

As Introduced

136th General Assembly

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H. B. No. 835

Representative Synenberg

Cosponsors: Representatives Lett, Rader, Somani

To amend sections 3705.16, 3795.03, and 3795.04 and 1
to enact sections 313.124, 3793.01, 3793.02, 2
3793.03, 3793.04, 3793.05, 3793.06, 3793.07, 3
3793.08, 3793.09, 3793.10, 3793.11, 3793.12, 4
3793.13, 3793.14, 3793.15, 3793.16, 3793.17, 5
3793.18, 3793.19, 3793.20, 3793.21, and 4729.97 6
of the Revised Code to authorize an individual 7
with a terminal condition and the ability to 8
make and communicate health care decisions to 9
request a prescription for an aid-in-dying 10
medication and to name this act the Ohio Medical 11
Aid in Dying (MAID) Act. 12

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

Section 1. That sections 3705.16, 3795.03, and 3795.04 be 13
amended and sections 313.124, 3793.01, 3793.02, 3793.03, 14
3793.04, 3793.05, 3793.06, 3793.07, 3793.08, 3793.09, 3793.10, 15
3793.11, 3793.12, 3793.13, 3793.14, 3793.15, 3793.16, 3793.17, 16
3793.18, 3793.19, 3793.20, 3793.21, and 4729.97 of the Revised 17
Code be enacted to read as follows: 18

Sec. 313.124. (A) As used in this section, "aid-in-dying 19
medication," "qualified patient," and "self-administer" have the 20

same meanings as in section 3793.01 of the Revised Code. 21

(B) Death as a result of a qualified patient self- 22
administering an aid-in-dying medication in accordance with 23
Chapter 3793. of the Revised Code does not by itself require the 24
coroner to perform an autopsy. 25

(C) If a death occurs as a result of an individual self- 26
administering an aid-in-dying medication, a coroner may conduct 27
an investigation to determine whether the individual was a 28
qualified patient who received a prescription for an aid-in- 29
dying medication under Chapter 3793. of the Revised Code. 30

Sec. 3705.16. ~~(A)~~ (A) (1) As used in this section, "aid-in- 31
dying medication," "qualified patient," and "self-administer" 32
have the same meanings as in section 3793.01 of the Revised 33
Code. 34

(2) For purposes of this section notwithstanding section 35
3705.01 of the Revised Code, "fetal death" does not include 36
death of the product of human conception prior to twenty weeks 37
of gestation. 38

(B) Each death or fetal death that occurs in this state 39
shall be registered with the local registrar of vital statistics 40
of the district in which the death or fetal death occurred, by 41
the funeral director or other person in charge of the final 42
disposition of the remains. The personal and statistical 43
information in the death or fetal death certificate shall be 44
obtained from the best qualified persons or sources available, 45
by the funeral director or other person in charge of the final 46
disposition of the remains. The statement of facts relating to 47
the disposition of the body and information relative to the 48
armed services referred to in section 3705.19 of the Revised 49

Code shall be signed by the funeral director or other person in charge of the final disposition of the remains. 50
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(C) (1) For certification of the cause of death, the funeral director or other person in charge of the final disposition of the remains shall present the death or fetal death certificate to one of the following individuals: 52
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(a) If a death or fetal death occurs under any circumstance described in section 313.12 of the Revised Code, the coroner in the county in which the death occurs or the medical examiner; 56
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(b) If a death occurs as a result of a qualified patient self-administering an aid-in-dying medication in accordance with Chapter 3793. of the Revised Code, the attending physician of the decedent, as defined in section 3793.01 of the Revised Code, or the medical director of a hospice program licensed under Chapter 3712. of the Revised Code where the qualified patient was receiving hospice care immediately prior to the qualified patient's death; 60
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(c) If a death or fetal death occurs under a circumstance other than as described in section 313.12 of the Revised Code or division (C) (1) (b) of this section, the attending physician of the decedent, except that, in the case of a decedent who did not have an attending physician, the physician who, either in person or through a means of telehealth, last examined or treated the decedent for any illness or condition. 68
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(2) After the death or fetal death certificate is presented, the cause of death shall be certified and the medical certificate of death shall be completed and signed as follows: 75
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(a) If the death or fetal death certificate is presented 78

to the coroner or medical examiner, the coroner, or a deputy 79
coroner, medical examiner, or deputy medical examiner serving in 80
an equivalent capacity, shall certify the cause of death. 81

(b) If the death or fetal death certificate is presented 82
to the physician described in division ~~(C)(1)(b)~~ (C)(1)(c) of 83
this section, that physician shall certify the cause of death. 84

(3) The medical certificate of death shall be completed 85
and signed by the coroner or medical examiner, physician who 86
attended the decedent, ~~or~~ physician who last examined or treated 87
the decedent, or attending physician or medical director of a 88
hospice program as described in division (C)(1)(b) of this 89
section, as appropriate, within forty-eight hours after 90
notification of the death or fetal death. 91

A coroner or medical examiner may satisfy the requirement 92
of signing a medical certificate showing the cause of death or 93
fetal death as pending by signing it within forty-eight hours 94
after notification of the death or fetal death, provided that 95
the coroner or medical examiner shall sign any other medical 96
certificate of death or supplementary medical certification 97
within forty-eight hours after the cause of death has been 98
determined. 99

A physician described in division ~~(C)(1)(b)~~ (C)(1)(c) of 100
this section or an attending physician or medical director of a 101
hospice program described in division (C)(1)(b) of this section 102
may satisfy the requirement of signing a medical certificate by 103
signing with an electronic signature. 104

(D) A coroner, medical examiner, ~~or~~ physician, or medical 105
director of a hospice program who acts in good faith in 106
accordance with this section, without fraud or malice, and upon 107

reasonable belief of the cause of death or fetal death based on 108
the information, if any, presented is not subject to civil 109
liability or professional disciplinary action for any act or 110
omission in certifying the cause of death or in completing and 111
signing the medical certificate of death. 112

(E) Any death certificate registered pursuant to this 113
section shall contain the social security number of the 114
decedent, if available. A social security number obtained under 115
this section is a public record under section 149.43 of the 116
Revised Code. 117

(F) If a death occurs as a result of a qualified patient 118
self-administering an aid-in-dying medication in accordance with 119
Chapter 3793. of the Revised Code, all of the following apply: 120

(1) The cause of death shall not be certified as a suicide 121
or a homicide. 122

(2) The cause of death shall be certified as caused by the 123
decedent's underlying terminal condition. 124

(3) A qualified patient's act of self-administering an 125
aid-in-dying medication shall not be indicated on the death 126
certificate. 127

Sec. 3793.01. As used in this chapter: 128

(A) "Aid-in-dying medication" means a drug or drugs 129
prescribed by an attending physician for a qualified patient 130
that the qualified patient may choose to self-administer to 131
bring about the patient's death due to a terminal condition. 132

(B) "Attending physician" means the physician to whom an 133
individual has assigned primary responsibility for the 134
individual's treatment or care, or, if the responsibility has 135

not been assigned, the physician who has accepted that 136
responsibility. 137

(C) "Attorney in fact" means a person designated as such 138
by a durable power of attorney for health care executed pursuant 139
to sections 1337.11 to 1337.17 of the Revised Code. 140

(D) "Consulting physician" means a physician who is 141
independent from an individual's attending physician and who is 142
qualified by specialty or experience to make a professional 143
diagnosis and prognosis regarding an individual's terminal 144
condition. 145

(E) "Health care facility" means all of the following: 146

(1) A health care facility as defined in section 2305.234 147
of the Revised Code; 148

(2) A nursing home or residential care facility as defined 149
in section 3721.01 of the Revised Code; 150

(3) A hospice care program as defined in section 3712.01 151
of the Revised Code. 152

(F) "Informed decision" means a decision by an individual 153
with a terminal condition to request and obtain a prescription 154
for a medication that the individual may self-administer to end 155
the individual's life that is based on an understanding and 156
acknowledgment of the relevant facts and that is made after 157
being fully informed by the individual's attending physician of 158
all of the following: 159

(1) The individual's medical diagnosis and prognosis; 160

(2) The potential risks associated with taking the 161
medication to be prescribed; 162

<u>(3) The probable result of taking the medication to be</u>	163
<u>prescribed;</u>	164
<u>(4) The possibility that the individual may decide not to</u>	165
<u>obtain the medication or may obtain the medication but decide</u>	166
<u>not to self-administer it;</u>	167
<u>(5) The feasible alternatives or additional treatment</u>	168
<u>opportunities available to the individual, including comfort</u>	169
<u>care, hospice care, palliative care, and pain control.</u>	170
<u>(G) "Medically confirmed" means the medical opinion of the</u>	171
<u>attending physician has been confirmed by a consulting physician</u>	172
<u>who has examined the individual requesting an aid-in-dying</u>	173
<u>medication and the individual's relevant medical records.</u>	174
<u>(H) "Mental health assessment" means one or more</u>	175
<u>consultations for the purpose of determining that the individual</u>	176
<u>has the ability to make medical decisions and is not suffering</u>	177
<u>from impaired judgment due to a mental disorder between an</u>	178
<u>individual and a mental health professional who is one of the</u>	179
<u>following:</u>	180
<u>(1) Either of the following advanced practice registered</u>	181
<u>nurses who holds a current, valid license issued under Chapter</u>	182
<u>4723. of the Revised Code that authorizes the practice of</u>	183
<u>nursing as an advanced practice registered nurse:</u>	184
<u>(a) A clinical nurse specialist who is certified as a</u>	185
<u>psychiatric-mental health CNS by the American nurses</u>	186
<u>credentialing center;</u>	187
<u>(b) A certified nurse practitioner who is certified as a</u>	188
<u>psychiatric-mental health NP by the American nurses</u>	189
<u>credentialing center.</u>	190

<u>(2) A physician specializing in psychiatry;</u>	191
<u>(3) A psychologist licensed under Chapter 4732. of the</u> <u>Revised Code;</u>	192 193
<u>(4) An independent social worker, social worker, licensed</u> <u>professional clinical counselor, licensed professional</u> <u>counselor, independent marriage and family therapist, or</u> <u>marriage and family therapist licensed under Chapter 4757. of</u> <u>the Revised Code.</u>	194 195 196 197 198
<u>(I) "Physician" means an individual authorized under</u> <u>Chapter 4731. of the Revised Code to practice medicine and</u> <u>surgery or osteopathic medicine and surgery.</u>	199 200 201
<u>(J) "Qualified patient" means an individual who has</u> <u>satisfied the requirements of this chapter to obtain a</u> <u>prescription for an aid-in-dying medication.</u>	202 203 204
<u>(K) "Self-administer" means a qualified patient's</u> <u>affirmative, conscious, and physical act of administering and</u> <u>ingesting an aid-in-dying medication to bring about the</u> <u>patient's death.</u>	205 206 207 208
<u>(L) "Terminal condition" means an incurable and</u> <u>irreversible disease that has been medically confirmed and will,</u> <u>within reasonable medical judgment, produce death within six</u> <u>months.</u>	209 210 211 212
Sec. 3793.02. <u>(A) An individual may receive a prescription</u> <u>for an aid-in-dying medication that the individual may self-</u> <u>administer to end the individual's life in a peaceful, humane,</u> <u>and dignified manner in accordance with this chapter if all of</u> <u>the following conditions are met:</u>	213 214 215 216 217
<u>(1) The individual is eighteen years of age or older.</u>	218

<u>(2) The individual is a resident of Ohio.</u>	219
<u>(3) The individual's attending physician has diagnosed the individual with a terminal condition.</u>	220 221
<u>(4) The individual's diagnosis with a terminal condition has been medically confirmed.</u>	222 223
<u>(5) The individual, in the opinion of both the individual's attending physician and the consulting physician, has the ability to make and communicate health care decisions including, if necessary, communication through an interpreter or through an individual able to assist the patient in communicating if the individual has other communication difficulties.</u>	224 225 226 227 228 229 230
<u>(6) The individual has voluntarily expressed the wish to die.</u>	231 232
<u>(7) (a) The individual has made an oral request to the individual's attending physician for a prescription for an aid-in-dying medication and reiterated the oral request to the patient's attending physician not less than five days after making the initial oral request.</u>	233 234 235 236 237
<u>(b) Notwithstanding division (A) (7) (a) of this section, if it has been medically confirmed that the individual is likely, within reasonable medical judgment, to die within five days, the individual does not need to make a second oral request.</u>	238 239 240 241
<u>(8) The individual has made a written request to the individual's attending physician for a prescription for an aid-in-dying medication pursuant to section 3793.03 of the Revised Code.</u>	242 243 244 245
<u>(B) No individual qualifies for a prescription for an aid-</u>	246

<u>in-dying medication under the provisions of this chapter solely</u>	247
<u>because of age or disability.</u>	248
Sec. 3793.03. (A) <u>A written request to receive a</u>	249
<u>prescription for an aid-in-dying medication shall meet all of</u>	250
<u>the following conditions:</u>	251
<u>(1) Be in the form specified in section 3793.04 of the</u>	252
<u>Revised Code;</u>	253
<u>(2) Be signed and dated by the individual making the</u>	254
<u>request;</u>	255
<u>(3) Be witnessed by at least two additional individuals</u>	256
<u>who, in the presence of the individual making the request,</u>	257
<u>attest that to the best of their knowledge and belief the</u>	258
<u>individual has the capacity to make and communicate health care</u>	259
<u>decisions, is acting voluntarily, and is not being coerced to</u>	260
<u>sign the request. At least one of the witnesses required under</u>	261
<u>this division shall be an individual who is not any of the</u>	262
<u>following:</u>	263
<u>(a) A relative of the patient by blood, marriage, or</u>	264
<u>adoption;</u>	265
<u>(b) An individual who at the time the request is signed</u>	266
<u>would be entitled to any portion of the estate of the individual</u>	267
<u>upon death, under any will or by operation of law;</u>	268
<u>(c) An owner, operator, or employee of a health care</u>	269
<u>facility where the qualified patient is receiving medical</u>	270
<u>treatment or is a resident;</u>	271
<u>(d) The individual's attending physician, consulting</u>	272
<u>physician, or the mental health professional who administered a</u>	273
<u>mental health assessment pursuant to section 3793.07 of the</u>	274

Revised Code; 275

(e) The individual's interpreter. 276

(B) A written request for a prescription for an aid-in- 277
dying medication shall be made only by the individual diagnosed 278
with a terminal condition and shall not be made on the 279
individual's behalf through a guardian, an attorney in fact 280
under a durable power of attorney for health care, any other 281
person authorized to make health care decisions on the 282
individual's behalf, or an advance health care directive. 283

(C) If an individual requesting a prescription for an aid- 284
in-dying medication decides to transfer care to another 285
physician or health care facility, the former physician or 286
health care facility, within three business days, shall transfer 287
all relevant medical records, including written documentation of 288
the dates of the individual's request concerning obtaining a 289
prescription for an aid-in-dying medication to the new physician 290
or health care facility. 291

Sec. 3793.04. (A) The department of health shall specify a 292
form to be used by an individual requesting to receive a 293
prescription for an aid-in-dying medication that is 294
substantially the same as the following: 295

"REQUEST FOR AN AID-IN-DYING MEDICATION THAT IF SELF- 296
ADMINISTERED WILL CAUSE MY DEATH IN A PEACEFUL, HUMANE, AND 297
DIGNIFIED MANNER 298

I, _____, am an adult of sound mind. 299

I am suffering from _____, which my 300
attending physician has determined is a terminal condition and 301
which has been medically confirmed. 302

I have been fully informed of my diagnosis, prognosis, the 303
nature of the aid-in-dying medication to be prescribed and 304
potential associated risks, the expected result, and the 305
feasible alternatives, including palliative and comfort care, 306
hospice care, pain control, and disease-directed treatment 307
options. 308

I request that my attending physician prescribe an aid-in- 309
dying medication that will end my life in a peaceful, humane, 310
and dignified manner. 311

I have considered notifying my next of kin about this 312
request for an aid-in-dying medication and have acted 313
accordingly. 314

I understand that I have the right to rescind this request 315
at any time. 316

I understand the full import of this request and I expect 317
to die when I take the aid-in-dying medication to be prescribed. 318
I further understand that although most deaths occur within 319
three hours, my death may take longer and my attending physician 320
has counseled me about this possibility. 321

I make this request voluntarily and without reservation, 322
and I accept full responsibility for my actions. 323

Signed: _____ 324

Dated: _____ 325

DECLARATION OF WITNESS #1 326

I declare that: 327

(a) The person signing this request is personally known to 328
me or has provided proof of identity. 329

<u>(b) The person signing this request signed it in my presence.</u>	330 331
<u>(c) The person signing this request appears to be of sound mind and not under duress, fraud, or undue influence.</u>	332 333
<u>(d) The person signing this request is not a person for whom I am the attending physician, consulting physician, or interpreter.</u>	334 335 336
<u>(e) The person signing this request is not a relative of mine by blood, marriage, or adoption.</u>	337 338
<u>(f) I am not a mental health professional who administered to the person signing this request a mental health assessment required before an aid-in-dying medication may be prescribed.</u>	339 340 341
<u>(g) I am not entitled to any portion of the estate of the person signing this request under any will or by operation of law.</u>	342 343 344
<u>(h) I am not the owner, operator, or an employee of a health care facility where the person signing this request is receiving medical treatment or is a resident.</u>	345 346 347
<u>Witness:</u>	348
<u>Date:</u>	349
<u>DECLARATION OF WITNESS #2</u>	350
<u>I declare that the person signing this request:</u>	351
<u>(a) Is personally known to me or has provided proof of identity;</u>	352 353
<u>(b) Signed this request in my presence;</u>	354
<u>(c) Appears to be of sound mind and not under duress,</u>	355

<u>fraud, or undue influence.</u>	356
<u>Witness: _____</u>	357
<u>Date: _____ "</u>	358
<u>(B) The department shall ensure that the form specified</u>	359
<u>under this section is adaptable to any language in which any</u>	360
<u>conversations or consultations or interpreted conversations or</u>	361
<u>consultations between an individual and the individual's</u>	362
<u>attending or consulting physician are held.</u>	363
<u>Sec. 3793.05. (A) An attending physician shall do all of</u>	364
<u>the following regarding an individual who requests a</u>	365
<u>prescription for an aid-in-dying medication:</u>	366
<u>(1) Determine whether the individual:</u>	367
<u>(a) Has a terminal condition;</u>	368
<u>(b) Has the ability to make and communicate health care</u>	369
<u>decisions;</u>	370
<u>(c) Has made the request for the aid-in-dying medication</u>	371
<u>voluntarily.</u>	372
<u>(2) To ensure that the individual is making an informed</u>	373
<u>decision, inform the individual of:</u>	374
<u>(a) The individual's medical diagnosis;</u>	375
<u>(b) The individual's prognosis;</u>	376
<u>(c) The potential risks associated with taking the aid-in-</u>	377
<u>dying medication to be prescribed;</u>	378
<u>(d) The probable result of taking the aid-in-dying</u>	379
<u>medication to be prescribed;</u>	380
<u>(e) The feasible alternatives to taking the aid-in-dying</u>	381

medication, including palliative care and comfort care, hospice 382
care, pain control, and disease-directed treatment options. 383

(3) Refer the individual to a consulting physician for 384
medical confirmation of the terminal condition diagnosis and for 385
a determination that the individual has the ability to make and 386
communicate health care decisions and is acting voluntarily; 387

(4) Confirm that the individual's request does not arise 388
from coercion or undue influence by another person by discussing 389
with the individual, outside the presence of any other person, 390
except for an interpreter if applicable, whether the individual 391
is feeling coerced or unduly influenced; 392

(5) Refer the individual for a mental health assessment 393
if, in the opinion of the attending physician, the individual 394
may have a mental health condition, including depression, 395
causing impaired judgment; 396

(6) Inform the individual that the individual may rescind 397
the request at any time and in any manner and offer the 398
individual an opportunity to rescind at the time the individual 399
makes the second oral request as required under section 3793.02 400
of the Revised Code or, if the individual is not required to 401
make a second oral request, at the time the individual makes the 402
first oral request. 403

(B) If the results of a mental health assessment conducted 404
pursuant to section 3793.07 of the Revised Code indicate that 405
the individual does not have the ability to make medical 406
decisions, is not able to act voluntarily, is not able to make 407
an informed decision, or is suffering from impaired judgment due 408
to a mental disorder, the individual is not a qualified patient 409
and the attending physician shall deny the individual's request 410

for an aid-in-dying medication and shall not prescribe an aid- 411
in-dying medication to the individual. 412

(C) An attending physician shall do all of the following 413
regarding a qualified patient: 414

(1) Fulfill the medical record documentation requirements 415
specified in section 3793.09 of the Revised Code; 416

(2) Ensure that all appropriate steps are carried out in 417
accordance with this chapter prior to writing a prescription for 418
an aid-in-dying medication; 419

(3) Verify, immediately prior to writing the prescription 420
for an aid-in-dying medication, that the individual is making an 421
informed decision; 422

(4) Inform the qualified patient that there is no 423
obligation to have the prescription filled nor an obligation to 424
self-administer the aid-in-dying medication, if it is obtained; 425

(5) Recommend that the qualified patient notify next of 426
kin of the patient's intent to use the aid-in-dying medication; 427

(6) Counsel the qualified patient about the importance of 428
having another individual present when the patient takes the 429
aid-in-dying medication and counsel the patient about not taking 430
the medication in a public place. 431

(D) A physician who agrees to prescribe an aid-in-dying 432
medication to a qualified patient that if self-administered will 433
cause the qualified patient's peaceful, humane, and dignified 434
death shall do either of the following: 435

(1) Deliver the prescription, including prescriptions for 436
any ancillary medications, to the qualified patient, an 437
individual expressly designated by the qualified patient, or a 438

pharmacist in person, by mail, or through an authorized 439
electronic transmission; 440

(2) To the extent permitted by federal law, personally 441
furnish the prescribed aid-in-dying medication, including any 442
ancillary medications, to the qualified patient or to an 443
individual expressly designated by the qualified patient. 444

(E) An aid-in-dying medication and any ancillary 445
medications may be delivered to a qualified patient or an 446
individual expressly designated by the qualified patient by mail 447
service or messenger service if a signature on delivery is 448
required. 449

(F) Each attending physician shall report to the 450
department of health annually, in accordance with rules adopted 451
under section 3793.11 of the Revised Code, the following 452
information regarding each qualified patient for whom the 453
physician prescribed an aid-in-dying medication pursuant to this 454
chapter: 455

(1) The qualified patient's age when requesting to receive 456
a prescription for an aid-in-dying medication; 457

(2) The qualified patient's race and ethnicity; 458

(3) The qualified patient's sex; 459

(4) Whether the qualified patient was receiving hospice 460
care at the time of the request; 461

(5) The qualified patient's diagnosed medical conditions, 462
including the condition that qualified the patient for the 463
prescription for an aid-in-dying medication; 464

(6) Whether the qualified patient self-administered the 465
aid-in-dying medication prescribed pursuant to this chapter and, 466

if so, the date that this occurred. 467

Sec. 3793.06. A consulting physician shall do all of the 468
following before an individual receives a prescription for an 469
aid-in-dying medication from the attending physician: 470

(A) Examine the individual and the individual's relevant 471
medical records; 472

(B) Confirm in writing the attending physician's diagnosis 473
and prognosis; 474

(C) Determine that the individual has the ability to make 475
and communicate health care decisions, is acting voluntarily, 476
and has made an informed decision; 477

(D) Refer the individual for a mental health assessment 478
if, in the opinion of the consulting physician, the individual 479
may have a mental health condition, including depression, 480
causing impaired judgment; 481

(E) Submit to the attending physician confirmation that 482
the consulting physician has fulfilled the requirements of this 483
section, including the results of any mental health assessment. 484

Sec. 3793.07. If an attending physician or consulting 485
physician refers an individual to a mental health professional 486
for a mental health assessment, the mental health professional 487
shall do all of the following: 488

(A) Examine the individual and the individual's relevant 489
medical records; 490

(B) Determine that the individual has the ability to make 491
medical decisions, is able to act voluntarily, and is able to 492
make an informed decision; 493

(C) Determine that the individual is not suffering from 494
impaired judgment due to a mental disorder; 495

(D) Submit the results of the mental health assessment to 496
the attending physician or consulting physician. 497

Sec. 3793.08. An individual may withdraw or rescind a 498
request for an aid-in-dying medication, or decide not to ingest 499
an aid-in-dying medication, at any time and in any manner 500
without regard to the individual's mental state. No prescription 501
for an aid-in-dying medication under this chapter shall be 502
written without the attending physician offering the individual 503
an opportunity to rescind the request. 504

Sec. 3793.09. The attending physician of an individual 505
requesting a prescription for an aid-in-dying medication shall 506
document the following in the individual's medical record: 507

(A) All oral requests made by the individual for a 508
prescription for an aid-in-dying medication; 509

(B) All written requests made by the individual for a 510
prescription for an aid-in-dying medication; 511

(C) The attending physician's diagnosis and prognosis for 512
the individual; 513

(D) The attending physician's determination that the 514
individual has the ability to make and communicate health care 515
decisions, is acting voluntarily, and has made an informed 516
decision; 517

(E) The consulting physician's diagnosis and prognosis for 518
the individual; 519

(F) The consulting physician's verification that the 520
individual has the ability to make and communicate health care 521

<u>decisions, is acting voluntarily, and has made an informed</u>	522
<u>decision;</u>	523
<u>(G) A report of the outcome and determinations made during</u>	524
<u>the mental health assessment, if performed;</u>	525
<u>(H) The attending physician's offer to the individual to</u>	526
<u>rescind the individual's request at the time of the individual's</u>	527
<u>second oral request as required by section 3793.05 of the</u>	528
<u>Revised Code;</u>	529
<u>(I) Confirmation that the attending physician and the</u>	530
<u>consulting physician are physicians authorized under Chapter</u>	531
<u>4731. of the Revised Code to practice medicine and surgery or</u>	532
<u>osteopathic medicine and surgery;</u>	533
<u>(J) Confirmation that all obligations established for</u>	534
<u>attending physicians and consulting physicians in sections</u>	535
<u>3793.05 and 3793.06 of the Revised Code have been fulfilled;</u>	536
<u>(K) Steps taken by the attending physician to carry out</u>	537
<u>the individual's request for a prescription for an aid-in-dying</u>	538
<u>medication, including notation of the medication prescribed.</u>	539
<u>Sec. 3793.10. A person who has custody of or control over</u>	540
<u>any unused aid-in-dying medication prescribed pursuant to this</u>	541
<u>chapter after the death of a qualified patient shall personally</u>	542
<u>deliver the unused medication to the nearest location qualified</u>	543
<u>to dispose of controlled substances or dispose of the unused</u>	544
<u>medication by any lawful means, in accordance with section</u>	545
<u>4729.69 of the Revised Code or rules adopted by the state board</u>	546
<u>of pharmacy under section 4729.97 of the Revised Code.</u>	547
<u>Sec. 3793.11. (A) The department of health shall do all of</u>	548
<u>the following:</u>	549

<u>(1) Adopt rules in accordance with Chapter 119. of the</u>	550
<u>Revised Code that do all of the following:</u>	551
<u>(a) Specify a form on which to submit a written request</u>	552
<u>for a prescription for an aid-in-dying medication as required by</u>	553
<u>section 3793.04 of the Revised Code;</u>	554
<u>(b) Establish the procedures and forms for attending</u>	555
<u>physicians who prescribe an aid-in-dying medication to report</u>	556
<u>required information to the department pursuant to section</u>	557
<u>3793.05 of the Revised Code;</u>	558
<u>(c) Facilitate the collection of information regarding</u>	559
<u>compliance with this chapter.</u>	560
<u>(2) Collect and review the information submitted by</u>	561
<u>attending physicians under section 3793.05 of the Revised Code;</u>	562
<u>(3) Beginning one year after the effective date of this</u>	563
<u>section, issue an annual statistical report that is publicly</u>	564
<u>available on the department's internet web site and includes the</u>	565
<u>following:</u>	566
<u>(a) A summary of the information collected from attending</u>	567
<u>physicians pursuant to division (A) (2) of this section;</u>	568
<u>(b) The total statewide number of prescriptions for an</u>	569
<u>aid-in-dying medication;</u>	570
<u>(c) The total number of attending physicians who have</u>	571
<u>issued a prescription for an aid-in-dying medication.</u>	572
<u>(B) Except as otherwise required by law, the information</u>	573
<u>collected pursuant to division (A) (2) of this section shall be</u>	574
<u>confidential and shall be collected in a manner that protects</u>	575
<u>the privacy of the qualified patient, the qualified patient's</u>	576
<u>family, and any physician, health care facility, or pharmacist</u>	577

involved with care of the qualified patient. The information is 578
not a public record under section 149.43 of the Revised Code. 579
The information is not subject to discovery or admissible as 580
evidence in any judicial proceeding. 581

(C) Reports issued pursuant to division (A) (3) of this 582
section shall refer to actions taken under this chapter as 583
obtaining and self-administering an aid-in-dying medication and 584
shall not refer to acts committed under this chapter as 585
"suicide" or "assisted suicide." 586

Sec. 3793.12. (A) A provision in a contract, will, or 587
other agreement, whether written or oral, that is executed after 588
the effective date of this section, to the extent the provision 589
would affect whether an individual may make, not make, withdraw, 590
or rescind a request for an aid-in-dying medication, is invalid. 591

(B) An obligation owing under any contract executed after 592
the effective date of this section shall not be conditioned upon 593
or affected by an individual making, not making, withdrawing, or 594
rescinding a request for an aid-in-dying medication. 595

Sec. 3793.13. (A) Neither of the following shall be 596
conditioned upon or affected by an individual making, not 597
making, or rescinding a request for an aid-in-dying medication 598
in accordance with this chapter: 599

(1) The sale, procurement, or issuance of a life 600
insurance, health insurance, or annuity policy, contract, or 601
plan that is delivered, issued for delivery, or renewed in this 602
state; 603

(2) The rate charged for such a policy, contract, or plan. 604

(B) A health care facility, health care provider, health 605
insurance policy, contract, or plan that is delivered, issued 606

for delivery, or renewed in this state, or any other type of 607
direct or indirect provider of health care benefits, services, 608
or insurance cannot deny or alter health care benefits otherwise 609
available to a patient with a terminal illness on the basis of 610
the patient making, not making, or rescinding a request for an 611
aid-in-dying medication in accordance with this chapter or 612
otherwise attempt to coerce or require as a condition to 613
receiving care that a patient with a terminal illness make, not 614
make, or rescind a request for medication under this act. 615

(C) Pursuant to section 3793.15 of the Revised Code, no 616
life insurance, health insurance, or annuity policy, contract, 617
or plan that is delivered, issued for delivery, or renewed in 618
this state shall exclude coverage for an insured individual 619
solely on the basis that the individual's self-administration of 620
an aid-in-dying medication in accordance with this chapter is 621
suicide. 622

(D) Notwithstanding any provision in the Revised Code to 623
the contrary, a qualified patient's act of self-administering an 624
aid-in-dying medication shall not have an effect upon an 625
insurance policy other than that of a natural death from the 626
underlying disease. 627

(E) As used in this division, "health plan issuer" has the 628
same meaning as in section 3922.01 of the Revised Code. 629

(1) A health plan issuer shall not provide any information 630
in communications made by the plan issuer to an insured 631
individual about the availability of coverage for an aid-in- 632
dying medication absent a request for such information by either 633
of the following: 634

(a) The insured individual; 635

(b) The insured individual's attending physician, at the 636
request of the individual. 637

(2) No single communication made by a health plan issuer 638
to an insured individual shall include both of the following: 639

(a) A denial of coverage for treatment for the 640
individual's terminal condition; 641

(b) Information about the availability of coverage for an 642
aid-in-dying medication. 643

Sec. 3793.14. Neither of the following shall be 644
conditioned upon or affected by an attending physician 645
prescribing an aid-in-dying medication to a qualified patient in 646
accordance with this chapter: 647

(A) The sale, procurement, or issuance of any medical 648
professional liability insurance policy that is delivered, 649
issued for delivery, or renewed in this state; 650

(B) The rate charged for such a policy. 651

Sec. 3793.15. Nothing in this chapter shall be construed 652
to authorize a physician or any other person to end an 653
individual's life by lethal injection, mercy killing, or active 654
euthanasia. Actions taken in accordance with this chapter do 655
not, for any purpose, constitute suicide, assisted suicide, 656
euthanasia, homicide, or elder abuse. 657

Sec. 3793.16. (A) No person shall be subject to any of the 658
following because the person participates in good faith 659
compliance with this chapter, including by determining the 660
diagnosis or prognosis of an individual; determining if an 661
individual has the ability to make and communicate health care 662
decisions; providing information to an individual regarding an 663

aid-in-dying medication; providing a referral to a physician who 664
participates in the actions permitted under this chapter; 665
prescribing, personally furnishing, dispensing, or accepting the 666
delivery of an aid-in-dying medication; or because the person 667
refuses to participate in activities authorized by this chapter: 668

(1) Criminal prosecution; 669

(2) Liability for damages in a tort or other civil action 670
for injury, death, or loss to person or property; 671

(3) Professional disciplinary action by a state regulatory 672
board; 673

(4) Employment, credentialing, or medical staff action, 674
sanction, or penalty; 675

(5) Discipline by a professional association. 676

(B) (1) The fact that a health care provider or health care 677
facility participates in activities under this chapter shall not 678
be the sole basis for a complaint or report of unprofessional or 679
dishonorable conduct under any law or regulation of any 680
governmental or professional board or agency that requires or 681
receives reports regarding alleged incidents of unprofessional 682
or dishonorable conduct by health care providers or health care 683
facilities. 684

(2) The fact that a health care provider or health care 685
facility prohibits its employees, independent contractors, or 686
other persons or entities, including other health care 687
providers, from participating in activities under this chapter 688
pursuant to section 3793.19 of the Revised Code shall not be the 689
sole basis for a complaint or report of unprofessional or 690
dishonorable conduct under any law or regulation of any 691
governmental or professional board or agency that requires or 692

receives reports regarding alleged incidents of unprofessional 693
or dishonorable conduct by health care providers or health care 694
facilities. 695

(C) This section shall not be construed to limit the 696
application of section 3793.19 of the Revised Code. 697

Sec. 3793.17. A request by an individual to an attending 698
physician to provide an aid-in-dying medication in good faith 699
compliance with this chapter shall not be the sole basis for the 700
appointment of a guardian or conservator. 701

Sec. 3793.18. No person shall be under any duty, whether 702
by contract, by statute, or by any other legal requirement, to 703
participate in the provision to a qualified patient of aid-in- 704
dying medication to end the qualified patient's life. If a 705
physician or health care facility is unable or unwilling to 706
carry out a patient's request under this chapter, and the 707
patient transfers care to a new physician or health care 708
facility, the prior physician or health care facility shall 709
transfer, upon request, a copy of the patient's relevant medical 710
records to the new physician or health care facility within 711
three business days of the request. 712

Sec. 3793.19. (A) (1) As used in this section, 713
"participating, or entering into an agreement to participate, in 714
activities under this chapter" means doing, or entering into an 715
agreement to do, any of the following: 716

(a) Performing the duties of an attending physician as 717
specified in section 3793.05 of the Revised Code; 718

(b) Performing the duties of a consulting physician as 719
specified in section 3793.06 of the Revised Code; 720

(c) Performing a mental health assessment pursuant to 721

<u>section 3793.07 of the Revised Code;</u>	722
<u>(d) Personally furnishing, dispensing, delivering, or</u>	723
<u>accepting delivery of an aid-in-dying medication;</u>	724
<u>(e) Being present when a qualified patient takes an aid-</u>	725
<u>in-dying medication.</u>	726
<u>(2) "Participating, or entering into an agreement to</u>	727
<u>participate, in activities under this chapter" does not include</u>	728
<u>doing, or entering into an agreement to do, any of the</u>	729
<u>following:</u>	730
<u>(a) Diagnosing whether an individual has a terminal</u>	731
<u>condition, informing the individual of the individual's medical</u>	732
<u>prognosis, or determining whether an individual has the capacity</u>	733
<u>to make medical decisions;</u>	734
<u>(b) Providing information to an individual about this</u>	735
<u>chapter;</u>	736
<u>(c) Providing an individual, on the individual's request,</u>	737
<u>with a referral to another physician for the purpose of</u>	738
<u>participating in activities authorized by this chapter.</u>	739
<u>(B) A health care provider or health care facility may</u>	740
<u>prohibit its employees, independent contractors, or other</u>	741
<u>persons or entities, including other health care providers, from</u>	742
<u>participating in activities under this chapter while on premises</u>	743
<u>owned or under the management or direct control of the</u>	744
<u>prohibiting provider or while acting within the course or scope</u>	745
<u>of any employment by, or contract with, the prohibiting</u>	746
<u>provider.</u>	747
<u>(C) A health care provider or health care facility that</u>	748
<u>elects to prohibit a person from participating in activities</u>	749

under this chapter, as described in division (B) of this 750
section, shall first give notice of the prohibition to the 751
person by providing a statement in writing advising of the 752
policy. A health care provider or health care facility that 753
fails to provide notice as required by this division shall not 754
enforce its policy against the person. 755

(D) (1) Subject to compliance with division (C) of this 756
section regarding notification, a health care provider or health 757
care facility that determines that a person violated a 758
prohibition implemented under this section may take action 759
against that person, including imposing any of the following 760
sanctions: 761

(a) Revocation of privileges or membership or other action 762
authorized by the bylaws or rules and regulations of the medical 763
staff; 764

(b) Suspension, loss of employment, or other action 765
authorized by the policies and practices of the prohibiting 766
provider or facility; 767

(c) Termination of any lease or other contract between the 768
prohibiting provider or facility and the person that violated 769
the policy; 770

(d) Imposition of any other nonmonetary remedy provided 771
for in any lease or contract between the prohibiting provider or 772
facility and the person in violation of the policy. 773

(2) In taking actions pursuant to division (D) (1) of this 774
section, a health care provider or health care facility shall 775
comply with all procedures required by law, the provider or 776
facility's own policies or procedures, and any other contract 777
with the individual or entity in violation of the policy. 778

(E) This section shall not be construed to prevent, or to 779
allow a health care provider or health care facility to 780
prohibit, any other health care provider, employee, independent 781
contractor, or other person from either of the following: 782

(1) Participating, or entering into an agreement to 783
participate, in activities under this chapter as an attending 784
physician or consulting physician while on premises that are not 785
owned or under the management or direct control of the 786
prohibiting provider or facility; 787

(2) Participating, or entering into an agreement to 788
participate, in activities under this chapter while on premises 789
that are not owned or under the management or direct control of 790
the prohibiting provider or facility or while acting outside the 791
course and scope of the participant's duties as an employee of, 792
or an independent contractor for, the prohibiting provider or 793
facility. 794

(F) A health care provider or health care facility shall 795
notify patients in writing of any policy prohibiting its 796
employees, independent contractors, or other persons or 797
entities, including other health care providers, from 798
participating in activities under this chapter. A provider or 799
facility that fails to provide advance notification to patients 800
is not entitled to enforce such a policy. 801

Sec. 3793.20. An attending physician, consulting 802
physician, mental health professional, or interpreter performing 803
actions under this chapter regarding the prescription of an aid- 804
in-dying medication shall not be related to the individual 805
seeking the medication by blood, marriage, registered domestic 806
partnership, or adoption, or to the knowledge of the physician, 807
mental health professional, or interpreter, be entitled to a 808

portion of the individual's estate upon death. 809

Sec. 3793.21. (A) No provision of this chapter shall be 810
construed to exempt a physician from meeting minimal standards 811
of care for the treatment of an individual with a terminal 812
condition. Care provided in compliance with this chapter 813
satisfies a physician's duty to conform to minimal standards of 814
care for an individual with a terminal condition. 815

(B) No provision of this chapter shall be construed to 816
allow a lower standard of care for an individual making a 817
request for an aid-in-dying medication than for otherwise 818
similar individuals. 819

Sec. 3795.03. Nothing in section 3795.01, 3795.02, or 820
3795.04 of the Revised Code shall do any of the following: 821

(A) Prohibit or preclude a physician, certified nurse 822
practitioner, certified nurse-midwife, or clinical nurse 823
specialist who carries out the responsibility to provide comfort 824
care to a patient in good faith and while acting within the 825
scope of the physician's or nurse's authority from prescribing, 826
dispensing, administering, or causing to be administered any 827
particular medical procedure, treatment, intervention, or other 828
measure to the patient, including, but not limited to, 829
prescribing, personally furnishing, administering, or causing to 830
be administered by judicious titration or in another manner any 831
form of medication, for the purpose of diminishing the patient's 832
pain or discomfort and not for the purpose of postponing or 833
causing the patient's death, even though the medical procedure, 834
treatment, intervention, or other measure may appear to hasten 835
or increase the risk of the patient's death; 836

(B) Prohibit or preclude health care personnel acting 837

under the direction of a person authorized to prescribe a 838
patient's treatment and who carry out the responsibility to 839
provide comfort care to the patient in good faith and while 840
acting within the scope of their authority from dispensing, 841
administering, or causing to be administered any particular 842
medical procedure, treatment, intervention, or other measure to 843
the patient, including, but not limited to, personally 844
furnishing, administering, or causing to be administered by 845
judicious titration or in another manner any form of medication, 846
for the purpose of diminishing the patient's pain or discomfort 847
and not for the purpose of postponing or causing the patient's 848
death, even though the medical procedure, treatment, 849
intervention, or other measure may appear to hasten or increase 850
the risk of the patient's death; 851

(C) Prohibit or affect the use or continuation, or the 852
withholding or withdrawal, of life-sustaining treatment, CPR, or 853
comfort care under Chapter 2133. of the Revised Code; 854

(D) Prohibit or affect the provision or withholding of 855
health care, life-sustaining treatment, or comfort care to a 856
principal under a durable power of attorney for health care or 857
any other health care decision made by an attorney in fact under 858
sections 1337.11 to 1337.17 of the Revised Code; 859

(E) Affect or limit the authority of a physician, a health 860
care facility, a person employed by or under contract with a 861
health care facility, or emergency service personnel to provide 862
or withhold health care to a person in accordance with 863
reasonable medical standards applicable in an emergency 864
situation; 865

(F) Affect or limit the authority of a person to refuse to 866
give informed consent to health care, including through the 867

execution of a durable power of attorney for health care under 868
sections 1337.11 to 1337.17 of the Revised Code, the execution 869
of a declaration under sections 2133.01 to 2133.15 of the 870
Revised Code, or authorizing the withholding or withdrawal of 871
CPR under sections 2133.21 to 2133.26 of the Revised Code. 872

(G) Affect or limit the authority of a person to perform 873
any action in good faith compliance with Chapter 3793. of the 874
Revised Code. 875

Sec. 3795.04. (A) Except as provided in section 3795.03 of 876
the Revised Code, no person shall knowingly cause another person 877
to commit or attempt to commit suicide by doing either of the 878
following: 879

(1) Providing the physical means by which the other person 880
commits or attempts to commit suicide; 881

(2) Participating in a physical act by which the other 882
person commits or attempts to commit suicide. 883

(B) Whoever violates division (A) of this section is 884
guilty of assisting suicide, a felony of the third degree. 885

(C) Any action taken in good faith compliance with Chapter 886
3793. of the Revised Code is not a violation of division (A) of 887
this section. 888

Sec. 4729.97. For purposes of section 3793.10 of the 889
Revised Code, the state board of pharmacy shall adopt rules to 890
identify the locations to which a person who has custody or 891
control of an unused aid-in-dying medication may personally 892
deliver the medication. The rules shall be adopted in accordance 893
with Chapter 119. of the Revised Code. 894

Section 2. That existing sections 3705.16, 3795.03, and 895

3795.04 of the Revised Code are hereby repealed. 896

Section 3. Sections 1 and 2 of this act take effect six 897
months after the effective date of this section. 898

Section 4. This act shall be known as the Ohio Medical Aid 899
in Dying (MAID) Act. 900