1762
termination.	1763
(b) Once the <u>certified midwife or</u> nurse receives the	1764
termination notice, the <u>certified midwife or</u> nurse must notify	1765
the board of nursing of the termination as soon as practicable	1766
by submitting to the board a copy of the physician's or	1767

podiatrist's termination notice. 1768

- (c) Notwithstanding the requirement requirements of 1769 section 4723.43 and 4723.57 of the Revised Code that the 1770 certified midwife or nurse practice in collaboration with a 1771 physician or podiatrist, the <u>certified midwife or nurse may</u> 1772 continue to practice under the existing standard care 1773 arrangement without a collaborating physician or podiatrist for 1774 not more than one hundred twenty days after submitting to the 1775 board a copy of the termination notice. 1776
- (2) In the event that the collaboration between a 1777 physician or podiatrist and a certified midwife, certified 1778 nurse-midwife, certified nurse practitioner, or clinical nurse 1779 specialist terminates because of the physician's or podiatrist's 1780 death, the certified midwife or nurse must notify the board of 1781 the death as soon as practicable. The <u>certified midwife or nurse</u> 1782 may continue to practice under the existing standard care 1783 arrangement without a collaborating physician or podiatrist for 1784 not more than one hundred twenty days after notifying the board 1785 of the physician's or podiatrist's death. 1786
- (E) Nothing in this section prohibits a hospital from 1787 hiring a certified midwife, clinical nurse specialist, certified 1788 nurse-midwife, or certified nurse practitioner as an employee 1789 and negotiating standard care arrangements on behalf of the 1790 employee as necessary to meet the requirements of this section. 1791 A standard care arrangement between the hospital's employee and 1792 the employee's collaborating physician is subject to approval by 1793 the medical staff and governing body of the hospital prior to 1794 implementation of the arrangement at the hospital. 1795
- Sec. 4723.432. (A) An—A certified midwife or an advanced 1796 practice registered nurse who is designated as a clinical nurse 1797

specialist, certified nurse-midwife, or certified nurse	1798
practitioner shall cooperate with the state medical board in any	1799
investigation the board conducts with respect to a physician or	1800
podiatrist who collaborates with the <u>certified midwife or nurse</u> .	1801
The <u>certified</u> <u>midwife or </u> nurse shall cooperate with the board in	1802
any investigation the board conducts with respect to the	1803
unauthorized practice of medicine by the <u>certified midwife or</u>	1804
nurse.	1805
(B) An advanced practice registered nurse who is	1806
designated as a certified registered nurse anesthetist shall	1807
cooperate with the state medical board or state dental board in	1808
any investigation either board conducts with respect to a	1809
physician, podiatrist, or dentist who permits the nurse to	1810
practice with the supervision of that physician, podiatrist, or	1811
dentist. The nurse shall cooperate with either board in any	1812
investigation it conducts with respect to the unauthorized	1813
practice of medicine or dentistry by the nurse.	1814
Sec. 4723.481. This section establishes standards and	1815
conditions regarding the authority of an advanced practice	1816
registered nurse who is designated as a clinical nurse	1817
specialist, certified nurse-midwife, or certified nurse	1818
practitioner to prescribe and personally furnish drugs and	1819
therapeutic devices under a license issued under section 4723.42	1820
of the Revised Code.	1821
This section also establishes standards and conditions	1822
regarding the authority of a certified midwife to prescribe and	1823
personally furnish drugs and therapeutic devices under a license	1824
issued under section 4723.56 of the Revised Code.	1825
(A) A clinical nurse specialist, certified nurse-midwife,	1826
or certified nurse practitioner, or certified midwife shall not	1827

prescribe or furnish any drug or therapeutic device that is	1828
listed on the exclusionary formulary established in rules	1829
adopted under section 4723.50 of the Revised Code.	1830
(B) The prescriptive authority of a clinical nurse	1831
specialist, certified nurse-midwife, or -certified nurse	1832
practitioner, or certified midwife shall not exceed the	1833
prescriptive authority of the collaborating physician or	1834
podiatrist, including the collaborating physician's authority to	1835
treat chronic pain with controlled substances and products	1836
containing tramadol as described in section 4731.052 of the	1837
Revised Code.	1838
(C)(1) Except as provided in division (C)(2) or (3) of	1839
this section, a clinical nurse specialist, certified nurse-	1840
midwife, or certified nurse practitioner, or certified midwife	1841
may prescribe to a patient a schedule II controlled substance	1842
only if all of the following are the case:	1843
(a) The patient has a terminal condition, as defined in	1844
section 2133.01 of the Revised Code.	1845
(b) A physician initially prescribed the substance for the	1846
patient.	1847
(c) The prescription is for an amount that does not exceed	1848
the amount necessary for the patient's use in a single, seventy-	1849
two-hour period.	1850
(2) The restrictions on prescriptive authority in division	1851
(C)(1) of this section do not apply if a clinical nurse	1852
specialist, certified nurse-midwife, or certified nurse	1853
practitioner, or certified midwife issues the prescription to	1854
the patient from any of the following entities:	1855
(a) A hospital as defined in section 3722.01 of the	1856

Revised Code;	1857
(b) An entity owned or controlled, in whole or in part, by	1858
a hospital or by an entity that owns or controls, in whole or in	1859
part, one or more hospitals;	1860
(c) A health care facility operated by the department of	1861
mental health and addiction services or the department of	1862
developmental disabilities;	1863
(d) A nursing home licensed under section 3721.02 of the	1864
Revised Code or by a political subdivision certified under	1865
section 3721.09 of the Revised Code;	1866
(e) A county home or district home operated under Chapter	1867
5155. of the Revised Code that is certified under the medicare	1868
or medicaid program;	1869
(f) A hospice care program, as defined in section 3712.01	1870
of the Revised Code;	1871
(g) A community mental health services provider, as	1872
defined in section 5122.01 of the Revised Code;	1873
(h) An ambulatory surgical facility, as defined in section	1874
3702.30 of the Revised Code;	1875
(i) A freestanding birthing center, as defined in section	1876
3701.503 of the Revised Code;	1877
(j) A federally qualified health center, as defined in	1878
section 3701.047 of the Revised Code;	1879
(k) A federally qualified health center look-alike, as	1880
defined in section 3701.047 of the Revised Code;	1881
(1) A health care office or facility operated by the board	1882
of health of a city or general health district or the authority	1883

having the duties of a board of health under section 3709.05 of	1884
the Revised Code;	1885
(m) A site where a medical practice is operated, but only	1886
if the practice is comprised of one or more physicians who also	1887
are owners of the practice; the practice is organized to provide	1888
direct patient care; and the clinical nurse specialist,	1889
certified nurse-midwife, or certified nurse practitioner, or	1890
certified midwife providing services at the site has a standard	1891
care arrangement and collaborates with at least one of the	1892
physician owners who practices primarily at that site;	1893
(n) A site where a behavioral health practice is operated	1894
that does not qualify as a location otherwise described in	1895
division (C)(2) of this section, but only if the practice is	1896
organized to provide outpatient services for the treatment of	1897
mental health conditions, substance use disorders, or both, and	1898
the clinical nurse specialist, certified nurse-midwife, or-	1899
certified nurse practitioner, or certified midwife providing	1900
services at the site of the practice has a standard care	1901
arrangement and collaborates with at least one physician who is	1902
employed by that practice;	1903
(o) A residential care facility, as defined in section	1904
3721.01 of the Revised Code.	1905
(3) A clinical nurse specialist, certified nurse-midwife,	1906
or certified nurse practitioner, or certified midwife shall not	1907
issue to a patient a prescription for a schedule II controlled	1908
substance from a convenience care clinic even if the clinic is	1909
owned or operated by an entity specified in division (C)(2) of	1910
this section.	1911
(D) A pharmacist who acts in good faith reliance on a	1912

prescription issued by a clinical nurse specialist, certified	1913
nurse-midwife, or certified nurse practitioner, or certified	1914
<pre>midwife under division (C)(2) of this section is not liable for</pre>	1915
or subject to any of the following for relying on the	1916
prescription: damages in any civil action, prosecution in any	1917
criminal proceeding, or professional disciplinary action by the	1918
state board of pharmacy under Chapter 4729. of the Revised Code.	1919
(E) A clinical nurse specialist, certified nurse-midwife,	1920
or certified nurse practitioner, or certified midwife shall	1921
comply with section 3719.061 of the Revised Code if the nurse	1922
prescribes for a minor, as defined in that section, an opioid	1923
analgesic, as defined in section 3719.01 of the Revised Code.	1924
Sec. 4723.483. (A) (1) Subject to division (A) (2) of this	1925
section, and notwithstanding any provision of this chapter or	1926
rule adopted by the board of nursing, a clinical nurse	1927
specialist, certified nurse-midwife, or-certified nurse	1928
practitioner who holds a certificate to prescribe issued under	1929
section 4723.48 of the Revised Code, or certified midwife may do	1930
either of the following without having examined an individual to	1931
whom epinephrine may be administered:	1932
(a) Personally furnish a supply of epinephrine	1933
autoinjectors for use in accordance with sections 3313.7110,	1934
3313.7111, 3314.143, 3326.28, 3328.29, 3728.03 to 3728.05, and	1935
5101.76 of the Revised Code;	1936
(b) Issue a prescription for epinephrine autoinjectors for	1937
use in accordance with sections 3313.7110, 3313.7111, 3314.143,	1938
3326.28, 3328.29, 3728.03 to 3728.05, and 5101.76 of the Revised	1939
Code.	1940

(2) An epinephrine autoinjector personally furnished or

prescribed under division (A)(1) of this section must be	1942
furnished or prescribed in such a manner that it may be	1943
administered only in a manufactured dosage form.	1944
(B) A nurse or certified midwife who acts in good faith in	1945
accordance with this section is not liable for or subject to any	1946
of the following for any action or omission of an entity to	1947
which an epinephrine autoinjector is furnished or a prescription	1948
is issued: damages in any civil action, prosecution in any	1949
criminal proceeding, or professional disciplinary action.	1950
Sec. 4723.487. (A) As used in this section:	1951
(1) "Drug database" means the database established and	1952
maintained by the state board of pharmacy pursuant to section	1953
4729.75 of the Revised Code.	1954
(2) "Opioid analgesic" and "benzodiazepine" have the same	1955
meanings as in section 3719.01 of the Revised Code.	1956
(B) Except as provided in divisions (C) and (E) of this	1957
section, an advanced practice registered nurse who is designated	1958
as a clinical nurse specialist, certified nurse-midwife, or	1959
certified nurse practitioner or a certified midwife shall comply	1960
with all of the following as conditions of prescribing a drug	1961
that is either an opioid analgesic or a benzodiazepine as part	1962
of a patient's course of treatment for a particular condition:	1963
(1) Before initially prescribing the drug, the advanced	1964
practice registered nurse or <u>certified midwife or</u> the advanced	1965
practice registered nurse's or certified midwife's delegate	1966
shall request from the drug database a report of information	1967
related to the patient that covers at least the twelve months	1968
immediately preceding the date of the request. If the advanced	1969
nractice registered nurse or certified midwife practices	1970

primarily in a county of this state that adjoins another state,	1971
the advanced practice registered nurse or certified midwife or	1972
delegate also shall request a report of any information	1973
available in the drug database that pertains to prescriptions	1974
issued or drugs furnished to the patient in the state adjoining	1975
that county.	1976
(2) If the patient's course of treatment for the condition	1977
continues for more than ninety days after the initial report is	1978
requested, the advanced practice registered nurse or certified	1979
<pre>midwife or delegate shall make periodic requests for reports of</pre>	1980
information from the drug database until the course of treatment	1981
has ended. The requests shall be made at intervals not exceeding	1982
ninety days, determined according to the date the initial	1983
request was made. The request shall be made in the same manner	1984
provided in division (B)(1) of this section for requesting the	1985
initial report of information from the drug database.	1986
(3) On receipt of a report under division (B)(1) or (2) of	1987
this section, the advanced practice registered nurse or	1988
<pre>certified midwife shall assess the information in the report.</pre>	1989
The advanced practice registered nurse or certified midwife	1990
shall document in the patient's record that the report was	1991
received and the information was assessed.	1992
(C) Division (B) of this section does not apply if in any	1993
of the following circumstances:	1994
(1) A drug database report regarding the patient is not	1995
available, in which case the advanced practice registered nurse	1996
or certified midwife shall document in the patient's record the	1997

(2) The drug is prescribed in an amount indicated for a

1998

1999

reason that the report is not available.

period not to exceed seven days.	2000
(3) The drug is prescribed for the treatment of cancer or	2001
another condition associated with cancer.	2002
(4) The drug is prescribed to a hospice patient in a	2003
hospice care program, as those terms are defined in section	2004
3712.01 of the Revised Code, or any other patient diagnosed as	2005
terminally ill.	2006
(5) The drug is prescribed for administration in a	2007
hospital, nursing home, or residential care facility.	2008
(D) The board of nursing may adopt rules, in accordance	2009
with Chapter 119. of the Revised Code, that establish standards	2010
and procedures to be followed by an advanced practice registered	2011
nurse or certified midwife regarding the review of patient	2012
information available through the drug database under division	2013
(A)(5) of section 4729.80 of the Revised Code. The rules shall	2014
be adopted in accordance with Chapter 119. of the Revised Code.	2015
(E) This section and any rules adopted under it do not	2016
apply if the state board of pharmacy no longer maintains the	2017
drug database.	2018
Sec. 4723.488. (A) Except as provided in division (B) of	2019
this section, in the case of a license holder who is seeking	2020
renewal of a license to practice nursing as an advanced practice	2021
registered nurse or a license to practice as a certified midwife	2022
and who prescribes opioid analgesics or benzodiazepines, as	2023
defined in section 3719.01 of the Revised Code, the holder shall	2024
certify to the board whether the holder has been granted access	2025
to the drug database established and maintained by the state	2026
board of pharmacy pursuant to section 4729.75 of the Revised	2027
Code.	2028

(B) The requirement in division (A) of this section does	2029
not apply if any of the following is the case:	2030
(1) The state board of pharmacy notifies the board of	2031
nursing pursuant to section 4729.861 of the Revised Code that	2032
the license holder has been restricted from obtaining further	2033
information from the drug database.	2034
(2) The state board of pharmacy no longer maintains the	2035
drug database.	2036
(3) The license holder does not practice nursing as an	2037
advanced practice registered nurse or certified midwife in this	2038
state.	2039
(C) If a license holder certifies to the board of nursing	2040
that the holder has been granted access to the drug database and	2041
the board finds through an audit or other means that the holder	2042
has not been granted access, the board may take action under	2043
section 4723.28 of the Revised Code.	2044
Sec. 4723.4810. (A) (1) Notwithstanding any conflicting	2045
provision of this chapter or rule adopted by the board of	2046
nursing, a clinical nurse specialist, certified nurse-midwife,	2047
or certified nurse practitioner, who holds a license to practice	2048
nursing as an advanced practice registered nurse issued under-	2049
section 4723.42 of the Revised Code or certified midwife may	2050
issue a prescription for or personally furnish a complete or	2051
partial supply of a drug to treat chlamydia, gonorrhea, or	2052
trichomoniasis, without having examined the individual for whom	2053
the drug is intended, if all of the following conditions are	2054
met:	2055
(a) The individual is a sexual partner of the nurse's or	2056
<pre>certified midwife's patient.</pre>	2057

(b) The patient has been diagnosed with chlamydia,	2058
gonorrhea, or trichomoniasis.	2059
(c) The patient reports to the nurse or certified midwife	2060
that the individual is unable or unlikely to be evaluated or	2061
treated by a health professional.	2062
(2) A prescription issued under this section shall include	2063
the individual's name and address, if known. If the nurse $\underline{\text{or}}$	2064
<pre>certified midwife is unable to obtain the individual's name and</pre>	2065
address, the prescription shall include the patient's name and	2066
address and the words "expedited partner therapy" or the letters	2067
"EPT."	2068
(3) A nurse or certified midwife may prescribe or	2069
personally furnish a drug under this section for not more than a	2070
total of two individuals who are sexual partners of the nurse's	2071
or certified midwife's patient.	2072
(B) For each drug prescribed or personally furnished under	2073
this section, the nurse or certified midwife shall do all of the	2074
following:	2075
(1) Provide the patient with information concerning the	2076
drug for the purpose of sharing the information with the	2077
individual, including directions for use of the drug and any	2078
side effects, adverse reactions, or known contraindications	2079
associated with the drug;	2080
(2) Recommend to the patient that the individual seek	2081
treatment from a health professional;	2082
(3) Document all of the following in the patient's record:	2083
(a) The name of the drug prescribed or furnished and its	2084
dosage;	2085

(b) That information concerning the drug was provided to	2086
the patient for the purpose of sharing the information with the	2087
individual;	2088
(c) If known, any adverse reactions the individual	2089
experiences from treatment with the drug.	2090
experiences from creatment with the drug.	2000
(C) A nurse or certified midwife who prescribes or	2091
personally furnishes a drug under this section may contact the	2092
individual for whom the drug is intended.	2093
(1) If the nurse or certified midwife contacts the	2094
individual, the nurse or certified midwife shall do all of the	2095
following:	2096
	0.005
(a) Inform the individual that the individual may have	2097
been exposed to chlamydia, gonorrhea, or trichomoniasis;	2098
(b) Encourage the individual to seek treatment from a	2099
health professional;	2100
(c) Explain the treatment options available to the	2101
individual, including treatment with a prescription drug,	2102
directions for use of the drug, and any side effects, adverse	2103
reactions, or known contraindications associated with the drug;	2104
(d) Document in the patient's record that the nurse or	2105
<pre>certified midwife contacted the individual.</pre>	2106
(2) If the nurse or certified midwife does not contact the	2107
individual, the nurse or certified midwife shall document that	2108
fact in the patient's record.	2109
(D) A nurse <u>or certified midwife</u> who in good faith	2110
prescribes or personally furnishes a drug under this section is	2111
not liable for or subject to any of the following:	2112

(1) Damages in any civil action;	2113
(2) Prosecution in any criminal proceeding;	2114
(3) Professional disciplinary action.	2115
Sec. 4723.4811. (A) (1) Subject to division (A) (2) of this	2116
section, and notwithstanding any provision of this chapter or	2117
rule adopted by the board of nursing, a clinical nurse	2118
specialist, certified nurse-midwife, or certified nurse	2119
practitioner licensed as an advanced practice registered nurse	2120
under Chapter 4723. of the Revised Code, or certified midwife	2121
may do either of the following without having examined an	2122
individual to whom glucagon may be administered:	2123
(a) Personally furnish a supply of injectable or nasally	2124
administered glucagon for use in accordance with sections	2125
3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5101.78 of	2126
the Revised Code;	2127
(b) Issue a prescription for injectable or nasally	2128
administered glucagon for use in accordance with sections	2129
3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5101.78 of	2130
the Revised Code.	2131
(2) Injectable or nasally administered glucagon personally	2132
furnished or prescribed under division (A)(1) of this section	2133
must be furnished or prescribed in such a manner that it may be	2134
administered only in a manufactured dosage form.	2135
(B) A nurse or certified midwife who acts in good faith in	2136
accordance with this section is not liable for or subject to any	2137
of the following for any action or omission of an entity to	2138
which injectable or nasally administered glucagon is furnished	2139
or a prescription is issued: damages in any civil action,	2140
prosecution in any criminal proceeding, or professional	2141

disciplinary action.	2142
Sec. 4723.50. (A) As used in this section:	2143
(1) "Controlled substance" has the same meaning as in	2144
section 3719.01 of the Revised Code.	2145
(2) "Medication-assisted treatment" has the same meaning	2146
as in section 340.01 of the Revised Code.	2147
(B) In accordance with Chapter 119. of the Revised Code,	2148
the board of nursing shall adopt rules as necessary to implement	2149
the provisions of this chapter pertaining to the authority of	2150
advanced practice registered nurses who are designated as	2151
clinical nurse specialists, certified nurse-midwives, and-	2152
certified nurse practitioners, and certified midwives to	2153
prescribe and furnish drugs and therapeutic devices.	2154
The board shall adopt rules establishing an exclusionary	2155
formulary. The exclusionary formulary shall permit, in a manner	2156
consistent with section 4723.481 of the Revised Code, the	2157
prescribing of controlled substances, including drugs that	2158
contain buprenorphine used in medication-assisted treatment and	2159
both oral and long-acting opioid antagonists. The formulary	2160
shall not permit the prescribing or furnishing of any of the	2161
following:	2162
(1) A drug or device to perform or induce an abortion;	2163
(2) A drug or device prohibited by federal or state law.	2164
(C) In addition to the rules described in division (B) of	2165
this section, the board shall adopt rules under this section	2166
that do the following:	2167
(1) Establish standards for board approval of the course	2168
of study in advanced pharmacology and related topics required by	2169

section sections 4723.482 and 4723.551 of the Revised Code;	2170
(2) Establish requirements for board approval of the two-	2171
hour course of instruction in the laws of this state as required	2172
under division (C)(1) of section 4723.482 of the Revised Code;	2173
(3) Establish criteria for the components of the standard	2174
care arrangements described in section 4723.431 of the Revised	2175
Code that apply to the authority to prescribe, including the	2176
components that apply to the authority to prescribe schedule II	2177
controlled substances. The rules shall be consistent with that	2178
section and include all of the following:	2179
(a) Quality assurance standards;	2180
(b) Standards for periodic review by a collaborating	2181
physician or podiatrist of the records of patients treated by	2182
the clinical nurse specialist, certified nurse-midwife, or-	2183
certified nurse practitioner, or certified midwife;	2184
(c) Acceptable travel time between the location at which	2185
the clinical nurse specialist, certified nurse-midwife, or-	2186
certified nurse practitioner, or certified midwife is engaging	2187
in the prescribing components of the nurse's practice and the	2188
location of the nurse's or certified midwife's collaborating	2189
physician or podiatrist.	2190
Sec. 4723.53. As used in sections 4723.53 to 4723.60 of	2191
<pre>the Revised Code:</pre>	2192
(A) "Accreditation commission for midwifery education"	2193
means the organization known by that name or its successor	2194
organization.	2195
(B) "American midwifery certification board" means the	2196
organization known by that name or its successor organization.	2197

Sec. 4723.54. (A) Except as provided in division (B) of	2198
this section, no individual shall knowingly practice as a	2199
certified midwife unless the individual holds a current, valid	2200
license to practice as a certified midwife issued under section	2201
4723.56 of the Revised Code.	2202
(B) Division (A) of this section does not apply to any of	2203
the following:	2204
(1) A physician authorized under Chapter 4731. of the	2205
Revised Code to practice medicine and surgery, osteopathic	2206
medicine and surgery, or podiatric medicine and surgery;	2207
(2) A physician assistant authorized under Chapter 4730.	2208
of the Revised Code to practice as a physician assistant;	2209
(3) A registered nurse, advanced practice registered	2210
nurse, or licensed practical nurse authorized under this chapter	2211
to practice nursing as a registered nurse, advanced practice	2212
registered nurse, or licensed practical nurse;	2213
(4) A licensed midwife;	2214
(5) A traditional midwife;	2215
(6) A student who is participating in a midwifery	2216
education program accredited by the accreditation commission for	2217
midwifery education and who provides midwifery services under	2218
the auspices of the program and under the supervision of a	2219
certified midwife serving for the program as a faculty member,	2220
instructor, teaching assistant, or preceptor.	2221
Sec. 4723.55. (A) An individual seeking a license to	2222
practice as a certified midwife shall file with the board of	2223
nursing an application in a manner prescribed by the board. The	2224
application shall include all the information the board	2225

considers necessary to process the application, including	2226
evidence satisfactory to the board that the applicant meets the	2227
requirements specified in division (B) of this section.	2228
(B) To be eligible to receive a license to practice as a	2229
certified midwife, an applicant shall demonstrate to the board	2230
that the applicant meets all of the following requirements:	2231
(1) Is at least eighteen years of age;	2232
(2) Has attained a master's degree or higher;	2233
(3) Has graduated from a midwifery education program	2234
accredited by the accreditation commission for midwifery	2235
<pre>education;</pre>	2236
(4) Is certified by the American midwifery certification	2237
<pre>board;</pre>	2238
(5) Is certified in neonatal and adult cardiopulmonary	2239
resuscitation;	2240
(6) Has successfully completed the course of study in	2241
advanced pharmacology required by section 4723.551 of the	2242
Revised Code.	2243
(C) The board shall review all applications received under	2244
this section. After receiving an application it considers	2245
complete, the board shall determine whether the applicant meets	2246
the requirements for a license to practice as a certified	2247
<pre>midwife.</pre>	2248
Sec. 4723.551. (A) An applicant for a license to practice	2249
as a certified midwife shall include with the application	2250
submitted under section 4723.55 of the Revised Code evidence of	2251
successfully completing the course of study in advanced	2252
pharmacology and related topics in accordance with the	2253

requirements specified in division (B) of this section.	2254
(B) With respect to the course of study in advanced	2255
pharmacology and related topics, all of the following	2256
<pre>requirements apply:</pre>	2257
(1) The course of study shall be completed not more than	2258
five years before the application is filed.	2259
(2) The course of study shall include at least forty-five	2260
<pre>contact hours.</pre>	2261
(3) The course of study shall meet the requirements to be	2262
approved by the board in accordance with standards established	2263
in rules adopted under section 4723.50 of the Revised Code.	2264
(4) The content of the course of study shall be specific	2265
to midwifery.	2266
(5) The instruction provided in the course of study shall	2267
<pre>include all of the following:</pre>	2268
(a) A minimum of thirty-six contact hours of instruction	2269
in advanced pharmacology that includes pharmacokinetic	2270
principles and clinical application and the use of drugs and	2271
therapeutic devices in the prevention of illness and maintenance	2272
of health;	2273
(b) Instruction in the fiscal and ethical implications of	2274
<pre>prescribing drugs and therapeutic devices;</pre>	2275
(c) Instruction in the state and federal laws that apply	2276
to the authority to prescribe;	2277
(d) Instruction that is specific to schedule II controlled	2278
substances, including instruction in all of the following:	2279
(i) Indications for the use of schedule II controlled	2280

substances in drug therapies;	2281
(ii) The most recent guidelines for pain management	2282
therapies, as established by state and national organizations	2283
such as the Ohio pain initiative and the American pain society;	2284
(iii) Fiscal and ethical implications of prescribing	2285
<pre>schedule II controlled substances;</pre>	2286
(iv) State and federal laws that apply to the authority to	2287
<pre>prescribe schedule II controlled substances;</pre>	2288
(v) Prevention of abuse and diversion of schedule II	2289
controlled substances, including identification of the risk of	2290
abuse and diversion, recognition of abuse and diversion, types	2291
of assistance available for prevention of abuse and diversion,	2292
and methods of establishing safeguards against abuse and	2293
diversion.	2294
Sec. 4723.56. (A) If the board of nursing determines under	2295
section 4723.55 of the Revised Code that an applicant meets the	2296
requirements for a license to practice as a certified midwife,	2297
the secretary of the board shall issue the license to the	2298
applicant.	2299
(B) Each license shall be valid for a two-year period	2300
unless revoked or suspended, shall expire on the date that is	2301
two years after the date of issuance, and may be renewed for	2302
additional two-year periods in accordance with rules adopted	2303
under section 4723.59 of the Revised Code.	2304
(C) To renew a license to practice as a certified midwife,	2305
an applicant for renewal shall demonstrate both of the following	2306
to the board:	2307
(1) That the applicant has maintained certification in	2308

neonatal and adult cardiopulmonary resuscitation;	2309
(2) That the applicant has satisfied the continuing	2310
education requirements of the American midwifery certification	2311
board.	2312
Sec. 4723.57. (A) An individual who holds a current, valid	2313
license to practice as a certified midwife may, in collaboration	2314
with one or more physicians, engage in one or more of the	2315
<pre>following activities:</pre>	2316
(1) Providing primary health care services for women from	2317
adolescence and beyond menopause, including the independent	2318
provision of gynecologic and family planning services,	2319
preconception care, and care during pregnancy, childbirth, and	2320
the postpartum period;	2321
(2) Attending births in hospitals, homes, medical offices,	2322
and freestanding birthing centers;	2323
(3) Providing care for normal newborns during the first	2324
<pre>twenty-eight days of life;</pre>	2325
(4) Providing initial and ongoing comprehensive	2326
assessment, diagnosis, and treatment;	2327
(5) Conducting physical examinations;	2328
(6) Ordering and interpreting laboratory and diagnostic	2329
tests;	2330
(7) Providing care that includes health promotion, disease	2331
prevention, and individualized wellness education and	2332
counseling.	2333
(B) When engaging in any of the activities permitted under	2334
this section, a certified midwife shall maintain appropriate	2335

medical records regarding patient history, treatment, and	2336
outcomes.	2337
Sec. 4723.58. (A) This section establishes the process by	2338
which a certified nurse-midwife or certified midwife obtains a	2339
patient's consent to treatment authorized by section 4723.43 or	2340
4723.57 of the Revised Code, but only when the certified nurse-	2341
midwife or certified midwife seeks to provide the treatment in a	2342
setting other than a hospital or facility.	2343
(B) The following information shall be exchanged in	2344
writing between a certified nurse-midwife or certified midwife	2345
and patient when obtaining consent to treatment as described in	2346
division (A) of this section:	2347
(1) The name and license number of the certified nurse-	2348
<pre>midwife or certified midwife;</pre>	2349
(2) The patient's name, address, telephone number, and	2350
primary care provider, if the patient has one;	2351
(3) A description of the certified nurse-midwife's or	2352
certified midwife's education, training, and experience in	2353
<pre>nurse-midwifery or midwifery;</pre>	2354
(4) A description of the certified nurse-midwife's or	2355
<pre>certified midwife's peer review process;</pre>	2356
(5) The certified nurse-midwife's or certified midwife's	2357
<pre>practice philosophy;</pre>	2358
(6) A promise to provide the patient, upon request, with	2359
separate documents describing the rules governing the practice	2360
of a certified nurse-midwife or certified midwife, including a	2361
list of conditions indicating the need for consultation,	2362
referral, transfer, or mandatory transfer and the certified	2363

nurse-midwife's or certified midwife's personal written practice	2364
<pre>guidelines;</pre>	2365
(7) A written plan for medical consultation and transfer	2366
of care;	2367
(8) A description of any hospital care and procedures that	2368
may be necessary in the event of an emergency transfer or care;	2369
(9) A description of the services provided to the patient	2370
by the certified nurse-midwife or certified midwife;	2371
(10) That the certified nurse-midwife or certified midwife	2372
holds a current, valid license to practice issued under this	2373
<pre>chapter;</pre>	2374
(11) The availability of a grievance process;	2375
(12) Whether the certified nurse-midwife or certified	2376
midwife is covered by professional liability insurance;	2377
(13) Any other information required in rules adopted by	2378
the board.	2379
(C) Once the required information has been exchanged and	2380
if the patient consents to treatment, the patient and certified	2381
nurse-midwife or certified midwife shall sign a written document	2382
to indicate as such. The certified nurse-midwife or certified	2383
midwife shall retain a copy of the document for at least four	2384
years from the date on which the document was signed.	2385
Sec. 4723.581. (A) The board of nursing shall adopt rules	2386
establishing the circumstances in which a certified nurse-	2387
midwife or certified midwife shall be prohibited from attending	2388
a home birth, which may include a high-risk pregnancy. In	2389
adopting the rules, the board shall allow a midwife to attend	2390
any of the following as a home birth only if the conditions	2391

described in division (B) of this section are satisfied: a	2392
vaginal birth after cesarean, birth of twins, or breech birth.	2393
(B) In the event of a home birth described in division (A)	2394
of this section, a certified nurse-midwife or certified midwife	2395
may attend the birth only if all of the following conditions are	2396
<pre>satisfied:</pre>	2397
(1) In addition to the informed consent required under	2398
section 4723.58 of the Revised Code, the certified nurse-midwife	2399
or certified midwife obtains the patient's written informed	2400
consent for the vaginal birth after cesarean, birth of twins, or	2401
breech birth, including a description of risks associated with	2402
the procedure.	2403
(2) The certified nurse-midwife or certified midwife	2404
consults with a physician or other health care provider about	2405
the patient and together with the physician or provider	2406
determines whether referral is appropriate for the patient.	2407
If a referral is determined to be appropriate and the	2408
patient consents to the referral, the certified nurse-midwife or	2409
certified midwife shall refer the patient to the physician or	2410
provider. If the patient refuses the referral, the certified	2411
nurse-midwife or certified midwife shall document the refusal	2412
and may continue to provide care to the patient, including	2413
attending the vaginal birth after cesarean, birth of twins, or	2414
breech birth at home.	2415
(3) The certified nurse-midwife or certified midwife	2416
satisfies any other conditions required in rules adopted by the	2417
board of nursing.	2418
(C) In adopting rules under this section, the board of	2419
nursing shall do both of the following:	2420

(1) Consider any relevant peer-reviewed medical	2421
<pre>literature;</pre>	2422
(2) Specify the content and format of the document to be	2423
used when obtaining informed consent as described in this	2424
section.	2425
Sec. 4723.582. (A) As used in this section and section	2426
4723.583 of the Revised Code, "emergency medical service,"	2427
"emergency medical service personnel," and "emergency medical	2428
service organization" have the same meanings as in section	2429
4765.01 of the Revised Code.	2430
(B) For any pregnancy or childbirth in which a certified	2431
nurse-midwife or certified midwife provides care and a home	2432
birth is planned, both of the following apply:	2433
(1) The certified nurse-midwife or certified midwife shall	2434
create an individualized transfer of care plan with each	2435
<pre>patient.</pre>	2436
(2) The certified nurse-midwife or certified midwife shall	2437
assess the status of the patient, fetus, and newborn throughout	2438
the maternity care cycle and shall determine when or if a	2439
transfer to a hospital or facility is necessary.	2440
(C) Each individualized transfer of care plan shall	2441
<pre>contain all of the following:</pre>	2442
(1) The name and location of geographically adjacent	2443
hospitals and other facilities that are appropriately equipped	2444
to provide emergency care, obstetrical care, and newborn care;	2445
(2) The approximate travel time to each hospital or	2446
<pre>facility;</pre>	2447
(3) A list of the modes of transport services available,	2448

including an emergency medical service organization available by	2449
<u>calling 9-1-1;</u>	2450
(4) The requirements for activating each mode of	2451
transportation;	2452
(5) The mechanism by which medical records and other	2453
information concerning the patient may be rapidly transmitted to	2454
<pre>each hospital or facility;</pre>	2455
(6) Each hospital's or facility's preferences regarding	2456
the registration of a patient prior to transfer as well as the	2457
hospital's or facility's procedures for confirming such a	2458
registration;	2459
(7) Contact information for either a health care provider_	2460
or practice group who has agreed in advance to accept patients	2461
in transfer, or a hospital's or facility's preferred method of	2462
accessing care by the hospital's or facility's designated	2463
<pre>provider on call;</pre>	2464
(8) Any other information required in rules adopted by the	2465
board of nursing.	2466
(D) When it becomes necessary to transfer a patient, a	2467
certified nurse-midwife or certified midwife shall notify the	2468
receiving provider, hospital, or facility of all of the	2469
<pre>following:</pre>	2470
(1) The incoming transfer;	2471
(2) The reason for the transfer;	2472
(3) A brief relevant clinical history;	2473
(4) The planned mode of transport;	2474
(5) The expected time of arrival;	2475

(6) Any other information required in rules adopted by the	2476
board.	2477
The certified nurse-midwife or certified midwife shall	2478
continue to provide routine or urgent care en route in	2479
coordination with any emergency medical services personnel or	2480
emergency medical service organization and shall address the	2481
psychosocial needs of the patient during the change of birth	2482
setting.	2483
(E) On arrival at the hospital or facility, the certified	2484
nurse-midwife or certified midwife shall do all of the	2485
<pre>following:</pre>	2486
(1) Provide a verbal report that includes details on the	2487
patient's current health status and the need for urgent care;	2488
(2) Provide a legible copy of relevant prenatal and labor	2489
medical records;	2490
(3) Transfer clinical responsibility to the receiving	2491
provider, hospital, or facility;	2492
(4) Satisfy any other requirement established in rules	2493
adopted by the board of nursing.	2494
If the patient chooses, the certified nurse-midwife or	2495
certified midwife may remain at the hospital or facility to	2496
provide continuous support. The certified nurse-midwife or	2497
certified midwife also may continue to provide midwifery	2498
services, but only if the hospital or facility has granted the	2499
nurse-midwife or midwife clinical privileges. Whenever possible,	2500
the patient and her newborn shall be together during the	2501
transfer and after admission to the hospital or facility.	2502
Sec. 4723.583. Emergency medical service personnel or an	2503

emergency medical service organization, hospital, facility,	2504
physician, advanced practice registered nurse, or certified	2505
midwife that provides services or care following an adverse	2506
incident as defined in section 4723.584 of the Revised Code or	2507
during and after a transfer of care as described in section	2508
4723.582 of the Revised Code are not liable in damages in a tort	2509
or other civil action for injury or loss to person or property	2510
arising from the services or care, unless the services or care	2511
are provided in a manner that constitutes willful or wanton	2512
misconduct.	2513
Sec. 4723.584. (A) As used in this section, "adverse	2514
incident" means an incident over which a certified nurse-midwife	2515
or certified midwife could exercise control, that is associated	2516
with an attempted or completed birth in a setting or facility	2517
other than a hospital, and that results in one or more of the	2518
following injuries or conditions:	2519
(1) A maternal death that occurs during delivery or within	2520
forty-two days after delivery;	2521
(2) The transfer of a maternal patient to a hospital_	2522
intensive care unit;	2523
(3) A maternal patient experiencing hemorrhagic shock or	2524
requiring a transfusion of more than four units of blood or	2525
blood products;	2526
(4) A fetal or newborn death, including a stillbirth,	2527
associated with an obstetrical delivery;	2528
(5) A transfer of a newborn to a neonatal intensive care	2529
unit due to a traumatic physical or neurological birth injury,	2530
including any degree of a brachial plexus injury;	2531
(6) A transfer of a newborn to a neonatal intensive care	2532

unit within the first seventy-two hours after birth if the	2533
newborn remains in such unit for more than seventy-two hours;	2534
(7) Any other condition as determined by the board of	2535
nursing in rules adopted under section 4723.07 or 4723.59 of the	2536
Revised Code.	2537
(B) Beginning July 1, 2025, a certified nurse-midwife or	2538
certified midwife who attends a birth planned for a facility or	2539
setting other than a hospital must report any adverse incident,	2540
along with a medical summary of events, to both of the following	2541
within fifteen days after the adverse incident occurs:	2542
(1) The department of health;	2543
(2) The Ohio perinatal quality collaborative.	2544
(C) Beginning on the date that is one year after the	2545
effective date of this section, each certified nurse-midwife or	2546
certified midwife shall report annually to the department of	2547
health the following information regarding cases in which the	2548
midwife provided services when the intended place of birth at	2549
the onset of care was in a facility or setting other than a	2550
hospital:	2551
(1) The total number of patients provided nurse-midwifery	2552
or certified midwifery services at the onset of care;	2553
(2) The number of live births attended;	2554
(3) The number of cases of fetal demise, newborn deaths,	2555
and maternal deaths attended as a certified nurse-midwife or	2556
certified midwife at the discovery of the demise or death;	2557
(4) The number, reason for, and outcome of each transport	2558
of a patient in the antepartum, intrapartum period, or immediate	2559
postpartum period;	2560

(5) A brief description of any complications resulting in	2561
the morbidity or mortality of a maternal patient or a newborn;	2562
(6) The planned delivery setting and the actual setting;	2563
(7) Any other information required in rules adopted by the	2564
<pre>department.</pre>	2565
(D) The department shall adopt rules to implement this	2566
section and shall develop a form to be used for the reporting	2567
required under divisions (B) and (C) of this section.	2568
Sec. 4723.59. (A) In addition to the rules described in	2569
section 4723.07 of the Revised Code, the board of nursing shall	2570
adopt rules establishing standards and procedures for the	2571
licensure and regulation of certified midwives, including those	2572
establishing license application and renewal procedures. The	2573
rules shall be adopted in accordance with Chapter 119. of the	2574
Revised Code.	2575
(B) The board also may adopt, in accordance with Chapter	2576
119. of the Revised Code, any other rules it considers necessary	2577
to implement and administer sections 4723.53 to 4723.60 of the	2578
Revised Code. The rules may require the completion of a criminal	2579
records check and, in the case of a license to practice as a	2580
certified midwife issued by another jurisdiction, may provide	2581
for licensure by endorsement.	2582
Sec. 4723.60. Sections 4723.53 to 4723.59 of the Revised	2583
Code do not abridge, change, or limit in any way the right of a	2584
parent to deliver the parent's baby where, when, how, and with	2585
whom the parent chooses, regardless of the licensure	2586
requirements established in those sections.	2587
Sec. 4723.91. On receipt of a notice pursuant to section	2588
3123.43 of the Revised Code, the board of nursing shall comply	2589

with sections 3123.41 to 3123.50 of the Revised Code and any	2590
applicable rules adopted under section 3123.63 of the Revised	2591
Code with respect to a nursing license, certified midwife	2592
<u>license</u> , medication aide certificate, dialysis technician	2593
certificate, or community health worker certificate issued	2594
pursuant to this chapter.	2595
Sec. 4723.99. (A) Except as provided in division (B) or	2596
(C) of this section, whoever violates section 4723.03, 4723.44,	2597
<u>4723.54,</u> 4723.653, or 4723.73 of the Revised Code is guilty of a	2598
felony of the fifth degree on a first offense and a felony of	2599
the fourth degree on each subsequent offense.	2600
(B) Each of the following is guilty of a minor	2601
misdemeanor:	2602
(1) A registered nurse, advanced practice registered	2603
nurse, or licensed practical nurse who violates division (A) ,	2604
(B), (C), or (D) of section 4723.03 of the Revised Code by	2605
reason of a license to practice nursing that has lapsed for	2606
failure to renew or by practicing nursing after a license has	2607
been classified as inactive;	2608
(2) A medication aide who violates section 4723.653 of the	2609
Revised Code by reason of a medication aide certificate that has	2610
lapsed for failure to renew or by administering medication as a	2611
medication aide after a certificate has been classified as	2612
inactive.	2613
(C) Whoever violates division (H) of section 4723.03 of	2614
the Revised Code is guilty of a misdemeanor of the first degree.	2615
Sec. 4724.01. As used in this chapter:	2616
(A) "Certified international midwife" means an individual_	2617
who is certified by the international registry of midwives but_	2618

is not a licensed midwife.	2619
(B) "Certified professional midwife" means an individual	2620
who is certified by the north American registry of midwives but	2621
is not a licensed midwife.	2622
(C) "International registry of midwives" means the	2623
organization known by that name or its successor organization.	2624
(D) "Licensed midwife" means an individual holding a	2625
license to practice issued under section 4724.04 of the Revised	2626
Code.	2627
(E) "Midwifery education accreditation council" means the	2628
organization known by that name or its successor organization.	2629
(F) "North American registry of midwives" means the	2630
organization known by that name or its successor organization.	2631
	0.00
(G) "Traditional midwife" means an individual who has	2632
entered the midwifery profession through an apprenticeship	2633
program with an experienced practicing midwife, does not hold a	2634
license to practice midwifery issued under this chapter or	2635
Chapter 4723. of the Revised Code, and, before providing	2636
midwifery services, discloses to each client in writing that the	2637
individual is not a licensed midwife.	2638
Sec. 4724.02. (A) Except as provided in division (B) of	2639
this section, no individual shall knowingly practice as a	2640
licensed midwife unless the individual holds a current, valid	2641
license to practice issued under section 4724.04 of the Revised	2642
Code.	2643
(B) Division (A) of this section does not apply to any of	2644
the following:	2645
(1) A physician authorized under Chapter 4731 of the	2646

Revised Code to practice medicine and surgery, osteopathic	2647
medicine and surgery, or podiatric medicine and surgery;	2648
(2) A physician assistant authorized under Chapter 4730.	2649
of the Revised Code to practice as a physician assistant;	2650
(3) A registered nurse, advanced practice registered	2651
nurse, or licensed practical nurse authorized under Chapter	2652
4723. of the Revised Code to practice nursing as a registered	2653
nurse, advanced practice registered nurse, or licensed practical	2654
nurse;	2655
(4) A certified midwife authorized under Chapter 4723. of	2656
the Revised Code to practice as a certified midwife;	2657
(5) A student who is participating in a professional	2658
midwifery education program and who provides midwifery services	2659
under the auspices of the program and under the supervision of a	2660
licensed midwife serving for the program as a faculty member,	2661
<pre>instructor, teaching assistant, or preceptor;</pre>	2662
(6) An individual who is participating in a professional	2663
midwifery apprenticeship and who provides midwifery services as	2664
part of the apprenticeship program and under the supervision of	2665
a licensed midwife serving for the program as an instructor,	2666
teaching assistant, or preceptor;	2667
(7) An individual who provides midwifery services without	2668
a license while engaging in good faith in the practice of the	2669
religious tenets of any church or in any religious act;	2670
(8) An individual who is not engaged in the practice of	2671
the religious tenets of any church or in any religious act but	2672
who provides midwifery services without a license to others	2673
engaging in good faith in the practice of the religious tenets	2674
of any church or in any religious act;	2675

(9) An individual who is a member of a Native American	2676
community and provides midwifery services without a license to	2677
another member of the community;	2678
(10) A traditional midwife;	2679
(11) An individual who is participating in a midwifery	2680
apprenticeship under the supervision of a traditional midwife	2681
and who provides midwifery services as part of the	2682
apprenticeship program under the supervision of a traditional	2683
<pre>midwife;</pre>	2684
(12) A certified professional midwife or certified	2685
international midwife, but only if the certified professional	2686
midwife or certified international midwife does not, as a part	2687
of the midwife's practice, obtain or administer drugs or perform	2688
surgical suturing.	2689
(C) No individual shall knowingly use the title "licensed	2690
midwife" or any other title implying that the individual is a	2691
licensed midwife unless the individual holds a current, valid	2692
license to practice issued under section 4724.04 of the Revised	2693
Code.	2694
Sec. 4724.03. (A) An individual seeking a license to	2695
<pre>practice as a licensed midwife shall file with the department of</pre>	2696
commerce an application in a manner prescribed by the	2697
department. The application shall include all the information	2698
the department considers necessary to process the application,	2699
including evidence satisfactory to the department that the	2700
applicant meets the requirements specified in division (B)(1) or	2701
(2) of this section.	2702
(B)(1) To be eligible to receive a license to practice as	2703
a licensed midwife, an applicant shall demonstrate to the	2704

department that the applicant meets all of the following	2705
<pre>requirements:</pre>	2706
(a) Is at least eighteen years of age;	2707
(b) Has attained a high school degree or equivalent;	2708
(c) Is certified by the north American registry of	2709
midwives, international registry of midwives, or another	2710
certifying organization approved by the department in rules	2711
adopted under section 4724.11 of the Revised Code;	2712
(d) Is certified in neonatal and adult cardiopulmonary	2713
resuscitation;	2714
(e) Has successfully completed a course of study in breech	2715
births approved by the department in rules adopted under section	2716
4724.11 of the Revised Code;	2717
(f) Has successfully completed a course of study in	2718
pharmacology approved by the department in rules adopted under	2719
section 4724.11 of the Revised Code.	2720
(2) In lieu of meeting the requirements described in	2721
division (B)(1)(c) of this section, an applicant may demonstrate	2722
<pre>either of the following:</pre>	2723
(a) That the applicant holds a current, valid license to	2724
practice as a licensed midwife issued by another state and the	2725
department has determined that the other state's requirements	2726
for licensure are substantially similar to those described in	2727
division (B) (1) of this section;	2728
(b) That the applicant is certified by the north American	2729
registry of midwives and holds a midwifery bridge certificate.	2730
(C) The department shall review all applications received	2731

under this section. After receiving an application it considers	2732
complete, the department shall determine whether the applicant	2733
meets the requirements for a license to practice as a licensed	2734
<pre>midwife.</pre>	2735
Sec. 4724.04. (A) If the department of commerce determines	2736
under section 4724.03 of the Revised Code that an applicant	2737
meets the requirements for a license to practice as a licensed	2738
midwife, the department shall issue the license to the	2739
applicant.	2740
(B) Each license shall be valid for a two-year period	2741
unless revoked or suspended, shall expire on the date that is	2742
two years after the date of issuance, and may be renewed for	2743
additional two-year periods in accordance with rules adopted	2744
under section 4724.11 of the Revised Code.	2745
(C) To renew a license to practice as a licensed midwife,	2746
an applicant for renewal shall demonstrate both of the following	2747
to the department:	2748
(1) That the applicant has maintained certification in	2749
neonatal and adult cardiopulmonary resuscitation;	2750
(2) That the applicant has maintained certification with	2751
the north American registry of midwives, international registry	2752
of midwives, or another certifying organization approved by the	2753
department in rules adopted under section 4724.11 of the Revised	2754
Code.	2755
(D) In the event a license issued under this section is	2756
not renewed and is therefore expired or inactive, the department	2757
shall reinstate or restore the license if the individual seeking	2758
reinstatement or restoration satisfies the conditions specified	2759
in rules adopted under section 4724.11 of the Revised Code.	2760

Sec. 4724.05. (A) An individual who holds a current, valid	2761
license to practice as a licensed midwife may engage in one or	2762
more of the following activities:	2763
(1) Offering care, education, counseling, and support to	2764
women and their families during pregnancy, birth, and the	2765
<pre>postpartum period;</pre>	2766
(2) Attending births in hospitals, homes, medical offices,	2767
and freestanding birthing centers;	2768
(3) Providing ongoing care throughout pregnancy and hands	2769
on care during labor, birth, and the immediate postpartum	2770
<pre>period;</pre>	2771
(4) Providing maternal and well-baby care for the six- to	2772
eight-week period following delivery;	2773
(5) Providing initial and ongoing comprehensive	2774
assessment, diagnosis, and treatment;	2775
(6) Recognizing abnormal or dangerous conditions requiring	2776
consultations with or referrals to other licensed health care	2777
<pre>professionals;</pre>	2778
(7) Conducting physical examinations;	2779
(8) Ordering and interpreting laboratory and diagnostic	2780
tests, including without a physician's order.	2781
(B) An individual who holds a current, valid license to	2782
practice as a licensed midwife shall not engage in any of the	2783
<pre>following activities:</pre>	2784
(1) Administering cytotec or oxytocics, including pitocin	2785
and methergine, except when indicated during the postpartum	2786
<pre>period;</pre>	2787

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(2) Using forceps or vacuum extraction to assist with	2788
<pre>birth;</pre>	2789
(3) Performing any operative procedures or surgical	2790
repairs other than the following: artificial rupture of	2791
membranes; episiotomies; first or second degree perineal,	2792
vaginal, or labial repairs; clamping or cutting the umbilical	2793
<pre>cord; or frenotomies.</pre>	2794
(C) For the purpose of engaging in one or more of the	2795
activities permitted under division (A) of this section, a	2796
licensed midwife may obtain and administer the following:	2797
(1) Subject to division (B) of this section, an	2798
antihemorraghic agent, including tranexamic acid, pitocin,	2799
<pre>oxytocin, misoprostol, and methergine;</pre>	2800
(2) Intravenous fluids to stabilize the laboring or	2801
postpartum patient or as necessary to administer another drug	2802
authorized by this division;	2803
(3) Neonatal injectable vitamin K;	2804
(4) Newborn antibiotic eye prophylaxis;	2805
(5) Oxygen;	2806
(6) Intravenous antibiotics for group B streptococcal	2807
<pre>prophylaxis;</pre>	2808
(7) Rho (D) immune globulin;	2809
(8) Local anesthesia;	2810
(9) Epinephrine, but only to address an adverse reaction	2811
<pre>to a medication;</pre>	2812
(10) A drug prescribed for the patient by a prescriber.	2813

A licensed midwife also may obtain, without a physician's	2814
order, one or more supplies necessary to administer any of the	2815
drugs described in division (C) of this section.	2816
(D) This section does not authorize a licensed midwife to	2817
prescribe, personally furnish, obtain, or administer either of	2818
<pre>the following:</pre>	2819
(1) Any controlled substance as defined in section 3719.01	2820
of the Revised Code;	2821
(2) A drug or device to perform or induce an abortion.	2822
(E) When engaging in any of the activities permitted under	2823
this section, a licensed midwife shall maintain appropriate	2824
medical records regarding patient history, treatment, and	2825
outcomes.	2826
Sec. 4724.06. The department of commerce shall limit,	2827
revoke, or suspend an individual's license to practice as a	2828
licensed midwife, refuse to issue a license to an applicant,	2829
refuse to renew a license, refuse to reinstate or restore a	2830
license, or reprimand or place on probation the holder of a	2831
license for any of the reasons specified in rules adopted under	2832
section 4724.11 of the Revised Code.	2833
Sec. 4724.07. (A) This section establishes the process by	2834
which a licensed midwife obtains a patient's consent to	2835
treatment authorized by section 4724.05 of the Revised Code,	2836
including attending a home birth or providing care during a	2837
high-risk pregnancy.	2838
(B) The following information shall be exchanged in	2839
writing between a licensed midwife and patient when obtaining	2840
consent to treatment as described in division (A) of this	2841
section:	2842

(1) The name and license number of the licensed midwife;	2843
(2) The patient's name, address, telephone number, and	2844
primary care provider, if the patient has one;	2845
(3) A description of the licensed midwife's education,	2846
training, and experience in midwifery;	2847
(4) A description of the licensed midwife's peer review	2848
process;	2849
(5) The licensed midwife's practice philosophy;	2850
(6) A promise to provide the patient, upon request, with	2851
separate documents describing the rules governing the practice	2852
of midwifery, including a list of conditions indicating the need	2853
for consultation, referral, transfer, or mandatory transfer and	2854
the licensed midwife's personal written practice guidelines;	2855
(7) A written plan for medical consultation and transfer	2856
of care;	2857
(8) A description of any hospital care and procedures that	2858
may be necessary in the event of an emergency transfer or care;	2859
(9) A description of the services provided to the patient	2860
by the licensed midwife;	2861
(10) That the licensed midwife holds a current, valid	2862
license to practice issued under this chapter;	2863
(11) The availability of a grievance process;	2864
(12) Whether the licensed midwife is covered by	2865
<pre>professional liability insurance;</pre>	2866
(13) Any other information required in rules adopted by	2867
the department.	2868

(C) Once the required information has been exchanged and	2869
if the patient consents to treatment, the patient and licensed	2870
midwife shall sign a written document to indicate as such. The	2871
licensed midwife shall retain a copy of the document for at	2872
least four years from the date on which the document was signed.	2873
Sec. 4724.08. (A) The department of commerce shall adopt	2874
rules establishing the circumstances in which a licensed midwife	2875
shall be prohibited from attending a home birth, which may	2876
include a high-risk pregnancy. In adopting the rules, the	2877
department shall allow a licensed midwife to attend a vaginal	2878
birth after cesarean, birth of twins, or breech birth as a home	2879
birth if the conditions described in division (B) of this	2880
section are satisfied.	2881
(B) In the event of a home birth described in division (A)	2882
of this section, a licensed midwife may attend the birth only if	2883
all of the following conditions are satisfied:	2884
(1) In addition to the informed consent required under	2885
section 4724.06 of the Revised Code, the licensed midwife	2886
obtains the patient's written informed consent for the vaginal	2887
birth after cesarean, birth of twins, or breech birth, including	2888
a description of risks associated with the procedure.	2889
(2) The licensed midwife consults with a physician or	2890
other health care provider about the patient and together with	2891
the physician or provider determines whether referral is	2892
appropriate for the patient. If a referral is determined to be	2893
appropriate and the patient consents to the referral, the	2894
licensed midwife shall refer the patient to the physician or	2895
provider. If the patient refuses the referral, the licensed	2896
midwife shall document the refusal and may continue to provide	2897
care to the patient, including attending the vaginal birth after	2898

cesarean, birth of twins, or breech birth.	2899
(3) The licensed midwife satisfies any other conditions	2900
required in rules adopted by the department.	2901
(C) In adopting rules under this section, the department	2902
shall do both of the following:	2903
(1) Adhere to the recommendations of the licensed	2904
midwifery advisory council and any relevant peer-reviewed	2905
<pre>medical literature;</pre>	2906
(2) Specify the content and format of the document to be	2907
used when obtaining informed consent as described in this	2908
section.	2909
Sec. 4724.09. (A) As used in this section and section	2910
4724.10 of the Revised Code, "emergency medical service,"	2911
"emergency medical service personnel," and "emergency medical	2912
service organization" have the same meanings as in section	2913
4765.01 of the Revised Code.	2914
(B) For any pregnancy or childbirth in which a licensed	2915
midwife provides care and a home birth is planned, both of the	2916
<pre>following apply:</pre>	2917
(1) The licensed midwife shall create an individualized	2918
transfer of care plan with each patient.	2919
(2) The licensed midwife shall assess the status of the	2920
patient, fetus, and newborn throughout the maternity care cycle	2921
and shall determine when or if a transfer to a hospital or	2922
facility is necessary.	2923
(C) Each individualized transfer of care plan shall	2924
contain all of the following:	2925

(1) The name and location of geographically adjacent	2926
hospitals and other facilities that are appropriately equipped	2927
to provide emergency care, obstetrical care, and newborn care;	2928
(2) The approximate travel time to each hospital or	2929
<pre>facility;</pre>	2930
(3) A list of the modes of transport services available,	2931
including an emergency medical service organization available by	2932
<u>calling 9-1-1;</u>	2933
(4) The requirements for activating each mode of	2934
<pre>transportation;</pre>	2935
(5) The mechanism by which medical records and other	2936
information concerning the patient may be rapidly transmitted to	2937
<pre>each hospital or facility;</pre>	2938
(6) Each hospital's or facility's preferences regarding	2939
the registration of a patient prior to transfer as well as the	2940
hospital's or facility's procedures for confirming such a	2941
registration;	2942
(7) Contact information for either a health care provider	2943
or practice group who has agreed in advance to accept patients	2944
in transfer, or a hospital's or facility's preferred method of	2945
accessing care by the hospital's or facility's designated	2946
<pre>provider on call;</pre>	2947
(8) Any other information required in rules adopted by the	2948
department of commerce.	2949
(D) When it becomes necessary to transfer a patient, a	2950
licensed midwife shall notify the receiving provider, hospital,	2951
or facility of all of the following:	2952
(1) The incoming transfer;	2953

(2) The reason for the transfer;	2954
(3) A brief relevant clinical history;	2955
(4) The planned mode of transport;	2956
(5) The expected time of arrival;	2957
(6) Any other information required in rules adopted by the	2958
<pre>department.</pre>	2959
The licensed midwife shall continue to provide routine or	2960
urgent care en route in coordination with any emergency medical	2961
services personnel or emergency medical service organization and	2962
shall address the psychosocial needs of the patient during the	2963
change of birth setting.	2964
(E) On arrival at the hospital or facility, the licensed	2965
midwife shall do all of the following:	2966
(1) Provide a verbal report that includes details on the	2967
patient's current health status and the need for urgent care;	2968
(2) Provide a legible copy of relevant prenatal and labor	2969
medical records;	2970
(3) Transfer clinical responsibility to the receiving	2971
provider, hospital, or facility;	2972
provider, mospitar, or racriffy,	2372
(4) Satisfy any other requirement established in rules	2973
adopted by the department.	2974
If the patient chooses, the licensed midwife may remain at	2975
the hospital or facility to provide continuous support. The	2976
licensed midwife also may continue to provide midwifery	2977
services, but only if the hospital or facility has granted the	2978
licensed midwife clinical privileges. Whenever possible, the	2979
patient and her newborn shall be together during the transfer	2980

and after admission to the hospital or facility.	2981
Sec. 4724.10. (A) As used in this section, "adverse	2982
incident" means an incident over which a licensed midwife could	2983
exercise control, that is associated with an attempted or	2984
completed birth in a setting or facility other than a hospital,	2985
and that results in one or more of the following injuries or	2986
<pre>conditions:</pre>	2987
(1) A maternal death that occurs during delivery or within	2988
<pre>forty-two days after delivery;</pre>	2989
(2) The transfer of a maternal patient to a hospital	2990
<pre>intensive care unit;</pre>	2991
(3) A maternal patient experiencing hemorrhagic shock or	2992
requiring a transfusion of more than four units of blood or	2993
<pre>blood products;</pre>	2994
(4) A fetal or newborn death, including a stillbirth,	2995
associated with an obstetrical delivery;	2996
(5) A transfer of a newborn to a neonatal intensive care	2997
unit due to a traumatic physical or neurological birth injury,	2998
including any degree of a brachial plexus injury;	2999
(6) A transfer of a newborn to a neonatal intensive care	3000
unit within the first seventy-two hours after birth if the	3001
newborn remains in such unit for more than seventy-two hours;	3002
(7) Any other condition as determined by the department of	3003
commerce in rules adopted under section 4724.11 of the Revised	3004
Code.	3005
(B) Beginning July 1, 2025, a licensed midwife who attends	3006
a birth planned for a facility or setting other than a hospital	3007
must report any adverse incident, along with a medical summary	3008

of events, to both of the following within fifteen days after	3009
the adverse incident occurs:	3010
(1) The licensed midwifery advisory council;	3011
(2) The Ohio perinatal quality collaborative.	3012
(C) Beginning on the date that is one year after the	3013
effective date of this section, each licensed midwife shall	3014
report annually to the licensed midwifery advisory council the	3015
following information regarding cases in which the licensed	3016
midwife provided services when the intended place of birth at	3017
the onset of care was in a facility or setting other than a	3018
hospital:	3019
(1) The total number of patients provided licensed	3020
midwifery services at the onset of care;	3021
(2) The number of live births attended;	3022
(3) The number of cases of fetal demise, newborn deaths,	3023
and maternal deaths attended as a licensed midwife at the	3024
discovery of the demise or death;	3025
(4) The number, reason for, and outcome of each transport	3026
of a patient in the antepartum, intrapartum period, or immediate	3027
<pre>postpartum period;</pre>	3028
(5) A brief description of any complications resulting in	3029
the morbidity or mortality of a maternal patient or a newborn;	3030
(6) The planned delivery setting and the actual setting;	3031
(7) Any other information required in rules adopted by the	3032
department of commerce.	3033
(D) The department shall adopt rules to implement this	3034
section and shall develop a form to be used for the reporting	3035

required under divisions (B) and (C) of this section.	3036
Sec. 4724.11. (A) In accordance with Chapter 119. of the	3037
Revised Code, the department of commerce shall adopt rules that	3038
establish all of the following:	3039
(1) Standards and procedures for applying for, renewing,	3040
reinstating, or restoring a license to practice as a licensed	3041
<pre>midwife;</pre>	3042
(2) Application, renewal, reinstatement, and restoration	3043
fee amounts for a license to practice as a licensed midwife,	3044
with the amount of the application fee not to exceed forty-five	3045
dollars and the amount of the renewal fee not to exceed twenty	3046
dollars;	3047
(3) Standards and procedures for approving and	3048
successfully completing a course of study in breech births and a	3049
course of study in pharmacology, each as described in section	3050
4724.03 of the Revised Code;	3051
(4) Subject to division (C) of this section, standards and	3052
procedures for approving certifying organizations as described	3053
in section 4724.03 of the Revised Code;	3054
(5) Reasons for which the department may refuse to issue,	3055
or renew, suspend, or revoke a license or otherwise impose	3056
discipline on a licensed midwife;	3057
(6) Conditions to be satisfied before the department	3058
reinstates or restores an expired or inactive license;	3059
(7) Procedures for reporting to the department license	3060
holder misconduct;	3061
(8) Procedures by which the department conducts	3062
disciplinary investigations.	3063

(B) In adopting rules establishing standards and	3064
procedures for the approval of certifying organizations, the	3065
department shall approve an organization only if its	3066
certification requirements meet or exceed those of the north	3067
American registry of midwives or the international registry of	3068
midwives.	3069
(C) The department also may adopt, in accordance with	3070
Chapter 119. of the Revised Code, any other rules it considers	3071
necessary to implement and administer this chapter. The rules	3072
may require the completion of a criminal records check.	3073
Sec. 4724.12. This chapter does not abridge, change, or	3074
limit in any way the right of a parent to deliver the parent's	3075
baby where, when, how, and with whom the parent chooses,	3076
regardless of the licensure requirements established in this	3077
<pre>chapter.</pre>	3078
Sec. 4724.13. (A) There is hereby created within the	3079
department of commerce the licensed midwifery advisory council.	3080
The council shall consist of all of the following members:	3081
(1) One certified nurse-midwife and one certified midwife	3082
or certified nurse-midwife, including, if applicable, the	3083
certified nurse-midwife or certified midwife appointed to the	3084
board of nursing as described in section 4723.02 of the Revised	3085
<pre>Code;</pre>	3086
(2) Four licensed midwives, including one practicing in an	3087
urban setting and one serving a plain Amish or Mennonite	3088
<pre>community;</pre>	3089
(3) One physician who is board-certified in obstetrics and	3090
gynecology, as those designations are issued by a medical	3091
specialty certifying board recognized by the American board of	3092

medical specialties or American osteopathic association, and	3093
with experience consulting with midwives who provide midwifery	3094
services in locations other than hospitals;	3095
(4) One physician who is board-certified in neonatal	3096
medicine, as that designation is issued by a medical specialty	3097
certifying board recognized by the American board of medical	3098
specialties or American osteopathic association, and with	3099
experience consulting with midwives who provide midwifery	3100
services in locations other than hospitals;	3101
(5) One member of the public who has experience utilizing	3102
or receiving midwifery services in locations other than	3103
hospitals.	3104
Of the members who are certified midwives or licensed	3105
midwives, each shall obtain licensure as a certified midwife	3106
under Chapter 4723. of the Revised Code or as a licensed midwife	3107
under this chapter not later than January 1, 2026.	3108
(B) The department shall appoint the members described in	3109
division (A) of this section. The department may solicit	3110
nominations for initial appointments and for filling any	3111
vacancies from individuals or organizations with an interest in	3112
midwifery services. If the department does not receive any	3113
nominations or receives an insufficient number of nominations,	3114
the department shall appoint members and fill vacancies on its	3115
own advice.	3116
Of the physician members described in divisions (A)(3) and	3117
(4) of this section, if the department does not receive any	3118
nominations for physicians with experience consulting with	3119
midwives who provide midwifery services in locations other than	3120
hospitals, the department shall appoint physicians without such	3121

experience, but only if the department determines that each	3122
physician satisfies the other requirements of division (A)(3) or	3123
(4) of this section.	3124
Initial appointments to the council shall be made not	3125
later than ninety days after the effective date of this section.	3126
Of the initial appointments described in division (A) of this	3127
section, four shall be for terms of three years and five shall	3128
be for terms of four years. Thereafter, terms shall be for four	3129
years, with each term ending on the same day of the same month	3130
as did the term that it succeeds. Vacancies shall be filled in	3131
the same manner as appointments.	3132
When the term of any member expires, a successor shall be	3133
appointed in the same manner as the initial appointment. Any	3134
member appointed to fill a vacancy occurring prior to the	3135
expiration of the term for which the member's predecessor was	3136
appointed shall hold office for the remainder of that term. A	3137
member shall continue in office subsequent to the expiration	3138
date of the member's term until the member's successor takes	3139
office or until a period of sixty days has elapsed, whichever	3140
occurs first. A member may be reappointed.	3141
(C) The council shall organize by selecting a chairperson	3142
from among its members. The council may select a new chairperson	3143
at any time. Four members constitute a quorum for the	3144
transaction of official business. Members shall serve without	3145
compensation but shall receive payment for their actual and	3146
necessary expenses incurred in the performance of their official	3147
duties. The expenses shall be paid by the department.	3148
(D) The council shall advise and make recommendations to	3149
the department regarding the practice and regulation of licensed	3150
midwives. The department shall adhere to such advice and	3151

recommendations when adopting any rules governing the practice	3152
of licensed midwives, including rules to address the following:	3153
(1) Circumstances in which attending a home birth is	3154
prohibited, as described in section 4724.08 of the Revised Code;	3155
(2) Limitations on providing care during a high-risk	3156
pregnancy, including when a home birth is planned;	3157
(3) Adverse incident reporting and annual reporting, both	3158
required under section 4724.10 of the Revised Code;	3159
(4) Obtaining a patient's informed consent, as described	3160
in section 4724.07 of the Revised Code;	3161
(5) Creating an individualized transfer of care plan, as	3162
described in section 4724.09 of the Revised Code.	3163
(E) The council shall review each adverse incident report	3164
submitted to the council as described in section 4724.10 of the	3165
Revised Code. As soon as practicable after the required review,	3166
the council shall make a recommendation to the department	3167
regarding whether discipline should be imposed on the licensed	3168
midwife, and if so, the type of discipline to be imposed.	3169
The council shall develop a policy by which it addresses	3170
and considers adverse incident reports.	3171
Sec. 4724.99. (A) Whoever violates division (A) of section_	3172
4724.02 of the Revised Code is guilty of a felony of the fifth	3173
degree on a first offense and a felony of the fourth degree on	3174
each subsequent offense.	3175
(B) Whoever violates division (C) of section 4724.02 of	3176
the Revised Code is guilty of a misdemeanor of the first degree	3177
and is subject to a fine in the amount of one thousand dollars	3178
and a jail term of not more than one hundred eighty days.	3179

Sec. 4731.22. (A) The state medical board, by an	3180
affirmative vote of not fewer than six of its members, may	3181
limit, revoke, or suspend a license or certificate to practice	3182
or certificate to recommend, refuse to grant a license or	3183
certificate, refuse to renew a license or certificate, refuse to	3184
reinstate a license or certificate, or reprimand or place on	3185
probation the holder of a license or certificate if the	3186
individual applying for or holding the license or certificate is	3187
found by the board to have committed fraud during the	3188
administration of the examination for a license or certificate	3189
to practice or to have committed fraud, misrepresentation, or	3190
deception in applying for, renewing, or securing any license or	3191
certificate to practice or certificate to recommend issued by	3192
the board.	3193
(B) Except as provided in division (P) of this section,	3194
the board, by an affirmative vote of not fewer than six members,	3195
shall, to the extent permitted by law, limit, revoke, or suspend	3196
a license or certificate to practice or certificate to	3197
recommend, refuse to issue a license or certificate, refuse to	3198
renew a license or certificate, refuse to reinstate a license or	3199
certificate, or reprimand or place on probation the holder of a	3200
license or certificate for one or more of the following reasons:	3201
(1) Permitting one's name or one's license or certificate	3202
to practice to be used by a person, group, or corporation when	3203
the individual concerned is not actually directing the treatment	3204
given;	3205
(2) Failure to maintain minimal standards applicable to	3206
the selection or administration of drugs, or failure to employ	3207
acceptable scientific methods in the selection of drugs or other	3208

modalities for treatment of disease;

(3) Except as provided in section 4731.97 of the Revised	3210
Code, selling, giving away, personally furnishing, prescribing,	3211
or administering drugs for other than legal and legitimate	3212
therapeutic purposes or a plea of guilty to, a judicial finding	3213
of guilt of, or a judicial finding of eligibility for	3214
intervention in lieu of conviction of, a violation of any	3215
federal or state law regulating the possession, distribution, or	3216
use of any drug;	3217

(4) Willfully betraying a professional confidence.

For purposes of this division, "willfully betraying a 3219 professional confidence" does not include providing any 3220 information, documents, or reports under sections 307.621 to 3221 307.629 of the Revised Code to a child fatality review board; 3222 does not include providing any information, documents, or 3223 reports under sections 307.631 to 307.6410 of the Revised Code 3224 to a drug overdose fatality review committee, a suicide fatality 3225 review committee, or hybrid drug overdose fatality and suicide 3226 3227 fatality review committee; does not include providing any information, documents, or reports under sections 307.651 to 3228 307.659 of the Revised Code to a domestic violence fatality 3229 review board; does not include providing any information, 3230 3231 documents, or reports to the director of health pursuant to quidelines established under section 3701.70 of the Revised 3232 Code; does not include written notice to a mental health 3233 professional under section 4731.62 of the Revised Code; and does 3234 not include the making of a report of an employee's use of a 3235 drug of abuse, or a report of a condition of an employee other 3236 than one involving the use of a drug of abuse, to the employer 3237 of the employee as described in division (B) of section 2305.33 3238 of the Revised Code. Nothing in this division affects the 3239 immunity from civil liability conferred by section 2305.33 or 3240

4731.62 of the Revised Code upon a physician who makes a report	3241
in accordance with section 2305.33 or notifies a mental health	3242
professional in accordance with section 4731.62 of the Revised	3243
Code. As used in this division, "employee," "employer," and	3244
"physician" have the same meanings as in section 2305.33 of the	3245
Revised Code.	3246
(5) Making a false, fraudulent, deceptive, or misleading	3247
statement in the solicitation of or advertising for patients; in	3248
relation to the practice of medicine and surgery, osteopathic	3249
medicine and surgery, podiatric medicine and surgery, or a	3250
limited branch of medicine; or in securing or attempting to	3251
secure any license or certificate to practice issued by the	3252
board.	3253
As used in this division, "false, fraudulent, deceptive,	3254
or misleading statement" means a statement that includes a	3255
misrepresentation of fact, is likely to mislead or deceive	3256
because of a failure to disclose material facts, is intended or	3257
is likely to create false or unjustified expectations of	3258
favorable results, or includes representations or implications	3259
that in reasonable probability will cause an ordinarily prudent	3260
person to misunderstand or be deceived.	3261
(6) A departure from, or the failure to conform to,	3262
minimal standards of care of similar practitioners under the	3263
same or similar circumstances, whether or not actual injury to a	3264
patient is established;	3265
(7) Representing, with the purpose of obtaining	3266
compensation or other advantage as personal gain or for any	3267
other person, that an incurable disease or injury, or other	3268
incurable condition, can be permanently cured;	3269

(8) The obtaining of, or attempting to obtain, money or	3270
anything of value by fraudulent misrepresentations in the course	3271
of practice;	3272
(9) A plea of guilty to, a judicial finding of guilt of,	3273
or a judicial finding of eligibility for intervention in lieu of	3274
conviction for, a felony;	3275
(10) Commission of an act that constitutes a felony in	3276
this state, regardless of the jurisdiction in which the act was	3277
committed;	3278
(11) A plea of guilty to, a judicial finding of guilt of,	3279
or a judicial finding of eligibility for intervention in lieu of	3280
conviction for, a misdemeanor committed in the course of	3281
practice;	3282
(12) Commission of an act in the course of practice that	3283
constitutes a misdemeanor in this state, regardless of the	3284
jurisdiction in which the act was committed;	3285
(13) A plea of guilty to, a judicial finding of guilt of,	3286
or a judicial finding of eligibility for intervention in lieu of	3287
conviction for, a misdemeanor involving moral turpitude;	3288
(14) Commission of an act involving moral turpitude that	3289
constitutes a misdemeanor in this state, regardless of the	3290
jurisdiction in which the act was committed;	3291
(15) Violation of the conditions of limitation placed by	3292
the board upon a license or certificate to practice;	3293
(16) Failure to pay license renewal fees specified in this	3294
chapter;	3295
(17) Except as authorized in section 4731.31 of the	3296
Revised Code, engaging in the division of fees for referral of	3297

patients, or the receiving of a thing of value in return for a	3298
specific referral of a patient to utilize a particular service	3299
or business;	3300

(18) Subject to section 4731.226 of the Revised Code, 3301 violation of any provision of a code of ethics of the American 3302 medical association, the American osteopathic association, the 3303 American podiatric medical association, or any other national 3304 professional organizations that the board specifies by rule. The 3305 state medical board shall obtain and keep on file current copies 3306 of the codes of ethics of the various national professional 3307 organizations. The individual whose license or certificate is 3308 being suspended or revoked shall not be found to have violated 3309 any provision of a code of ethics of an organization not 3310 appropriate to the individual's profession. 3311

For purposes of this division, a "provision of a code of 3312 ethics of a national professional organization" does not include 3313 any provision that would preclude the making of a report by a 3314 physician of an employee's use of a drug of abuse, or of a 3315 condition of an employee other than one involving the use of a 3316 drug of abuse, to the employer of the employee as described in 3317 division (B) of section 2305.33 of the Revised Code. Nothing in 3318 this division affects the immunity from civil liability 3319 conferred by that section upon a physician who makes either type 3320 of report in accordance with division (B) of that section. As 3321 used in this division, "employee," "employer," and "physician" 3322 have the same meanings as in section 2305.33 of the Revised 3323 Code. 3324

(19) Inability to practice according to acceptable and

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prevailing standards of care by reason of mental illness or

physical illness, including, but not limited to, physical

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deterioration tha	t adversely	affects	cognitive,	motor,	or 3	3328
perceptive skills	•				3	3329

In enforcing this division, the board, upon a showing of a 3330 possible violation, shall refer any individual who is authorized 3331 to practice by this chapter or who has submitted an application 3332 pursuant to this chapter to the monitoring organization that 3333 conducts the confidential monitoring program established under 3334 section 4731.25 of the Revised Code. The board also may compel 3335 the individual to submit to a mental examination, physical 3336 examination, including an HIV test, or both a mental and a 3337 physical examination. The expense of the examination is the 3338 responsibility of the individual compelled to be examined. 3339 Failure to submit to a mental or physical examination or consent 3340 to an HIV test ordered by the board constitutes an admission of 3341 the allegations against the individual unless the failure is due 3342 to circumstances beyond the individual's control, and a default 3343 and final order may be entered without the taking of testimony 3344 or presentation of evidence. If the board finds an individual 3345 unable to practice because of the reasons set forth in this 3346 division, the board shall require the individual to submit to 3347 care, counseling, or treatment by physicians approved or 3348 designated by the board, as a condition for initial, continued, 3349 reinstated, or renewed authority to practice. An individual 3350 affected under this division shall be afforded an opportunity to 3351 demonstrate to the board the ability to resume practice in 3352 compliance with acceptable and prevailing standards under the 3353 provisions of the individual's license or certificate. For the 3354 purpose of this division, any individual who applies for or 3355 receives a license or certificate to practice under this chapter 3356 accepts the privilege of practicing in this state and, by so 3357 doing, shall be deemed to have given consent to submit to a 3358

mental or physical examination when directed to do so in writing	3359
by the board, and to have waived all objections to the	3360
admissibility of testimony or examination reports that	3361
constitute a privileged communication.	3362
(20) Except as provided in division (F)(1)(b) of section	3363
4731.282 of the Revised Code or when civil penalties are imposed	3364
under section 4731.225 of the Revised Code, and subject to	3365
section 4731.226 of the Revised Code, violating or attempting to	3366
violate, directly or indirectly, or assisting in or abetting the	3367
violation of, or conspiring to violate, any provisions of this	3368
chapter or any rule promulgated by the board.	3369
This division does not apply to a violation or attempted	3370
violation of, assisting in or abetting the violation of, or a	3371
conspiracy to violate, any provision of this chapter or any rule	3372
adopted by the board that would preclude the making of a report	3373
by a physician of an employee's use of a drug of abuse, or of a	3374
condition of an employee other than one involving the use of a	3375
drug of abuse, to the employer of the employee as described in	3376
division (B) of section 2305.33 of the Revised Code. Nothing in	3377
this division affects the immunity from civil liability	3378
conferred by that section upon a physician who makes either type	3379
of report in accordance with division (B) of that section. As	3380
used in this division, "employee," "employer," and "physician"	3381
have the same meanings as in section 2305.33 of the Revised	3382
Code.	3383
(21) The violation of section 3701.79 of the Revised Code	3384
or of any abortion rule adopted by the director of health	3385

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pursuant to section 3701.341 of the Revised Code;

(22) Any of the following actions taken by an agency

responsible for authorizing, certifying, or regulating an

individual to practice a health care occupation or provide	3389
health care services in this state or another jurisdiction, for	3390
any reason other than the nonpayment of fees: the limitation,	3391
revocation, or suspension of an individual's license to	3392
practice; acceptance of an individual's license surrender;	3393
denial of a license; refusal to renew or reinstate a license;	3394
imposition of probation; or issuance of an order of censure or	3395
other reprimand;	3396
(23) The violation of section 2919.12 of the Revised Code	3397
or the performance or inducement of an abortion upon a pregnant	3398
woman with actual knowledge that the conditions specified in	3399
division (B) of section 2317.56 of the Revised Code have not	3400
been satisfied or with a heedless indifference as to whether	3401
those conditions have been satisfied, unless an affirmative	3402
defense as specified in division (H)(2) of that section would	3403
apply in a civil action authorized by division (H)(1) of that	3404
section;	3405
(24) The revocation, suspension, restriction, reduction,	3406
or termination of clinical privileges by the United States	3407
department of defense or department of veterans affairs or the	3408
termination or suspension of a certificate of registration to	3409
prescribe drugs by the drug enforcement administration of the	3410
United States department of justice;	3411
(25) Termination or suspension from participation in the	3412
medicare or medicaid programs by the department of health and	3413
human services or other responsible agency;	3414
(26) Impairment of ability to practice according to	3415
acceptable and prevailing standards of care because of substance	3416
use disorder or excessive use or abuse of drugs, alcohol, or	3417
other substances that may impair ability to practice.	3418

For the purposes of this division, any individual	3419
authorized to practice by this chapter accepts the privilege of	3420
practicing in this state subject to supervision by the board. By	3421
filing an application for or holding a license or certificate to	3422
practice under this chapter, an individual shall be deemed to	3423
have given consent to submit to a mental or physical examination	3424
when ordered to do so by the board in writing, and to have	3425
waived all objections to the admissibility of testimony or	3426
examination reports that constitute privileged communications.	3427

If it has reason to believe that any individual authorized 3428 to practice by this chapter or any applicant for licensure or 3429 certification to practice suffers such impairment, the board 3430 shall refer the individual to the monitoring organization that 3431 conducts the confidential monitoring program established under 3432 section 4731.25 of the Revised Code. The board also may compel 3433 the individual to submit to a mental or physical examination, or 3434 both. The expense of the examination is the responsibility of 3435 the individual compelled to be examined. Any mental or physical 3436 examination required under this division shall be undertaken by 3437 a treatment provider or physician who is qualified to conduct 3438 the examination and who is approved under section 4731.251 of 3439 the Revised Code. 3440

Failure to submit to a mental or physical examination 3441 ordered by the board constitutes an admission of the allegations 3442 against the individual unless the failure is due to 3443 circumstances beyond the individual's control, and a default and 3444 final order may be entered without the taking of testimony or 3445 presentation of evidence. If the board determines that the 3446 individual's ability to practice is impaired, the board shall 3447 suspend the individual's license or certificate or deny the 3448 individual's application and shall require the individual, as a 3449

condition for initial, continued, reinstated, or renewed	3450
licensure or certification to practice, to submit to treatment.	3451
Before being eligible to apply for reinstatement of a	3452
license or certificate suspended under this division, the	3453
impaired practitioner shall demonstrate to the board the ability	3454
to resume practice in compliance with acceptable and prevailing	3455
standards of care under the provisions of the practitioner's	3456
license or certificate. The demonstration shall include, but	3457
shall not be limited to, the following:	3458
(a) Certification from a treatment provider approved under	3459
section 4731.251 of the Revised Code that the individual has	3460
successfully completed any required inpatient treatment;	3461
(b) Evidence of continuing full compliance with an	3462
aftercare contract or consent agreement;	3463
(c) Two written reports indicating that the individual's	3464
ability to practice has been assessed and that the individual	3465
has been found capable of practicing according to acceptable and	3466
prevailing standards of care. The reports shall be made by	3467
individuals or providers approved by the board for making the	3468
assessments and shall describe the basis for their	3469
determination.	3470
The board may reinstate a license or certificate suspended	3471
under this division after that demonstration and after the	3472
individual has entered into a written consent agreement.	3473
When the impaired practitioner resumes practice, the board	3474
shall require continued monitoring of the individual. The	3475
monitoring shall include, but not be limited to, compliance with	3476
the written consent agreement entered into before reinstatement	3477
or with conditions imposed by board order after a hearing, and,	3478

upon termination of the consent agreement, submission to the	3479
board for at least two years of annual written progress reports	3480
made under penalty of perjury stating whether the individual has	3481
maintained sobriety.	3482
(27) A second or subsequent violation of section 4731.66	3483
or 4731.69 of the Revised Code;	3484
(28) Except as provided in division (N) of this section:	3485
(a) Waiving the payment of all or any part of a deductible	3486
or copayment that a patient, pursuant to a health insurance or	3487
health care policy, contract, or plan that covers the	3488
individual's services, otherwise would be required to pay if the	3489
waiver is used as an enticement to a patient or group of	3490
patients to receive health care services from that individual;	3491
(b) Advertising that the individual will waive the payment	3492
of all or any part of a deductible or copayment that a patient,	3493
pursuant to a health insurance or health care policy, contract,	3494
or plan that covers the individual's services, otherwise would	3495
be required to pay.	3496
(29) Failure to use universal blood and body fluid	3497
precautions established by rules adopted under section 4731.051	3498
of the Revised Code;	3499
(30) Failure to provide notice to, and receive	3500
acknowledgment of the notice from, a patient when required by	3501
section 4731.143 of the Revised Code prior to providing	3502
nonemergency professional services, or failure to maintain that	3503
notice in the patient's medical record;	3504
(31) Failure of a physician supervising a physician	3505
assistant to maintain supervision in accordance with the	3506
requirements of Chapter 4730. of the Revised Code and the rules	3507

adopted under that chapter; 3508 (32) Failure of a physician or podiatrist to enter into a 3509 standard care arrangement with a certified midwife, clinical 3510 nurse specialist, certified nurse-midwife, or certified nurse 3511 3512 practitioner with whom the physician or podiatrist is in collaboration pursuant to section 4731.27 of the Revised Code or 3513 failure to fulfill the responsibilities of collaboration after 3514 3515 entering into a standard care arrangement; 3516 (33) Failure to comply with the terms of a consult agreement entered into with a pharmacist pursuant to section 3517 4729.39 of the Revised Code; 3518 (34) Failure to cooperate in an investigation conducted by 3519 the board under division (F) of this section, including failure 3520 to comply with a subpoena or order issued by the board or 3521 failure to answer truthfully a question presented by the board 3522 in an investigative interview, an investigative office 3523 conference, at a deposition, or in written interrogatories, 3524 except that failure to cooperate with an investigation shall not 3525 constitute grounds for discipline under this section if a court 3526 of competent jurisdiction has issued an order that either 3527 quashes a subpoena or permits the individual to withhold the 3528 testimony or evidence in issue; 3529 (35) Failure to supervise an anesthesiologist assistant in 3530 accordance with Chapter 4760. of the Revised Code and the 3531 board's rules for supervision of an anesthesiologist assistant; 3532 (36) Assisting suicide, as defined in section 3795.01 of 3533 the Revised Code; 3534

(37) Failure to comply with the requirements of section

2317.561 of the Revised Code;

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(38) Failure to supervise a radiologist assistant in	3537
accordance with Chapter 4774. of the Revised Code and the	3538
board's rules for supervision of radiologist assistants;	3539
(39) Performing or inducing an abortion at an office or	3540
facility with knowledge that the office or facility fails to	3541
post the notice required under section 3701.791 of the Revised	3542
Code;	3543
(40) Failure to comply with the standards and procedures	3544
established in rules under section 4731.054 of the Revised Code	3545
for the operation of or the provision of care at a pain	3546
<pre>management clinic;</pre>	3547
(41) Failure to comply with the standards and procedures	3548
established in rules under section 4731.054 of the Revised Code	3549
for providing supervision, direction, and control of individuals	3550
at a pain management clinic;	3551
(42) Failure to comply with the requirements of section	3552
4729.79 or 4731.055 of the Revised Code, unless the state board	3553
of pharmacy no longer maintains a drug database pursuant to	3554
section 4729.75 of the Revised Code;	3555
(43) Failure to comply with the requirements of section	3556
2919.171, 2919.202, or 2919.203 of the Revised Code or failure	3557
to submit to the department of health in accordance with a court	3558
order a complete report as described in section 2919.171 or	3559
2919.202 of the Revised Code;	3560
(44) Practicing at a facility that is subject to licensure	3561
as a category III terminal distributor of dangerous drugs with a	3562
pain management clinic classification unless the person	3563
operating the facility has obtained and maintains the license	3564
with the classification;	3565

(45) Owning a facility that is subject to licensure as a	3566
category III terminal distributor of dangerous drugs with a pain	3567
management clinic classification unless the facility is licensed	3568
with the classification;	3569
(46) Failure to comply with any of the requirements	3570
regarding making or maintaining medical records or documents	3571
described in division (A) of section 2919.192, division (C) of	3572
section 2919.193, division (B) of section 2919.195, or division	3573
(A) of section 2919.196 of the Revised Code;	3574
(47) Failure to comply with the requirements in section	3575
3719.061 of the Revised Code before issuing for a minor a	3576
prescription for an opioid analgesic, as defined in section	3577
3719.01 of the Revised Code;	3578
(48) Failure to comply with the requirements of section	3579
4731.30 of the Revised Code or rules adopted under section	3580
4731.301 of the Revised Code when recommending treatment with	3581
medical marijuana;	3582
(49) A pattern of continuous or repeated violations of	3583
division (E)(2) or (3) of section 3963.02 of the Revised Code;	3584
(50) Failure to fulfill the responsibilities of a	3585
collaboration agreement entered into with an athletic trainer as	3586
described in section 4755.621 of the Revised Code;	3587
(51) Failure to take the steps specified in section	3588
4731.911 of the Revised Code following an abortion or attempted	3589
abortion in an ambulatory surgical facility or other location	3590
that is not a hospital when a child is born alive.	3591
(C) Disciplinary actions taken by the board under	3592
divisions (A) and (B) of this section shall be taken pursuant to	3593
an adjudication under Chapter 119. of the Revised Code, except	3594

that in lieu of an adjudication, the board may enter into a	3595
consent agreement with an individual to resolve an allegation of	3596
a violation of this chapter or any rule adopted under it. A	3597
consent agreement, when ratified by an affirmative vote of not	3598
fewer than six members of the board, shall constitute the	3599
findings and order of the board with respect to the matter	3600
addressed in the agreement. If the board refuses to ratify a	3601
consent agreement, the admissions and findings contained in the	3602
consent agreement shall be of no force or effect.	3603

A telephone conference call may be utilized for
ratification of a consent agreement that revokes or suspends an
3605
individual's license or certificate to practice or certificate
to recommend. The telephone conference call shall be considered
a special meeting under division (F) of section 121.22 of the
Revised Code.
3609

If the board takes disciplinary action against an 3610 individual under division (B) of this section for a second or 3611 subsequent plea of guilty to, or judicial finding of guilt of, a 3612 violation of section 2919.123 or 2919.124 of the Revised Code, 3613 the disciplinary action shall consist of a suspension of the 3614 individual's license or certificate to practice for a period of 3615 3616 at least one year or, if determined appropriate by the board, a more serious sanction involving the individual's license or 3617 certificate to practice. Any consent agreement entered into 3618 under this division with an individual that pertains to a second 3619 or subsequent plea of guilty to, or judicial finding of guilt 3620 of, a violation of that section shall provide for a suspension 3621 of the individual's license or certificate to practice for a 3622 period of at least one year or, if determined appropriate by the 3623 board, a more serious sanction involving the individual's 3624 license or certificate to practice. 3625

(D) For purposes of divisions (B) (10) , (12) , and (14) of	3626
this section, the commission of the act may be established by a	3627
finding by the board, pursuant to an adjudication under Chapter	3628
119. of the Revised Code, that the individual committed the act.	3629
The board does not have jurisdiction under those divisions if	3630
the trial court renders a final judgment in the individual's	3631
favor and that judgment is based upon an adjudication on the	3632
merits. The board has jurisdiction under those divisions if the	3633
trial court issues an order of dismissal upon technical or	3634
procedural grounds.	3635

- (E) The sealing or expungement of conviction records by 3636 any court shall have no effect upon a prior board order entered 3637 under this section or upon the board's jurisdiction to take 3638 action under this section if, based upon a plea of guilty, a 3639 judicial finding of guilt, or a judicial finding of eligibility 3640 for intervention in lieu of conviction, the board issued a 3641 notice of opportunity for a hearing prior to the court's order 3642 to seal or expunge the records. The board shall not be required 3643 to seal, expunge, destroy, redact, or otherwise modify its 3644 records to reflect the court's sealing of conviction records. 3645
- (F) (1) The board shall investigate evidence that appears 3646 to show that a person has violated any provision of this chapter 3647 or any rule adopted under it. Any person may report to the board 3648 in a signed writing any information that the person may have 3649 that appears to show a violation of any provision of this 3650 chapter or any rule adopted under it. In the absence of bad 3651 faith, any person who reports information of that nature or who 3652 testifies before the board in any adjudication conducted under 3653 Chapter 119. of the Revised Code shall not be liable in damages 3654 in a civil action as a result of the report or testimony. Each 3655 complaint or allegation of a violation received by the board 3656

shall be assigned a case number and shall be recorded by the 3657 board. 3658

- (2) Investigations of alleged violations of this chapter 3659 or any rule adopted under it shall be supervised by the 3660 supervising member elected by the board in accordance with 3661 section 4731.02 of the Revised Code and by the secretary as 3662 provided in section 4731.39 of the Revised Code. The president 3663 may designate another member of the board to supervise the 3664 investigation in place of the supervising member. No member of 3665 the board who supervises the investigation of a case shall 3666 participate in further adjudication of the case. 3667
- (3) In investigating a possible violation of this chapter 3668 or any rule adopted under this chapter, or in conducting an 3669 inspection under division (E) of section 4731.054 of the Revised 3670 Code, the board may question witnesses, conduct interviews, 3671 administer oaths, order the taking of depositions, inspect and 3672 copy any books, accounts, papers, records, or documents, issue 3673 subpoenas, and compel the attendance of witnesses and production 3674 of books, accounts, papers, records, documents, and testimony, 3675 except that a subpoena for patient record information shall not 3676 be issued without consultation with the attorney general's 3677 3678 office and approval of the secretary of the board.
- (a) Before issuance of a subpoena for patient record 3679 information, the secretary shall determine whether there is 3680 probable cause to believe that the complaint filed alleges a 3681 violation of this chapter or any rule adopted under it and that 3682 the records sought are relevant to the alleged violation and 3683 material to the investigation. The subpoena may apply only to 3684 records that cover a reasonable period of time surrounding the 3685 alleged violation. 3686

(b) On failure to comply with any subpoena issued by the	3687
board and after reasonable notice to the person being	3688
subpoenaed, the board may move for an order compelling the	3689
production of persons or records pursuant to the Rules of Civil	3690
Procedure.	3691
(c) A subpoena issued by the board may be served by a	3692
sheriff, the sheriff's deputy, or a board employee or agent	3693
designated by the board. Service of a subpoena issued by the	3694
board may be made by delivering a copy of the subpoena to the	3695
person named therein, reading it to the person, or leaving it at	3696
the person's usual place of residence, usual place of business,	3697
or address on file with the board. When serving a subpoena to an	3698
applicant for or the holder of a license or certificate issued	3699
under this chapter, service of the subpoena may be made by	3700
certified mail, return receipt requested, and the subpoena shall	3701
be deemed served on the date delivery is made or the date the	3702
person refuses to accept delivery. If the person being served	3703
refuses to accept the subpoena or is not located, service may be	3704
made to an attorney who notifies the board that the attorney is	3705
representing the person.	3706
(d) A sheriff's deputy who serves a subpoena shall receive	3707
the same fees as a sheriff. Each witness who appears before the	3708
board in obedience to a subpoena shall receive the fees and	3709
mileage provided for under section 119.094 of the Revised Code.	3710
(4) All hearings, investigations, and inspections of the	3711
board shall be considered civil actions for the purposes of	3712
section 2305.252 of the Revised Code.	3713
(5) A report required to be submitted to the board under	3714
this chapter, a complaint, or information received by the board	3715

pursuant to an investigation or pursuant to an inspection under

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division (E)	of section 4731.054 of the Revised Code is	3717
confidential	l and not subject to discovery in any civil action.	3718

The board shall conduct all investigations or inspections 3719 and proceedings in a manner that protects the confidentiality of 3720 patients and persons who file complaints with the board. The 3721 board shall not make public the names or any other identifying 3722 information about patients or complainants unless proper consent 3723 is given or, in the case of a patient, a waiver of the patient 3724 privilege exists under division (B) of section 2317.02 of the 3725 Revised Code, except that consent or a waiver of that nature is 3726 not required if the board possesses reliable and substantial 3727 evidence that no bona fide physician-patient relationship 3728 3729 exists.

The board may share any information it receives pursuant 3730 to an investigation or inspection, including patient records and 3731 patient record information, with law enforcement agencies, other 3732 licensing boards, and other governmental agencies that are 3733 prosecuting, adjudicating, or investigating alleged violations 3734 of statutes or administrative rules. An agency or board that 3735 receives the information shall comply with the same requirements 3736 regarding confidentiality as those with which the state medical 3737 board must comply, notwithstanding any conflicting provision of 3738 the Revised Code or procedure of the agency or board that 3739 applies when it is dealing with other information in its 3740 possession. In a judicial proceeding, the information may be 3741 admitted into evidence only in accordance with the Rules of 3742 Evidence, but the court shall require that appropriate measures 3743 are taken to ensure that confidentiality is maintained with 3744 respect to any part of the information that contains names or 3745 other identifying information about patients or complainants 3746 whose confidentiality was protected by the state medical board 3747

when the information was in the board's possession. Measures to	3748
ensure confidentiality that may be taken by the court include	3749
sealing its records or deleting specific information from its	3750
records.	3751
(6) On a quarterly basis, the board shall prepare a report	3752
that documents the disposition of all cases during the preceding	3753
three months. The report shall contain the following information	3754
for each case with which the board has completed its activities:	3755
(a) The case number assigned to the complaint or alleged	3756
violation;	3757
(b) The type of license or certificate to practice, if	3758
any, held by the individual against whom the complaint is	3759
directed;	3760
(c) A description of the allegations contained in the	3761
complaint;	3762
(d) The disposition of the case.	3763
The report shall state how many cases are still pending	3764
and shall be prepared in a manner that protects the identity of	3765
each person involved in each case. The report shall be a public	3766
record under section 149.43 of the Revised Code.	3767
(G) If the secretary and supervising member determine both	3768
of the following, they may recommend that the board suspend an	3769
individual's license or certificate to practice or certificate	3770
to recommend without a prior hearing:	3771
(1) That there is clear and convincing evidence that an	3772
individual has violated division (B) of this section;	3773
(2) That the individual's continued practice presents a	3774
danger of immediate and serious harm to the public.	3775

Written allegations shall be prepared for consideration by	3776
the board. The board, upon review of those allegations and by an	3777
affirmative vote of not fewer than six of its members, excluding	3778
the secretary and supervising member, may suspend a license or	3779
certificate without a prior hearing. A telephone conference call	3780
may be utilized for reviewing the allegations and taking the	3781
vote on the summary suspension.	3782

The board shall serve a written order of suspension in 3783 accordance with sections 119.05 and 119.07 of the Revised Code. 3784 The order shall not be subject to suspension by the court during 3785 pendency of any appeal filed under section 119.12 of the Revised 3786 Code. If the individual subject to the summary suspension 3787 requests an adjudicatory hearing by the board, the date set for 3788 the hearing shall be within fifteen days, but not earlier than 3789 seven days, after the individual requests the hearing, unless 3790 otherwise agreed to by both the board and the individual. 3791

Any summary suspension imposed under this division shall 3792 remain in effect, unless reversed on appeal, until a final 3793 adjudicative order issued by the board pursuant to this section 3794 and Chapter 119. of the Revised Code becomes effective. The 3795 board shall issue its final adjudicative order within seventy-3796 five days after completion of its hearing. A failure to issue 3797 the order within seventy-five days shall result in dissolution 3798 of the summary suspension order but shall not invalidate any 3799 subsequent, final adjudicative order. 3800

(H) If the board takes action under division (B)(9), (11),
or (13) of this section and the judicial finding of guilt,
guilty plea, or judicial finding of eligibility for intervention
in lieu of conviction is overturned on appeal, upon exhaustion
of the criminal appeal, a petition for reconsideration of the
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order may be filed with the board along with appropriate court	3806
documents. Upon receipt of a petition of that nature and	3807
supporting court documents, the board shall reinstate the	3808
individual's license or certificate to practice. The board may	3809
then hold an adjudication under Chapter 119. of the Revised Code	3810
to determine whether the individual committed the act in	3811
question. Notice of an opportunity for a hearing shall be given	3812
in accordance with Chapter 119. of the Revised Code. If the	3813
board finds, pursuant to an adjudication held under this	3814
division, that the individual committed the act or if no hearing	3815
is requested, the board may order any of the sanctions	3816
identified under division (B) of this section.	3817

(I) The license or certificate to practice issued to an 3818 individual under this chapter and the individual's practice in 3819 this state are automatically suspended as of the date of the 3820 individual's second or subsequent plea of guilty to, or judicial 3821 finding of guilt of, a violation of section 2919.123 or 2919.124 3822 of the Revised Code. In addition, the license or certificate to 3823 practice or certificate to recommend issued to an individual 3824 under this chapter and the individual's practice in this state 3825 are automatically suspended as of the date the individual pleads 3826 quilty to, is found by a judge or jury to be quilty of, or is 3827 subject to a judicial finding of eligibility for intervention in 3828 lieu of conviction in this state or treatment or intervention in 3829 lieu of conviction in another jurisdiction for any of the 3830 following criminal offenses in this state or a substantially 3831 equivalent criminal offense in another jurisdiction: aggravated 3832 murder, murder, voluntary manslaughter, felonious assault, 3833 kidnapping, rape, sexual battery, gross sexual imposition, 3834 aggravated arson, aggravated robbery, or aggravated burglary. 3835 Continued practice after suspension shall be considered 3836

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practicing without a license or certificate.

The board shall notify the individual subject to the

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suspension in accordance with sections 119.05 and 119.07 of the

Revised Code. If an individual whose license or certificate is

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automatically suspended under this division fails to make a

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timely request for an adjudication under Chapter 119. of the

Revised Code, the board shall do whichever of the following is

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applicable:

- (1) If the automatic suspension under this division is for 3845 a second or subsequent plea of quilty to, or judicial finding of 3846 quilt of, a violation of section 2919.123 or 2919.124 of the 3847 Revised Code, the board shall enter an order suspending the 3848 individual's license or certificate to practice for a period of 3849 at least one year or, if determined appropriate by the board, 3850 imposing a more serious sanction involving the individual's 3851 license or certificate to practice. 3852
- (2) In all circumstances in which division (I)(1) of this 3853 section does not apply, enter a final order permanently revoking 3854 the individual's license or certificate to practice. 3855
- (J) If the board is required by Chapter 119. of the 3856 Revised Code to give notice of an opportunity for a hearing and 3857 3858 if the individual subject to the notice does not timely request a hearing in accordance with section 119.07 of the Revised Code, 3859 the board is not required to hold a hearing, but may adopt, by 3860 an affirmative vote of not fewer than six of its members, a 3861 final order that contains the board's findings. In that final 3862 order, the board may order any of the sanctions identified under 3863 division (A) or (B) of this section. 3864
 - (K) Any action taken by the board under division (B) of

this section resulting in a suspension from practice shall be 3866 accompanied by a written statement of the conditions under which 3867 the individual's license or certificate to practice may be 3868 reinstated. The board shall adopt rules governing conditions to 3869 be imposed for reinstatement. Reinstatement of a license or 3870 certificate suspended pursuant to division (B) of this section 3871 requires an affirmative vote of not fewer than six members of 3872 the board. 3873

- (L) When the board refuses to grant or issue a license or 3874 certificate to practice to an applicant, revokes an individual's 3875 license or certificate to practice, refuses to renew an 3876 3877 individual's license or certificate to practice, or refuses to 3878 reinstate an individual's license or certificate to practice, the board may specify that its action is permanent. An 3879 individual subject to a permanent action taken by the board is 3880 forever thereafter ineligible to hold a license or certificate 3881 to practice and the board shall not accept an application for 3882 reinstatement of the license or certificate or for issuance of a 3883 new license or certificate. 3884
- (M) Notwithstanding any other provision of the RevisedCode, all of the following apply:3886
- (1) The surrender of a license or certificate issued under 3887 this chapter shall not be effective unless or until accepted by 3888 the board. A telephone conference call may be utilized for 3889 acceptance of the surrender of an individual's license or 3890 certificate to practice. The telephone conference call shall be 3891 considered a special meeting under division (F) of section 3892 121.22 of the Revised Code. Reinstatement of a license or 3893 certificate surrendered to the board requires an affirmative 3894 vote of not fewer than six members of the board. 3895

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(2) An application for a license or certificate made under	3896
the provisions of this chapter may not be withdrawn without	3897
approval of the board.	3898
(3) Failure by an individual to renew a license or	3899
certificate to practice in accordance with this chapter or a	3900
certificate to recommend in accordance with rules adopted under	3901
section 4731.301 of the Revised Code does not remove or limit	3902
the board's jurisdiction to take any disciplinary action under	3903
this section against the individual.	3904
(4) The placement of an individual's license on retired	3905
status, as described in section 4731.283 of the Revised Code,	3906
does not remove or limit the board's jurisdiction to take any	3907
disciplinary action against the individual with regard to the	3908
license as it existed before being placed on retired status.	3909
(5) At the request of the board, a license or certificate	3910
holder shall immediately surrender to the board a license or	3911
certificate that the board has suspended, revoked, or	3912
permanently revoked.	3913
(N) Sanctions shall not be imposed under division (B)(28)	3914
of this section against any person who waives deductibles and	3915
copayments as follows:	3916
(1) In compliance with the health benefit plan that	3917
expressly allows such a practice. Waiver of the deductibles or	3918
copayments shall be made only with the full knowledge and	3919
consent of the plan purchaser, payer, and third-party	3920
administrator. Documentation of the consent shall be made	3921
available to the board upon request.	3922

(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.	3925
(0) Under the board's investigative duties described in	3926
this section and subject to division (F) of this section, the	3927
board shall develop and implement a quality intervention program	3928
designed to improve through remedial education the clinical and	3929
communication skills of individuals authorized under this	3930
chapter to practice medicine and surgery, osteopathic medicine	3931
and surgery, and podiatric medicine and surgery. In developing	3932
and implementing the quality intervention program, the board may	3933
do all of the following:	3934
(1) Offer in appropriate cases as determined by the board	3935
an educational and assessment program pursuant to an	3936
investigation the board conducts under this section;	3937
(2) Select providers of educational and assessment	3938
services, including a quality intervention program panel of case	3939
reviewers;	3940
(3) Make referrals to educational and assessment service	3941
providers and approve individual educational programs	3942
recommended by those providers. The board shall monitor the	3943
progress of each individual undertaking a recommended individual	3944
educational program.	3945
(4) Determine what constitutes successful completion of an	3946
individual educational program and require further monitoring of	3947
the individual who completed the program or other action that	3948
the board determines to be appropriate;	3949
(5) Adopt rules in accordance with Chapter 119. of the	3950
Revised Code to further implement the quality intervention	3951
program.	3952
An individual who participates in an individual	3953

educational program pursuant to this division shall pay the	3954
financial obligations arising from that educational program.	3955
(P) The board shall not refuse to issue a license to an	3956
applicant because of a conviction, plea of guilty, judicial	3957
finding of guilt, judicial finding of eligibility for	3958
intervention in lieu of conviction, or the commission of an act	3959
that constitutes a criminal offense, unless the refusal is in	3960
accordance with section 9.79 of the Revised Code.	3961
Sec. 4731.27. (A) As used in this section,	3962
"collaboration," "physician," "standard care arrangement," and	3963
"supervision" have the same meanings as in section 4723.01 of	3964
the Revised Code.	3965
(B) A physician or podiatrist shall enter into a standard	3966
care arrangement with each certified midwife, clinical nurse	3967
specialist, certified nurse-midwife, or certified nurse	3968
practitioner with whom the physician or podiatrist is in	3969
collaboration.	3970
The collaborating physician or podiatrist shall fulfill	3971
the responsibilities of collaboration, as specified in the	3972
arrangement and in accordance with division (A) of section	3973
4723.431 of the Revised Code. A copy of the standard care	3974
arrangement shall be retained on file by the <u>midwife's or</u>	3975
nurse's employer. Prior approval of the standard care	3976
arrangement by the state medical board is not required, but the	3977
board may periodically review it.	3978
A physician or podiatrist who terminates collaboration	3979
with a <u>certified midwife</u> , certified nurse-midwife, certified	3980
nurse practitioner, or clinical nurse specialist before their	3981
standard care arrangement expires shall give the midwife or	3982

nurse the written or electronic notice of termination required	3983
by division (D)(1) of section 4723.431 of the Revised Code.	3984
Nothing in this division prohibits a hospital from hiring	3985
a certified midwife, clinical nurse specialist, certified nurse-	3986
midwife, or certified nurse practitioner as an employee and	3987
negotiating standard care arrangements on behalf of the employee	3988
as necessary to meet the requirements of this section. A	3989
standard care arrangement between the hospital's employee and	3990
the employee's collaborating physician is subject to approval by	3991
the medical staff and governing body of the hospital prior to	3992
implementation of the arrangement at the hospital.	3993
(C) A physician or podiatrist shall cooperate with the	3994
board of nursing in any investigation the board conducts with	3995
respect to a certified midwife, clinical nurse specialist,	3996
certified nurse-midwife, or certified nurse practitioner who	3997
collaborates with the physician or podiatrist or with respect to	3998
a certified registered nurse anesthetist who practices with the	3999
supervision of the physician or podiatrist.	4000
Section 2. That existing sections 3701.351, 4723.01,	4001
4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4723.271, 4723.28,	4002
4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 4723.41, 4723.43,	4003
4723.431, 4723.432, 4723.481, 4723.483, 4723.487, 4723.488,	4004
4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and	4005
4731.27 of the Revised Code are hereby repealed.	4006
Section 3. Sections 4723.54 and 4724.02 of the Revised	4007
Code, as enacted by this act, take effect January 1, 2026.	4008
Section 4. The General Assembly, applying the principle	4009
stated in division (B) of section 1.52 of the Revised Code that	4010
Jacobs III alvioloti (D) of Joodion 1.02 of the hevided Jode that	1010

amendments are to be harmonized if reasonably capable of

H. B. No. 545 As Introduced

simultaneous operation, finds that the following sections,	4012
presented in this act as composites of the sections as amended	4013
by the acts indicated, are the resulting versions of the	4014
sections in effect prior to the effective date of the sections	4015
as presented in this act:	4016
	4017
Section 4723.08 of the Revised Code as amended by both	4017
H.B. 509 and S.B. 131 of the 134th General Assembly.	4018
Section 4723.481 of the Revised Code as amended by H.B. 33	4019
of the 135th General Assembly and by H.B. 110 and H.B. 509 of	4020
the 134th General Assembly.	4021