As Introduced

136th General Assembly
Regular Session
2025-2026

S. B. No. 438

Senator Reynolds

To amend sections 3701.351, 3702.30, 3702.301, 4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 4723.41, 4723.43, 4723.431, 4723.432, 4723.481, 4723.483, 4723.487, 4723.488, 4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 4731.27 and to enact sections 5.2324, 3702.35, 4723.53, 4723.54, 4723.55, 4723.551, 4723.56, 4723.57, 4723.58, 4723.581, 4723.582, 4723.583, 4723.584, 4723.59, 4723.60, 4724.01, 4724.02, 4724.03, 4724.04, 4724.05, 4724.06, 4724.07, 4724.08, 4724.09, 4724.10, 4724.11, 4724.12, 4724.13, 4724.14, 4724.15, 4724.16, and 4724.99 of the Revised Code to regulate the practice of midwifery, to establish requirements for freestanding birthing centers, and to designate May 5th as the "Day of the Midwife."

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

Section 1. That sections 3701.351, 3702.30, 3702.301, 4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 4723.41,

4723.43, 4723.431, 4723.432, 4723.481, 4723.483, 4723.487, 4723.488, 4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 4731.27 be amended and sections 5.2324, 3702.35, 4723.53, 4723.54, 4723.55, 4723.551, 4723.56, 4723.57, 4723.58, 4723.581, 4723.582, 4723.583, 4723.584, 4723.59, 4723.60, 4724.01, 4724.02, 4724.03, 4724.04, 4724.05, 4724.06, 4724.07, 4724.08, 4724.09, 4724.10, 4724.11, 4724.12, 4724.13, 4724.14, 4724.15, 4724.16, and 4724.99 of the Revised Code be enacted to read as follows:

Sec. 5.2324. The fifth day of May is designated as the "Day of the Midwife."

Sec. 3701.351. (A) The governing body of every hospital shall set standards and procedures to be applied by the hospital and its medical staff in considering and acting upon applications for staff membership or professional privileges. These standards and procedures shall be available for public inspection.

(B) The governing body of any hospital, in considering and acting upon applications for staff membership or professional privileges within the scope of the applicants' respective licensures, shall not discriminate against a qualified person solely on the basis of whether that person is licensed to practice medicine, osteopathic medicine, or podiatry, is licensed to practice dentistry or psychology, ~~or~~ is licensed to practice nursing as an advanced practice registered nurse, or is licensed to practice as a certified midwife or licensed midwife. Staff membership or professional privileges shall be considered and acted on in accordance with standards and procedures established under division (A) of this section. This section does not permit a psychologist to admit a patient to a hospital

in violation of section 3727.06 of the Revised Code.

(C) The governing body of any hospital that provides maternity services, in considering and acting upon applications for clinical privileges, shall not discriminate against a qualified person solely on the basis that the person is authorized to practice nurse-midwifery or midwifery. An application from a certified nurse-midwife or certified midwife who is not employed by the hospital shall contain the name of a physician member of the hospital's medical staff who holds clinical privileges in obstetrics at that hospital and who has agreed to be the collaborating physician for the applicant in accordance with section ~~4723.43~~ 4723.431 of the Revised Code.

(D) Any person may apply to the court of common pleas for temporary or permanent injunctions restraining a violation of division (A), (B), or (C) of this section. This action is an additional remedy not dependent on the adequacy of the remedy at law.

(E)(1) If a hospital does not provide or permit the provision of any diagnostic or treatment service for mental or emotional disorders or any other service that may be legally performed by a psychologist licensed under Chapter 4732. of the Revised Code, this section does not require the hospital to provide or permit the provision of any such service and the hospital shall be exempt from requirements of this section pertaining to psychologists.

(2) This section does not impair the right of a hospital to enter into an employment, personal service, or any other kind of contract with a licensed psychologist, upon any such terms as the parties may mutually agree, for the provision of any service that may be legally performed by a licensed psychologist.

Sec. 3702.30. (A) As used in ~~this section~~sections 3702.30 to 3702.511 of the Revised Code:

(1) "Ambulatory surgical facility" means a facility in which surgical services are provided to patients who do not require hospitalization for inpatient care, the duration of services for any patient does not extend beyond twenty-four hours after the patient's admission, and to which any of the following apply:

(a) The surgical services are provided in a building that is separate from another building in which inpatient care is provided, regardless of whether the separate building is part of the same organization as the building in which inpatient care is provided.

(b) The surgical services are provided within a building in which inpatient care is provided and the entity that operates the portion of the building where the surgical services are provided is not the entity that operates the remainder of the building.

(c) The facility is held out to any person or government entity as an ambulatory surgical facility or similar facility by means of signage, advertising, or other promotional efforts.

"Ambulatory surgical facility" does not include a freestanding birthing center, a hospital emergency department, hospital provider-based department that is otherwise licensed under Chapter 3722. of the Revised Code, or an office of a physician, podiatrist, or dentist.

(2) "Freestanding birthing center" means an independent health care facility, separate from a hospital licensed under Chapter 3722. of the Revised Code, that provides prenatal,

labor, delivery, and postpartum care for low-risk pregnancies.

(3) "Health care facility" means any of the following:

(a) An ambulatory surgical facility;

(b) A freestanding dialysis center;

(c) A freestanding inpatient rehabilitation facility;

(d) A freestanding birthing center;

(e) A freestanding radiation therapy center;

(f) A freestanding or mobile diagnostic imaging center.

(B) By rule adopted in accordance with sections 3702.12 and 3702.13 of the Revised Code, the director of health shall establish quality standards for health care facilities. The standards may incorporate accreditation standards or other quality standards established by any entity recognized by the director.

(1) In the case of an ambulatory surgical facility, the standards shall require the ambulatory surgical facility to maintain an infection control program. The purposes of the program are to minimize infections and communicable diseases and facilitate a functional and sanitary environment consistent with standards of professional practice. To achieve these purposes, ambulatory surgical facility staff managing the program shall create and administer a plan designed to prevent, identify, and manage infections and communicable diseases; ensure that the program is directed by a qualified professional trained in infection control; ensure that the program is an integral part of the ambulatory surgical facility's quality assessment and performance improvement program; and implement in an expeditious manner corrective and preventive measures that result in

improvement.

(2) In the case of a licensed freestanding birthing center, the standards shall require both of the following:

(a) At least one of the following to attend each birth:

(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;

(iii) A certified midwife licensed under Chapter 4723. of the Revised Code;

(iv) A licensed midwife licensed under Chapter 4724. of the Revised Code.

(b) That each licensed freestanding birthing center have a director of patient services who is one of the following:

(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code who has contracted with a collaborating physician;

(iii) A certified midwife licensed under Chapter 4723. of the Revised Code who has contracted with a collaborating physician.

(C) Every ambulatory surgical facility shall require that each physician who practices at the facility comply with all relevant provisions in the Revised Code that relate to the

obtaining of informed consent from a patient.

(D) The director shall issue a license to each health care facility that makes application for a license and demonstrates to the director that it meets the quality standards established by the rules adopted under division (B) of this section and satisfies the informed consent compliance requirements specified in division (C) of this section.

(E)(1) Except as provided in division (H) of this section and in section 3702.301 of the Revised Code, no health care facility shall operate without a license issued under this section.

The general assembly does not intend for the provisions of this section or section 3702.301 of the Revised Code that establish health care facility licensing requirements or exemptions to have an effect on any third-party payments that may be available for the services provided by either a licensed health care facility or an entity exempt from licensure.

(2) If the department of health finds that a physician who practices at a health care facility is not complying with any provision of the Revised Code related to the obtaining of informed consent from a patient, the department shall report its finding to the state medical board, the physician, and the health care facility.

(3) Division (E)(2) of this section does not create, and shall not be construed as creating, a new cause of action or substantive legal right against a health care facility and in favor of a patient who allegedly sustains harm as a result of the failure of the patient's physician to obtain informed consent from the patient prior to performing a procedure on or

otherwise caring for the patient in the health care facility.

(F) The rules adopted under division (B) of this section shall include all of the following:

(1) Provisions governing application for, renewal, suspension, and revocation of a license under this section;

(2) Provisions governing orders issued pursuant to section 3702.32 of the Revised Code for a health care facility to cease its operations or to prohibit certain types of services provided by a health care facility;

(3) Provisions governing the imposition under section 3702.32 of the Revised Code of civil penalties for violations of this section or the rules adopted under this section, including a scale for determining the amount of the penalties;

(4) Provisions specifying the form inspectors must use when conducting inspections of ambulatory surgical facilities.

(G) An ambulatory surgical facility that performs or induces abortions shall comply with section 3701.791 of the Revised Code.

(H) The following entities are not required to obtain a license as a freestanding diagnostic imaging center issued under this section:

(1) A hospital registered under section 3701.07 of the Revised Code that provides diagnostic imaging;

(2) An entity that is reviewed as part of a hospital accreditation or certification program and that provides diagnostic imaging;

(3) An ambulatory surgical facility that provides

diagnostic imaging in conjunction with or during any portion of a surgical procedure.

Sec. 3702.301. (A) Except as provided in division (C) of this section, a freestanding birthing center is not required to obtain a license under section 3702.30 of the Revised Code if all of the following are the case:

(1) A religious denomination, sect, or group owns and operates the center.

(2) Requiring that the center be licensed significantly abridges or infringes on the religious practices or beliefs of that religious denomination, sect, or group.

(3) The center provides care only during low-risk pregnancy, delivery, and the immediate postpartum period exclusively to women who_

are members of that religious denomination, sect, or group.

(4) The center monitors and evaluates the care provided to its patients in accordance with at least the minimum patient safety monitoring and evaluation requirements established in rules adopted under division (D) of this section.

(5) The center meets the quality assessment and improvement standards established in rules adopted under division (D) of this section.

(B) If the director determines that a freestanding birthing center is no longer exempt from the requirement to obtain a license under section 3702.30 of the Revised Code because the center ceases to comply with division (A)(4) or (5) of this section, the director may order the center to come into

compliance. In the order, the director may do all of the following:

(1) Identify what the center is not in compliance with and what the center needs to do to come into compliance;

(2) Require that the center come into compliance within a period of time specified in the order;

(3) Require that the center provide the director a written notice within a period of time specified in the order that contains all of the following:

(a) Certification that the center has come into compliance;

(b) The signature of the center's administrator or medical director and certification that the administrator or medical director, whichever signs the notice, is the center's authorized representative;

(c) Certification that the information contained in the notice and in any accompanying documentation is true and accurate;

(d) Any other information or documentation that the director may require to verify that the center has come into compliance.

(C) If the director issues an order to a freestanding birthing center under division (B) of this section and the center fails to comply with the order within the time specified in the order, the director may issue a second order that requires the center to cease operations until the center obtains a license under section 3702.30 of the Revised Code.

(D) The director of health shall adopt rules in accordance

with Chapter 119. of the Revised Code as necessary to implement this section. The rules shall establish all of the following:

(1) Minimum patient safety monitoring and evaluation requirements;

(2) Quality assessment and improvement standards~~.~~, including standards that require both of the following:

(a) At least one of the following to attend each birth:

(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;

(iii) A certified midwife licensed under Chapter 4723. of the Revised Code;

(iv) A licensed midwife licensed under Chapter 4724. of the Revised Code;

(v) A traditional midwife as defined in section 4724.01 of the Revised Code.

(b) That each center have a director of patient services who is one of the following:

(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;

(iii) A registered nurse licensed under Chapter 4723. of the Revised Code;

(iv) A certified midwife licensed under Chapter 4723. of the Revised Code;

(v) A licensed midwife licensed under Chapter 4724. of the Revised Code;

(vi) A traditional midwife as defined in section 4724.01 of the Revised Code.

(3) Procedures for determining whether freestanding birthing centers are in compliance with the rules.

Sec. 3702.35. (A) Each freestanding birthing center shall have a written plan for the transfer of a mother or a newborn to a hospital in the event of medical complications, emergency situations, or as the need arises.

(B) No licensed freestanding birthing center shall be required to establish a written transfer agreement with a hospital if it is both of the following:

(1) Accredited by the commission for the accreditation of birth centers or its successor organization;

(2) Located within thirty miles of a hospital subject to the provisions of the "Emergency Medical Treatment and Labor Act," 42 U.S.C. 1395dd.

(C) A licensed freestanding birthing center that is not accredited by the commission for the accreditation of birth centers or its successor organization shall have a written transfer agreement with a local hospital.

(D) No freestanding birthing center that is exempt from licensure under section 3702.301 of the Revised Code shall be required to establish a written transfer agreement with a hospital.

Sec. 4723.01. As used in this chapter:

(A) "Registered nurse" means an individual who holds a current, valid license issued under this chapter that authorizes the practice of nursing as a registered nurse.

(B) "Practice of nursing as a registered nurse" means providing to individuals and groups nursing care requiring specialized knowledge, judgment, and skill derived from the principles of biological, physical, behavioral, social, and nursing sciences. Such nursing care includes:

(1) Identifying patterns of human responses to actual or potential health problems amenable to a nursing regimen;

(2) Executing a nursing regimen through the selection, performance, management, and evaluation of nursing actions;

(3) Assessing health status for the purpose of providing nursing care;

(4) Providing health counseling and health teaching;

(5) Administering medications, treatments, and executing regimens authorized by an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice;

(6) Teaching, administering, supervising, delegating, and evaluating nursing practice.

(C) "Nursing regimen" may include preventative, restorative, and health-promotion activities.

(D) "Assessing health status" means the collection of data through nursing assessment techniques, which may include interviews, observation, and physical evaluations for the

purpose of providing nursing care.

(E) "Licensed practical nurse" means an individual who holds a current, valid license issued under this chapter that authorizes the practice of nursing as a licensed practical nurse.

(F) "The practice of nursing as a licensed practical nurse" means providing to individuals and groups nursing care requiring the application of basic knowledge of the biological, physical, behavioral, social, and nursing sciences at the direction of a registered nurse or any of the following who is authorized to practice in this state: a physician, physician assistant, dentist, podiatrist, optometrist, or chiropractor. Such nursing care includes:

(1) Observation, patient teaching, and care in a diversity of health care settings;

(2) Contributions to the planning, implementation, and evaluation of nursing;

(3) Administration of medications and treatments authorized by an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice;

(4) Administration to an adult of intravenous therapy authorized by an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice, on the condition that the licensed practical nurse is authorized under section 4723.18 or 4723.181 of the Revised Code to perform intravenous therapy and performs intravenous therapy only in accordance with those sections;

(5) Delegation of nursing tasks as directed by a

registered nurse;

(6) Teaching nursing tasks to licensed practical nurses and individuals to whom the licensed practical nurse is authorized to delegate nursing tasks as directed by a registered nurse.

(G) "Certified registered nurse anesthetist" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified registered nurse anesthetist in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.

(H) "Clinical nurse specialist" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a clinical nurse specialist in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.

(I) "Certified nurse-midwife" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified nurse-midwife in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing. A certified nurse-midwife does not include a certified midwife, licensed midwife, or traditional midwife.

(J) "Certified nurse practitioner" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified nurse practitioner in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.

(K) "Physician" means an individual authorized under

Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.

(L) "Collaboration" or "collaborating" means the following:

(1) In the case of a clinical nurse specialist or a certified nurse practitioner, that one or more podiatrists acting within the scope of practice of podiatry in accordance with section 4731.51 of the Revised Code and with whom the nurse has entered into a standard care arrangement or one or more physicians with whom the nurse has entered into a standard care arrangement are continuously available to communicate with the clinical nurse specialist or certified nurse practitioner either in person or by electronic communication;

(2) In the case of a certified nurse-midwife or certified midwife, that one or more physicians with whom the certified nurse-midwife or certified midwife has entered into a standard care arrangement are continuously available to communicate with the certified nurse-midwife or certified midwife either in person or by electronic communication.

(M) "Supervision," as it pertains to a certified registered nurse anesthetist, means that the certified registered nurse anesthetist is under the direction of a podiatrist acting within the podiatrist's scope of practice in accordance with section 4731.51 of the Revised Code, a dentist acting within the dentist's scope of practice in accordance with Chapter 4715. of the Revised Code, or a physician, and, when administering anesthesia, the certified registered nurse anesthetist is in the immediate presence of the podiatrist, dentist, or physician.

(N) "Standard care arrangement" means a written, formal guide for planning and evaluating a patient's health care that is developed by one or more collaborating physicians or podiatrists and a clinical nurse specialist, certified nurse-midwife, certified midwife, or certified nurse practitioner and meets the requirements of section 4723.431 of the Revised Code.

(O) "Advanced practice registered nurse" means an individual who holds a current, valid license issued under this chapter that authorizes the practice of nursing as an advanced practice registered nurse and is designated as any of the following:

(1) A certified registered nurse anesthetist;

(2) A clinical nurse specialist;

(3) A certified nurse-midwife;

(4) A certified nurse practitioner.

(P) "Practice of nursing as an advanced practice registered nurse" means providing to individuals and groups nursing care that requires knowledge and skill obtained from advanced formal education, training, and clinical experience. Such nursing care includes the care described in section 4723.43 of the Revised Code.

(Q) "Dialysis care" means the care and procedures that a dialysis technician or dialysis technician intern is authorized to provide and perform, as specified in section 4723.72 of the Revised Code.

(R) "Dialysis technician" means an individual who holds a current, valid certificate to practice as a dialysis technician issued under section 4723.75 of the Revised Code.

(S) "Dialysis technician intern" means an individual who has not passed the dialysis technician certification examination required by section 4723.751 of the Revised Code, but who has successfully completed a dialysis training program approved by the board of nursing under section 4723.74 of the Revised Code within the previous eighteen months.

(T) "Certified community health worker" means an individual who holds a current, valid certificate as a community health worker issued under section 4723.85 of the Revised Code.

(U) "Medication aide" means an individual who holds a current, valid certificate issued under this chapter that authorizes the individual to administer medication in accordance with section 4723.67 of the Revised Code;

(V) "Nursing specialty" means a specialty in practice as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner.

(W) "Physician assistant" means an individual who is licensed to practice as a physician assistant under Chapter 4730. of the Revised Code.

(X) "Certified midwife" means an individual who is licensed under section 4723.56 of the Revised Code and engages in one or more of the activities described in that section. A certified midwife does not include a certified nurse-midwife, licensed midwife, or traditional midwife.

(Y) "Licensed midwife" has the same meaning as in section 4724.01 of the Revised Code. A licensed midwife does not include a certified nurse-midwife, certified midwife, or traditional midwife.

(Z) "Traditional midwife" has the same meaning as in section 4724.01 of the Revised Code.

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

The board shall consist of ~~thirteen~~ fifteen members who shall be citizens of the United States and residents of Ohio. Eight members shall be registered nurses, each of whom shall be a graduate of an approved program of nursing education that prepares persons for licensure as a registered nurse, shall hold a currently active license issued under this chapter to practice nursing as a registered nurse, and shall have been actively engaged in the practice of nursing as a registered nurse for the five years immediately preceding the member's initial appointment to the board. Of the eight members who are registered nurses, at least two shall hold a current, valid license issued under this chapter that authorizes the practice of nursing as an advanced practice registered nurse. Four members shall be licensed practical nurses, each of whom shall be a graduate of an approved program of nursing education that prepares persons for licensure as a practical nurse, shall hold a currently active license issued under this chapter to practice nursing as a licensed practical nurse, and shall have been actively engaged in the practice of nursing as a licensed practical nurse for the five years immediately preceding the member's initial appointment to the board. One member shall be a certified nurse-midwife or a certified midwife practicing in an urban setting. One member shall be a certified nurse-midwife or a certified midwife practicing in a rural setting. One member shall represent the interests of consumers of health care. Neither this member nor any person in the member's immediate

family shall be a member of or associated with a health care provider or profession or shall have a financial interest in the delivery or financing of health care. Representation of nursing service and nursing education and of the various geographical areas of the state shall be considered in making appointments.

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 neglect of any duty required by law or for incompetency or unprofessional or dishonorable conduct, after a hearing as provided in Chapter 119. of the Revised Code.

~~Seven~~ Eight members of the board, including at least four registered nurses and at least one licensed practical nurse, shall at all times constitute a quorum.

Each member of the board shall receive an amount fixed pursuant to division (J) of section 124.15 of the Revised Code for each day in attendance at board meetings and in discharge of official duties, and in addition thereto, necessary expense incurred in the performance of such duties.

The board shall elect one of its nurse members as president and one as vice-president. The board shall elect one of its registered nurse members to serve as the supervising member for disciplinary matters.

The board may establish advisory groups to serve in consultation with the board or the executive director. Each advisory group shall be given a specific charge in writing and shall report to the board. Members of advisory groups shall serve without compensation but shall receive their actual and necessary expenses incurred in the performance of their official duties.

Sec. 4723.03. (A) No person shall engage in the practice of nursing as a registered nurse, represent the person as being a registered nurse, or use the title "registered nurse," the initials "R.N.," or any other title implying that the person is a registered nurse, for a fee, salary, or other consideration,

or as a volunteer, without holding a current, valid license as a registered nurse under this chapter.

(B) No person shall knowingly do any of the following without holding a current, valid license to practice nursing as an advanced practice registered nurse issued under this chapter:

(1) Engage in the practice of nursing as an advanced practice registered nurse;

(2) Represent the person as being an advanced practice registered nurse;

(3) Use the title "advanced practice registered nurse," the initials "A.P.R.N.," or any other title implying that the person is an advanced practice registered nurse, for a fee, salary, or other consideration, or as a volunteer.

(C) No person who is not otherwise authorized to do so shall knowingly prescribe or personally furnish drugs or therapeutic devices without holding a current, valid license to practice nursing as an advanced practice registered nurse issued under this chapter and being designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner under section 4723.42 of the Revised Code;

(D) No person shall engage in the practice of nursing as a licensed practical nurse, represent the person as being a licensed practical nurse, or use the title "licensed practical nurse," the initials "L.P.N.," or any other title implying that the person is a licensed practical nurse, for a fee, salary, or other consideration, or as a volunteer, without holding a current, valid license as a practical nurse under this chapter.

(E) No person shall use the titles or initials "graduate nurse," "G.N.," "professional nurse," "P.N.," "graduate

practical nurse," "G.P.N.," "practical nurse," "P.N.," "trained nurse," "T.N.," or any other statement, title, or initials that would imply or represent to the public that the person is authorized to practice nursing in this state, except as follows:

(1) A person licensed under this chapter to practice nursing as a registered nurse may use that title and the initials "R.N.";

(2) A person licensed under this chapter to practice nursing as a licensed practical nurse may use that title and the initials "L.P.N.";

(3) A person licensed under this chapter to practice nursing as an advanced practice registered nurse and designated as a certified registered nurse anesthetist may use that title or the initials "A.P.R.N.-C.R.N.A.";

(4) A person licensed under this chapter to practice nursing as an advanced practice registered nurse and designated as a clinical nurse specialist may use that title or the initials "A.P.R.N.-C.N.S.";

(5) A person licensed under this chapter to practice nursing as an advanced practice registered nurse and designated as a certified nurse-midwife may use that title or the initials "A.P.R.N.-C.N.M.";

(6) A person licensed under this chapter to practice nursing as an advanced practice registered nurse and designated as a certified nurse practitioner may use that title or the initials "A.P.R.N.-C.N.P.";

(7) A person licensed under this chapter to practice nursing as an advanced practice registered nurse may use the title "advanced practice registered nurse" or the initials

"A.P.R.N."

(F) No person shall employ a person not licensed as a registered nurse under this chapter to engage in the practice of nursing as a registered nurse.

No person shall knowingly employ a person not licensed as an advanced practice registered nurse under this chapter to engage in the practice of nursing as an advanced practice registered nurse.

No person shall employ a person not licensed as a practical nurse under this chapter to engage in the practice of nursing as a licensed practical nurse.

(G) No person shall sell or fraudulently obtain or furnish any nursing diploma, license, certificate, renewal, or record, or aid or abet such acts.

(H)(1) No person shall knowingly use the title "certified nurse-midwife," the initials "C.N.M.," or any other title implying that the person is a certified nurse-midwife without holding a current, valid license as a certified nurse-midwife under this chapter.

(2) No person shall knowingly use the title "certified midwife," the initials "C.M.," or any other title implying that the person is a certified midwife without holding a current, valid license as a certified midwife under this chapter.

Sec. 4723.06. (A) The board of nursing shall:

(1) Administer and enforce the provisions of this chapter, including the taking of disciplinary action for violations of section 4723.28 of the Revised Code, any other provisions of this chapter, or rules adopted under this chapter;

(2) Develop criteria that an applicant must meet to be eligible to sit for the examination for licensure to practice as a registered nurse or as a licensed practical nurse;

(3) Issue and renew nursing licenses, certified midwife licenses, dialysis technician certificates, medication aide certificates, and community health worker certificates, as provided in this chapter;

(4) Define the minimum educational standards for the schools and programs of registered nursing and practical nursing in this state;

(5) Survey, inspect, and grant full approval to prelicensure nursing education programs in this state that meet the standards established by rules adopted under section 4723.07 of the Revised Code. Prelicensure nursing education programs include, but are not limited to, diploma, associate degree, baccalaureate degree, master's degree, and doctor of nursing programs leading to initial licensure to practice nursing as a registered nurse and practical nurse programs leading to initial licensure to practice nursing as a licensed practical nurse.

(6) Grant conditional approval, by a vote of a quorum of the board, to a new prelicensure nursing education program or a program that is being reestablished after having ceased to operate, if the program meets and maintains the minimum standards of the board established by rules adopted under section 4723.07 of the Revised Code. If the board does not grant conditional approval, it shall hold an adjudication under Chapter 119. of the Revised Code to consider conditional approval of the program. If the board grants conditional approval, at the first meeting following completion of the survey process required by division (A)(5) of this section, the

board shall determine whether to grant full approval to the program. If the board does not grant full approval or if it appears that the program has failed to meet and maintain standards established by rules adopted under section 4723.07 of the Revised Code, the board shall hold an adjudication under Chapter 119. of the Revised Code to consider the program. Based on results of the adjudication, the board may continue or withdraw conditional approval, or grant full approval.

(7) Place on provisional approval, for a period of time specified by the board, a prelicensure nursing education program that has ceased to meet and maintain the minimum standards of the board established by rules adopted under section 4723.07 of the Revised Code. Prior to or at the end of the period, the board shall reconsider whether the program meets the standards and shall grant full approval if it does. If it does not, the board may withdraw approval, pursuant to an adjudication under Chapter 119. of the Revised Code.

(8) Approve continuing education programs and courses under standards established in rules adopted under sections 4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code;

(9) Establish the safe haven program in accordance with sections 4723.35 and 4723.351 of the Revised Code;

(10) Establish the practice intervention and improvement program in accordance with section 4723.282 of the Revised Code;

(11) Grant approval to the course of study in advanced pharmacology and related topics described in section 4723.482 or 4723.551 of the Revised Code;

(12) Make an annual edition of the exclusionary formulary established in rules adopted under section 4723.50 of the

Revised Code available to the public by electronic means and, as soon as possible after any revision of the formulary becomes effective, make the revision available to the public by electronic means;

(13) Approve under section 4723.46 of the Revised Code national certifying organizations for examination and licensure of advanced practice registered nurses, which may include separate organizations for each nursing specialty;

(14) Provide guidance and make recommendations to the general assembly, the governor, state agencies, and the federal government with respect to the regulation of the practice of nursing and the enforcement of this chapter;

(15) Make an annual report to the governor, which shall be open for public inspection;

(16) Maintain and have open for public inspection the following records:

(a) A record of all its meetings and proceedings;

(b) A record of all applicants for, and holders of, licenses and certificates issued by the board under this chapter or in accordance with rules adopted under this chapter. The record shall be maintained in a format determined by the board.

(c) A list of education and training programs approved by the board.

(17) Deny conditional approval to a new prelicensure nursing education program or a program that is being reestablished after having ceased to operate if the program or a person acting on behalf of the program submits or causes to be submitted to the board false, misleading, or deceptive

statements, information, or documentation in the process of applying for approval of the program. If the board proposes to deny approval of the program, it shall do so pursuant to an adjudication conducted under Chapter 119. of the Revised Code.

(B) The board may fulfill the requirement of division (A)(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 courses. Persons so authorized shall approve continuing education programs and courses in accordance with standards established in rules adopted under section 4723.07 of the Revised Code.

Persons seeking authorization to approve continuing education programs and courses shall apply to the board and pay the appropriate fee established under section 4723.08 of the Revised Code. Authorizations to approve continuing education programs and courses shall expire and may be renewed according to the schedule established in rules adopted under section 4723.07 of the Revised Code.

In addition to approving continuing education programs under division (A)(8) of this section, the board may sponsor continuing education activities that are directly related to the statutes and rules the board enforces.

(C)(1) The board may deny conditional approval to a new prelicensure nursing education program or program that is being reestablished after having ceased to operate if the program is controlled by a person who controls or has controlled a program that had its approval withdrawn, revoked, suspended, or restricted by the board or a board of another jurisdiction that is a member of the national council of state boards of nursing.

If the board proposes to deny approval, it shall do so pursuant to an adjudication conducted under Chapter 119. of the Revised Code.

(2) As used in this division, "control" means any of the following:

(a) Holding fifty per cent or more of the outstanding voting securities or membership interest of a prelicensure nursing education program;

(b) In the case of an unincorporated prelicensure nursing education program, having the right to fifty per cent or more of the program's profits or in the event of a dissolution, fifty per cent or more of the program's assets;

(c) In the case of a prelicensure nursing education program that is a for-profit or not-for-profit corporation, having the contractual authority presently to designate fifty per cent or more of its directors;

(d) In the case of a prelicensure nursing education program that is a trust, having the contractual authority presently to designate fifty per cent or more of its trustees;

(e) Having the authority to direct the management, policies, or investments of a prelicensure nursing education program.

(D)(1) When an action taken by the board under division (A)(6), (7), or (17) or (C)(1) of this section is required to be taken pursuant to an adjudication conducted under Chapter 119. of the Revised Code, the board may, in lieu of an adjudication hearing, enter into a consent agreement to resolve the matter. A consent agreement, when ratified by a vote of a quorum of the board, constitutes the findings and order of the board with

respect to the matter addressed in the agreement. If the board refuses to ratify a consent agreement, the admissions and findings contained in the agreement are of no effect.

(2) In any instance in which the board is required under Chapter 119. of the Revised Code to give notice to a person seeking approval of a prelicensure nursing education program of an opportunity for a hearing and the person does not make a timely request for a hearing in accordance with section 119.07 of the Revised Code, the board is not required to hold a hearing, but may adopt, by a vote of a quorum, a final order that contains the board's findings.

(3) When the board denies or withdraws approval of a prelicensure nursing education program, the board may specify that its action is permanent. A program subject to a permanent action taken by the board is forever ineligible for approval and the board shall not accept an application for the program's reinstatement or approval.

Sec. 4723.07. In accordance with Chapter 119. of the Revised Code, the board of nursing shall adopt and may amend and rescind rules that establish all of the following:

(A) Provisions for the board's government and control of its actions and business affairs;

(B) Subject to section 4723.072 of the Revised Code, minimum standards for nursing education programs that prepare graduates to be licensed under this chapter and procedures for granting, renewing, and withdrawing approval of those programs;

(C) Criteria that applicants for licensure must meet to be eligible to take examinations for licensure;

(D) Standards and procedures for renewal of the licenses

and certificates issued by the board;

(E) Standards for approval of continuing nursing education programs and courses for registered nurses, advanced practice registered nurses, and licensed practical nurses. The standards may provide for approval of continuing nursing education programs and courses that have been approved by other state boards of nursing or by national accreditation systems for nursing, including, but not limited to, the American nurses' credentialing center and the national association for practical nurse education and service.

(F) Standards that persons must meet to be authorized by the board to approve continuing education programs and courses and a schedule by which that authorization expires and may be renewed;

(G) Requirements, including continuing education requirements, for reactivating inactive licenses or certificates, and for reinstating licenses or certificates that have lapsed;

(H) Conditions that may be imposed for reinstatement of a license or certificate following action taken under section 3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised Code resulting in a license or certificate suspension;

(I) Criteria for evaluating the qualifications of an applicant for a license to practice nursing as a registered nurse, a license to practice nursing as an advanced practice registered nurse, or a license to practice nursing as a licensed practical nurse for the purpose of issuing the license by the board's endorsement of the applicant's authority to practice issued by the licensing agency of another state;

(J) Universal and standard precautions that shall be used by each licensee or certificate holder. The rules shall define and establish requirements for universal and standard precautions that include the following:

(1) Appropriate use of hand washing;

(2) Disinfection and sterilization of equipment;

(3) Handling and disposal of needles and other sharp instruments;

(4) Wearing and disposal of gloves and other protective garments and devices.

(K) Quality assurance standards for advanced practice registered nurses;

(L) Additional criteria for the standard care arrangement required by section 4723.431 of the Revised Code entered into by a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and the nurse's collaborating physician or podiatrist;

(M) For purposes of division (B)(31) of section 4723.28 of the Revised Code, the actions, omissions, or other circumstances that constitute failure to establish and maintain professional boundaries with a patient;

(N) Standards and procedures for delegation under section 4723.48 of the Revised Code of the authority to administer drugs.

The board may adopt other rules necessary to carry out the provisions of this chapter. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

Sec. 4723.08. (A) The board of nursing may impose fees not to exceed the following limits:

(1) For application for licensure by examination or endorsement to practice nursing as a registered nurse or as a licensed practical nurse submitted under division (A) or (B) of section 4723.09 of the Revised Code, seventy-five dollars;

(2) For application for licensure to practice nursing as an advanced practice registered nurse submitted under division (A) or (B)(2) of section 4723.41 of the Revised Code, one hundred fifty dollars;

(3) For application for a dialysis technician certificate, the amount specified in rules adopted under section 4723.79 of the Revised Code;

(4) For providing, pursuant to division (B) of section 4723.271 of the Revised Code, written verification of a nursing license, dialysis technician certificate, medication aide certificate, or community health worker certificate to another jurisdiction, fifteen dollars;

(5) For providing, pursuant to division (A) of section 4723.271 of the Revised Code, a replacement copy of a wall certificate suitable for framing as described in that division, twenty-five dollars;

(6) For renewal of a license to practice as a registered nurse or licensed practical nurse, sixty-five dollars;

(7) For renewal of a license to practice as an advanced practice registered nurse, one hundred thirty-five dollars;

(8) For renewal of a dialysis technician certificate, the amount specified in rules adopted under section 4723.79 of the

Revised Code;

(9) For processing a late application for renewal of a nursing license or dialysis technician certificate, fifty dollars;

(10) For application for authorization to approve continuing education programs and courses from an applicant accredited by a national accreditation system for nursing, five hundred dollars;

(11) For application for authorization to approve continuing education programs and courses from an applicant not accredited by a national accreditation system for nursing, one thousand dollars;

(12) For each year for which authorization to approve continuing education programs and courses is renewed, one hundred fifty dollars;

(13) For application for approval to operate a dialysis training program, the amount specified in rules adopted under section 4723.79 of the Revised Code;

(14) For reinstatement of a lapsed license or certificate issued under this chapter, one hundred dollars except as provided in section 5903.10 of the Revised Code;

(15) For processing a check returned to the board by a financial institution, twenty-five dollars;

(16) The amounts specified in rules adopted under section 4723.88 of the Revised Code pertaining to the issuance of certificates to community health workers, including fees for application for a certificate, renewal of a certificate, processing a late application for renewal of a certificate,

reinstatement of a lapsed certificate, application for approval of a community health worker training program for community health workers, and renewal of the approval of a training program for community health workers;

(17) For application for licensure to practice as a certified midwife, an amount equal to the fee for licensure to practice as an advanced practice registered nurse;

(18) For renewal of a license to practice as a certified midwife, an amount equal to the fee for renewal of a license to practice as an advanced practice registered nurse.

(B) Each quarter, for purposes of transferring funds under section 4743.05 of the Revised Code to the nurse education assistance fund created in section 3333.28 of the Revised Code, the board of nursing shall certify to the director of budget and management the number of licenses renewed under this chapter during the preceding quarter and the amount equal to that number times five dollars.

(C) The board may charge a participant in a board-sponsored continuing education activity an amount not exceeding fifteen dollars for each activity.

(D) The board may contract for services pertaining to the process of providing written verification of a license or certificate when the verification is performed for purposes other than providing verification to another jurisdiction. The contract may include provisions pertaining to the collection of the fee charged for providing the written verification. As part of these provisions, the board may permit the contractor to retain a portion of the fees as compensation, before any amounts are deposited into the state treasury.

Sec. 4723.271. (A) Upon request of the holder of a nursing license, certified midwife license, dialysis technician certificate, medication aide certificate, or community health worker certificate issued under this chapter, the presentment of proper identification as prescribed in rules adopted by the board of nursing, and payment of the fee authorized under section 4723.08 of the Revised Code, the board of nursing shall provide to the requestor a replacement copy of a wall certificate suitable for framing.

(B) Upon request of the holder of a nursing license, certified midwife license, volunteer's certificate, dialysis technician certificate, medication aide certificate, or community health worker certificate issued under this chapter and payment of the fee authorized under section 4723.08 of the Revised Code, the board shall verify to an agency of another jurisdiction or foreign country the fact that the person holds such nursing license, certified midwife license, volunteer's certificate, dialysis technician certificate, medication aide certificate, or community health worker certificate.

Sec. 4723.28. (A) The board of nursing, by a vote of a quorum, may impose one or more of the following sanctions if it finds that a person committed fraud in passing an examination required to obtain a nursing license, certified midwife license, or dialysis technician certificate issued by the board or committed fraud, misrepresentation, or deception in applying for or securing a nursing license, certified midwife license, or dialysis technician certificate issued by the board: deny, revoke, suspend, or place restrictions on any nursing license, certified midwife license, or dialysis technician certificate issued by the board; reprimand or otherwise discipline a holder of a nursing license, certified midwife license, or dialysis

technician certificate; or impose a fine of not more than five hundred dollars per violation.

(B) Except as provided in section 4723.092 of the Revised Code, the board of nursing, by a vote of a quorum, may impose one or more of the following sanctions: deny, revoke, suspend, or place restrictions on any nursing license, certified midwife license, or dialysis technician certificate issued by the board; reprimand or otherwise discipline a holder of a nursing license, certified midwife license, or dialysis technician certificate; or impose a fine of not more than five hundred dollars per violation. The sanctions may be imposed for any of the following:

(1) Denial, revocation, suspension, or restriction of authority to engage in a licensed profession or practice a health care occupation, including nursing or practice as a certified midwife or dialysis technician, for any reason other than a failure to renew, in Ohio or another state or jurisdiction;

(2) Engaging in the practice of nursing or engaging in practice as a certified midwife or dialysis technician, having failed to renew a nursing license, certified midwife license, or dialysis technician certificate issued under this chapter, or while a nursing license, certified midwife license, or dialysis technician certificate is under suspension;

(3) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, a misdemeanor committed in the course of practice;

(4) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, any felony or of any crime involving gross immorality or moral turpitude;

(5) Selling, giving away, or administering drugs or therapeutic devices for other than legal and legitimate therapeutic purposes; or conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, violating any municipal, state, county, or federal drug law;

(6) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, an act in another jurisdiction that would constitute a felony or a crime of moral turpitude in Ohio;

(7) Conviction of, a plea of guilty to, a judicial finding of guilt of, a judicial finding of guilt resulting from a plea of no contest to, or a judicial finding of eligibility for a pretrial diversion or similar program or for intervention in lieu of conviction for, an act in the course of practice in another jurisdiction that would constitute a misdemeanor in Ohio;

(8) Self-administering or otherwise taking into the body any dangerous drug, as defined in section 4729.01 of the Revised Code, in any way that is not in accordance with a legal, valid

prescription issued for that individual, or self-administering or otherwise taking into the body any drug that is a schedule I controlled substance;

(9) Habitual or excessive use of controlled substances, other habit-forming drugs, or alcohol or other chemical substances to an extent that impairs the individual's ability to provide safe nursing care, safe care as a certified midwife, or safe dialysis care;

(10) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care, safe care as a certified midwife, or safe dialysis care because of the use of drugs, alcohol, or other chemical substances;

(11) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care, safe care as a certified midwife, or safe dialysis care because of a physical or mental disability;

(12) Assaulting or causing harm to a patient or depriving a patient of the means to summon assistance;

(13) Misappropriation or attempted misappropriation of money or anything of value in the course of practice;

(14) Adjudication by a probate court of being mentally ill or mentally incompetent. The board may reinstate the person's nursing license, certified midwife license, or dialysis technician certificate upon adjudication by a probate court of the person's restoration to competency or upon submission to the board of other proof of competency.

(15) The suspension or termination of employment by the United States department of defense or department of veterans affairs for any act that violates or would violate this chapter;

(16) Violation of this chapter or any rules adopted under it;

(17) Violation of any restrictions placed by the board on a nursing license, certified midwife license, or dialysis technician certificate;

(18) Failure to use universal and standard precautions established by rules adopted under section 4723.07 of the Revised Code;

(19) Failure to practice in accordance with acceptable and prevailing standards of safe nursing care, safe care as a certified midwife, or safe dialysis care;

(20) In the case of a registered nurse, engaging in activities that exceed the practice of nursing as a registered nurse;

(21) In the case of a licensed practical nurse, engaging in activities that exceed the practice of nursing as a licensed practical nurse;

(22) In the case of a dialysis technician, engaging in activities that exceed those permitted under section 4723.72 of the Revised Code;

(23) Aiding and abetting a person in that person's practice of nursing or as a certified midwife without a license or practice as a dialysis technician without a certificate issued under this chapter;

(24) In the case of an advanced practice registered nurse, except as provided in division (M) of this section, either of the following:

(a) Waiving the payment of all or any part of a deductible

or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers such nursing services, would otherwise be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that provider;

(b) Advertising that the nurse will waive the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers such nursing services, would otherwise be required to pay.

(25) Failure to comply with the terms and conditions of participation in the safe haven program conducted under sections 4723.35 and 4723.351 of the Revised Code;

(26) Failure to comply with the terms and conditions required under the practice intervention and improvement program established under section 4723.282 of the Revised Code;

(27) In the case of an advanced practice registered nurse:

(a) Engaging in activities that exceed those permitted for the nurse's nursing specialty under section 4723.43 of the Revised Code;

(b) Failure to meet the quality assurance standards established under section 4723.07 of the Revised Code.

(28) In the case of an advanced practice registered nurse other than a certified registered nurse anesthetist, failure to maintain a standard care arrangement in accordance with section 4723.431 of the Revised Code or to practice in accordance with the standard care arrangement;

(29) In the case of an advanced practice registered nurse

who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, failure to prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code;

(30) Prescribing any drug or device to perform or induce an abortion, or otherwise performing or inducing an abortion;

(31) Failure to establish and maintain professional boundaries with a patient, as specified in rules adopted under section 4723.07 of the Revised Code;

(32) Regardless of whether the contact or verbal behavior is consensual, engaging with a patient other than the spouse of the registered nurse, licensed practical nurse, certified midwife, or dialysis technician in any of the following:

(a) Sexual contact, as defined in section 2907.01 of the Revised Code;

(b) Verbal behavior that is sexually demeaning to the patient or may be reasonably interpreted by the patient as sexually demeaning.

(33) Assisting suicide, as defined in section 3795.01 of the Revised Code;

(34) Failure to comply with the requirements in section 3719.061 of the Revised Code before issuing for a minor a prescription for an opioid analgesic, as defined in section 3719.01 of the Revised Code;

(35) Failure to comply with section 4723.487 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code;

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

(37) In the case of an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, failure to comply with the terms of a consult agreement entered into with a pharmacist pursuant to section 4729.39 of the Revised Code;

(38) Violation of section 4723.93 of the Revised Code;

(39) Failure to cooperate with an investigation conducted by the board under this chapter, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board in an investigative interview, in an investigative office conference, at a deposition, or in written interrogatories, except that failure to cooperate with an investigation does not constitute grounds for discipline if a court of competent jurisdiction has issued an order that either quashes a subpoena or permits the individual to withhold testimony or evidence at issue;

(40) In the case of a certified midwife:

(a) Engaging in activities that exceed those permitted under section 4723.57 of the Revised Code;

(b) Failure to prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code;

(c) Failure to maintain a standard care arrangement in accordance with section 4723.431 of the Revised Code or to

practice in accordance with the standard care arrangement.

(C) Disciplinary actions taken by the board under divisions (A) and (B) of this section shall be taken pursuant to an adjudication conducted under Chapter 119. of the Revised Code, except that in lieu of a hearing, the board may enter into a consent agreement with an individual to resolve an allegation of a violation of this chapter or any rule adopted under it. A consent agreement, when ratified by a vote of a quorum, shall constitute the findings and order of the board with respect to the matter addressed in the agreement. If the board refuses to ratify a consent agreement, the admissions and findings contained in the agreement shall be of no effect.

(D) The hearings of the board shall be conducted in accordance with Chapter 119. of the Revised Code, the board may appoint a hearing examiner, as provided in section 119.09 of the Revised Code, to conduct any hearing the board is authorized to hold under Chapter 119. of the Revised Code.

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

(E) If a criminal action is brought against a registered nurse, licensed practical nurse, certified midwife, or dialysis technician for an act or crime described in divisions (B)(3) to (7) of this section and the action is dismissed by the trial

court other than on the merits, the board shall conduct an adjudication to determine whether the registered nurse, licensed practical nurse, certified midwife, or dialysis technician committed the act on which the action was based. If the board determines on the basis of the adjudication that the registered nurse, licensed practical nurse, certified midwife, or dialysis technician committed the act, or if the registered nurse, licensed practical nurse, certified midwife, or dialysis technician fails to participate in the adjudication, the board may take action as though the registered nurse, licensed practical nurse, certified midwife, or dialysis technician had been convicted of the act.

If the board takes action on the basis of a conviction, plea, or a judicial finding as described in divisions (B)(3) to (7) of this section that is overturned on appeal, the registered nurse, licensed practical nurse, certified midwife, or dialysis technician may, on exhaustion of the appeal process, petition the board for reconsideration of its action. On receipt of the petition and supporting court documents, the board shall temporarily rescind its action. If the board determines that the decision on appeal was a decision on the merits, it shall permanently rescind its action. If the board determines that the decision on appeal was not a decision on the merits, it shall conduct an adjudication to determine whether the registered nurse, licensed practical nurse, certified midwife, or dialysis technician committed the act on which the original conviction, plea, or judicial finding was based. If the board determines on the basis of the adjudication that the registered nurse, licensed practical nurse, certified midwife, or dialysis technician committed such act, or if the registered nurse, licensed practical nurse, certified midwife, or dialysis

technician does not request an adjudication, the board shall reinstate its action; otherwise, the board shall permanently rescind its action.

Notwithstanding the provision of division (D)(2) of section 2953.32 or division (F)(1) of section 2953.39 of the Revised Code specifying that if records pertaining to a criminal case are sealed or expunged under that section the proceedings in the case shall be deemed not to have occurred, sealing or expungement of the following records on which the board has based an action under this section shall have no effect on the board's action or any sanction imposed by the board under this section: records of any conviction, guilty plea, judicial finding of guilt resulting from a plea of no contest, or a judicial finding of eligibility for a pretrial diversion program or intervention in lieu of conviction.

The board shall not be required to seal, destroy, redact, or otherwise modify its records to reflect the court's sealing or expungement of conviction records.

(F) The board may investigate an individual's criminal background in performing its duties under this section. As part of such investigation, the board may order the individual to submit, at the individual's expense, a request to the bureau of criminal identification and investigation for a criminal records check and check of federal bureau of investigation records pursuant to section 4723.091 of the Revised Code.

(G) During the course of an investigation conducted under this section, the board may compel any registered nurse, licensed practical nurse, certified midwife, or dialysis technician or applicant under this chapter to submit to a mental or physical examination, or both, as required by the board and

at the expense of the individual, if the board finds reason to believe that the individual under investigation may have a physical or mental impairment that may affect the individual's ability to provide safe nursing, certified midwifery, or dialysis care.

The board shall not compel an individual who has been referred to the safe haven program as described in sections 4723.35 and 4723.351 of the Revised Code to submit to a mental or physical examination.

Failure of any individual to submit to a mental or physical examination when directed constitutes an admission of the allegations, unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence.

If the board finds that an individual is impaired, the board shall require the individual to submit to care, counseling, or treatment approved or designated by the board, as a condition for initial, continued, reinstated, or renewed authority to practice. The individual shall be afforded an opportunity to demonstrate to the board that the individual can begin or resume the individual's occupation in compliance with acceptable and prevailing standards of care under the provisions of the individual's authority to practice.

For purposes of this division, any registered nurse, licensed practical nurse, certified midwife, or dialysis technician or applicant under this chapter shall be deemed to have given consent to submit to a mental or physical examination when directed to do so in writing by the board, and to have waived all objections to the admissibility of testimony or

examination reports that constitute a privileged communication.

(H) The board shall investigate evidence that appears to show that any person has violated any provision of this chapter 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 complaint or an investigation is confidential and not subject to discovery in any civil action, except that the board may disclose information to law enforcement officers and government entities for purposes of an investigation of either a licensed health care professional, including a registered nurse, licensed practical nurse, certified midwife, or dialysis technician, or a person who may have engaged in the unauthorized practice of nursing, certified midwifery, or dialysis care. No law enforcement officer or government entity with knowledge of any information disclosed by the board pursuant to this division shall divulge the information to any other person or government entity except for the purpose of a government investigation, a prosecution, or an adjudication by a court or government entity.

(2) If an investigation requires a review of patient records, the investigation and proceeding shall be conducted in such a manner as to protect patient confidentiality.

(3) All adjudications and investigations of the board shall be considered civil actions for the purposes of section 2305.252 of the Revised Code.

(4) Any board activity that involves continued monitoring of an individual as part of or following any disciplinary action taken under this section shall be conducted in a manner that maintains the individual's confidentiality. Information received or maintained by the board with respect to the board's monitoring activities is not subject to discovery in any civil action and is confidential, except that the board may disclose information to law enforcement officers and government entities for purposes of an investigation of a licensee or certificate holder.

(J) Any action taken by the board under this section resulting in a suspension from practice shall be accompanied by a written statement of the conditions under which the person may be reinstated to practice.

(K) When the board refuses to grant a license or certificate to an applicant, revokes a license or certificate, or refuses to reinstate a license or certificate, the board may specify that its action is permanent. An individual subject to permanent action taken by the board is forever ineligible to hold a license or certificate of the type that was refused or revoked and the board shall not accept from the individual an application for reinstatement of the license or certificate or for a new license or certificate.

(L) No unilateral surrender of a nursing license, certified midwife license, or dialysis technician certificate issued under this chapter shall be effective unless accepted by majority vote of the board. No application for a nursing

license, certified midwife license, or dialysis technician certificate issued under this chapter may be withdrawn without a majority vote of the board. The board's jurisdiction to take disciplinary action under this section is not removed or limited when an individual has a license or certificate classified as inactive or fails to renew a license or certificate.

(M) Sanctions shall not be imposed under division (B)(24) of this section against any licensee who waives deductibles and copayments as follows:

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

(2) For professional services rendered to any other person licensed pursuant to this chapter to the extent allowed by this chapter and the rules of the board.

Sec. 4723.282. (A) As used in this section, "practice deficiency" means any activity that does not meet acceptable and prevailing standards of safe and effective nursing care or dialysis care or safe and effective care as a certified midwife.

(B) The board of nursing may abstain from taking disciplinary action under section 4723.28 of the Revised Code against the holder of a license or certificate issued under this chapter who has a practice deficiency that has been identified by the board through an investigation conducted under section 4723.28 of the Revised Code. The board may abstain from taking action only if the board has reason to believe that the

individual's practice deficiency can be corrected through remediation, and if the individual enters into an agreement with the board to seek remediation as prescribed by the board, complies with the terms and conditions of the remediation, and successfully completes the remediation. If an individual fails to complete the remediation or the board determines that remediation cannot correct the individual's practice deficiency, the board shall proceed with disciplinary action in accordance with section 4723.28 of the Revised Code.

(C) To implement its authority under this section to abstain from taking disciplinary action, the board shall establish a practice intervention and improvement program. The board shall designate an administrator to operate the program and, in accordance with Chapter 119. of the Revised Code, adopt rules for the program that establish the following:

(1) Criteria for use in identifying an individual's practice deficiency;

(2) Requirements that an individual must meet to be eligible for remediation and the board's abstention from disciplinary action;

(3) Standards and procedures for prescribing remediation that is appropriate for an individual's identified practice deficiency;

(4) Terms and conditions that an individual must meet to be successful in completing the remediation prescribed;

(5) Procedures for the board's monitoring of the individual's remediation;

(6) Procedures for maintaining confidential records regarding individuals who participate in remediation;

(7) Any other requirements or procedures necessary to develop and administer the program.

(D) All records held by the board for purposes of the program shall be confidential, are not public records for purposes of section 149.43 of the Revised Code, and are not subject to discovery by subpoena or admissible as evidence in any judicial proceeding. The administrator of the program shall maintain all records in the board's office in accordance with the board's record retention schedule.

(E) When an individual begins the remediation prescribed by the board, the individual shall sign a waiver permitting any entity that provides services related to the remediation to release to the board information regarding the individual's progress. An entity that provides services related to remediation shall report to the board if the individual fails to complete the remediation or does not make satisfactory progress in remediation.

In the absence of fraud or bad faith, an entity that reports to the board regarding an individual's practice deficiency, or progress or lack of progress in remediation, is not liable in damages to any person as a result of making the report.

(F) An individual participating in remediation prescribed under this section is responsible for all financial obligations that may arise from obtaining or completing the remediation.

Sec. 4723.33. A registered nurse, licensed practical nurse, certified midwife, dialysis technician, community health worker, or medication aide who in good faith makes a report under this chapter or any other provision of the Revised Code

regarding a violation of this chapter or any other provision of the Revised Code, or participates in any investigation, administrative proceeding, or judicial proceeding resulting from the report, has the full protection against retaliatory action provided by sections 4113.51 to 4113.53 of the Revised Code.

Sec. 4723.34. (A) A person or governmental entity that employs, or contracts directly or through another person or governmental entity for the provision of services by, registered nurses, licensed practical nurses, nurses holding multistate licenses to practice registered or licensed practical nursing issued pursuant to section 4723.11 of the Revised Code, certified midwives, dialysis technicians, medication aides, or certified community health workers and that knows or has reason to believe that a current or former employee or person providing services under a contract who holds a license or certificate issued under this chapter engaged in conduct that would be grounds for disciplinary action by the board of nursing under this chapter or rules adopted under it shall report to the board of nursing the name of such current or former employee or person providing services under a contract. The report shall be made on the person's or governmental entity's behalf by an individual licensed by the board who the person or governmental entity has designated to make such reports.

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 the trial court issued an order of dismissal upon technical or procedural grounds of a charge of a misdemeanor committed in the course of practice, a felony charge, or a charge of gross immorality or moral turpitude, who knows or has reason to believe that the person charged is licensed under this chapter to practice nursing as a registered nurse or as a licensed

practical nurse, is licensed under this chapter to practice as a certified midwife, or holds a certificate issued under this chapter to practice as a dialysis technician shall notify the board of nursing of the charge. With regard to certified community health workers and medication aides, the prosecutor in a case involving a charge of a misdemeanor committed in the course of employment, a felony charge, or a charge of gross immorality or moral turpitude, including a case dismissed on technical or procedural grounds, who knows or has reason to believe that the person charged holds a community health worker or medication aide certificate issued under this chapter shall notify the board of the charge.

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

(B) If any person or governmental entity fails to provide a report required by this section, the board may seek an order from a court of competent jurisdiction compelling submission of the report.

Sec. 4723.341. (A) As used in this section, "person" has the same meaning as in section 1.59 of the Revised Code and also includes the board of nursing and its members and employees; health care facilities, associations, and societies; insurers; and individuals.

(B) In the absence of fraud or bad faith, no person reporting to the board of nursing or testifying in an adjudication conducted under Chapter 119. of the Revised Code with regard to alleged incidents of negligence or malpractice or matters subject to this chapter or sections 3123.41 to 3123.50

of the Revised Code and any applicable rules adopted under section 3123.63 of the Revised Code shall be subject to either of the following based on making the report or testifying:

(1) Liability in damages in a civil action for injury, death, or loss to person or property;

(2) Discipline or dismissal by an employer.

(C) An individual who is disciplined or dismissed in violation of division (B)(2) of this section has the same rights and duties accorded an employee under sections 4113.52 and 4113.53 of the Revised Code.

(D) In the absence of fraud or bad faith, no professional association of registered nurses, advanced practice registered nurses, licensed practical nurses, certified midwives, dialysis technicians, community health workers, or medication aides that sponsors a committee or program to provide peer assistance to individuals with substance abuse problems, no representative or agent of such a committee or program, and no member of the board of nursing shall be liable to any person for damages in a civil action by reason of actions taken to refer a nurse, certified midwife, dialysis technician, community health worker, or medication aide to a treatment provider or actions or omissions of the provider in treating a nurse, certified midwife, dialysis technician, community health worker, or medication aide.

Sec. 4723.35. (A) As used in this section and section 4723.351 of the Revised Code:

(1) "Applicant" means an individual who has applied for a license or certificate to practice issued under this chapter. "Applicant" may include an individual who has been granted authority by the board of nursing to practice as one type of

practitioner, but has applied for authority to practice as another type of practitioner.

(2) "Impaired" or "impairment" means either or both of the following:

(a) Impairment of the ability to practice as described in division (B)(10) of section 4723.28 of the Revised Code;

(b) Impairment of the ability to practice as described in division (B)(11) of section 4723.28 of the Revised Code.

(3) "Practitioner" means an individual authorized under this chapter to practice as a registered nurse, including as an advanced practice registered nurse, licensed practical nurse, certified midwife, dialysis technician, community health worker, or medication aide.

(B) The board of nursing shall establish the safe haven program to monitor applicants and practitioners who are or may be impaired, but against whom the board has abstained from taking disciplinary action. The program is to be conducted by the monitoring organization under contract with the board as described in section 4723.351 of the Revised Code.

(C)(1) On the establishment of the program, the board may transfer to the monitoring organization, in whole or in part, either or both of the following responsibilities:

(a) The monitoring and oversight of licensees as part of the substance use disorder program as that program existed on or before ~~the effective date of this section~~ September 20, 2024;

(b) The monitoring and oversight of licensees under terms specified in a board adjudication order or consent agreement.

(2) If the board transfers the responsibilities described

in division (C)(1) of this section, both of the following apply:

(a) The monitoring organization shall provide to the board quarterly reports regarding the compliance of transferred licensees.

(b) The monitoring organization shall immediately report to the board any licensee who is not in compliance with the terms and conditions of monitoring.

(D) The board shall refer to the monitoring organization any applicant or practitioner whose health and effectiveness show signs of impairment or potential impairment, but only if the applicant or practitioner meets the eligibility conditions of division (G) of this section.

(E) Determinations regarding an applicant's or practitioner's eligibility for admission to, continued participation in, and successful completion of the safe haven program shall be made by the monitoring organization in accordance with rules adopted under section 4723.351 of the Revised Code.

(F) The board shall abstain from taking disciplinary action under section 4723.28, 4723.652, or 4723.86 of the Revised Code against an individual whose health and effectiveness show signs of impairment or potential impairment, but who is not currently under the terms of a consent agreement with the board for impairment or an order issued by the board for impairment if the individual is participating in the safe haven program.

An applicant's or practitioner's impairment neither excuses an applicant or practitioner who has committed other violations of this chapter nor precludes the board from

investigating or taking disciplinary action against an applicant or practitioner for other violations of this chapter.

(G) An applicant or practitioner is eligible to participate in the safe haven program if both of the following conditions are met:

(1) The applicant or practitioner needs assistance with impairment or potential impairment.

(2) The applicant or practitioner has an unencumbered license and is not currently under the terms of a consent agreement with the board for impairment or an order issued by the board for impairment.

Sec. 4723.41. (A) Each person who desires to practice nursing as a certified nurse-midwife and has not been authorized to practice ~~midwifery~~ nurse-midwifery prior to December 1, 1967, and each person who desires to practice nursing as a certified registered nurse anesthetist, clinical nurse specialist, or certified nurse practitioner shall file with the board of nursing a written application for a license to practice nursing as an advanced practice registered nurse and designation in the desired specialty. The application must be filed, under oath, on a form prescribed by the board accompanied by the application fee required by section 4723.08 of the Revised Code.

Except as provided in division (B), (C), or (D) of this section, at the time of making application, the applicant shall meet all of the following requirements:

(1) Be a registered nurse;

(2) Submit documentation satisfactory to the board that the applicant has earned a master's or doctoral degree with a major in a nursing specialty or in a related field that

qualifies the applicant to sit for the certification examination of a national certifying organization approved by the board under section 4723.46 of the Revised Code;

(3) Submit documentation satisfactory to the board of having passed the certification examination of a national certifying organization approved by the board under section 4723.46 of the Revised Code to examine and certify, as applicable, nurse-midwives, registered nurse anesthetists, clinical nurse specialists, or nurse practitioners;

(4) Submit an affidavit with the application that states all of the following:

(a) That the applicant is the person named in the documents submitted under this section and is the lawful possessor thereof;

(b) The applicant's age, residence, the school at which the applicant obtained education in the applicant's nursing specialty, and any other facts that the board requires;

(c) The specialty in which the applicant seeks designation.

(B)(1) A certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who is practicing or has practiced as such in another jurisdiction other than another state may apply for a license by endorsement to practice nursing as an advanced practice registered nurse and designation as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner in this state if the nurse meets the requirements set forth in division (A) of this section or division (B)(2) of this section.

(2) If an applicant who is practicing or has practiced in another jurisdiction other than another state applies for designation under division (B)(2) of this section, the application shall be submitted to the board in the form prescribed by rules of the board and be accompanied by the application fee required by section 4723.08 of the Revised Code. The application shall include evidence that the applicant meets the requirements of division (B)(2) of this section, holds authority to practice nursing and is in good standing in another jurisdiction other than another state granted after meeting requirements approved by the entity of that jurisdiction that regulates nurses, and other information required by rules of the board of nursing.

With respect to the educational requirements and national certification requirements that an applicant under division (B)(2) of this section must meet, both of the following apply:

(a) If the applicant is a certified registered nurse anesthetist, certified nurse-midwife, or certified nurse practitioner who, on or before December 31, 2000, obtained certification in the applicant's nursing specialty with a national certifying organization listed in division (A)(3) of section 4723.41 of the Revised Code as that division existed prior to March 20, 2013, or that was at that time approved by the board under section 4723.46 of the Revised Code, the applicant must have maintained the certification. The applicant is not required to have earned a master's or doctoral degree with a major in a nursing specialty or in a related field that qualifies the applicant to sit for the certification examination.

(b) If the applicant is a clinical nurse specialist, one

of the following must apply to the applicant:

(i) On or before December 31, 2000, the applicant obtained a master's or doctoral degree with a major in a clinical area of nursing from an educational institution accredited by a national or regional accrediting organization. The applicant is not required to have passed a certification examination.

(ii) On or before December 31, 2000, the applicant obtained a master's or doctoral degree in nursing or a related field and was certified as a clinical nurse specialist by the American nurses credentialing center or another national certifying organization that was at that time approved by the board under section 4723.46 of the Revised Code.

(3) The board shall grant a license to practice nursing as an advanced practice registered nurse in accordance with Chapter 4796. of the Revised Code to an applicant if either of the following applies:

(a) The applicant holds a license in another state.

(b) The applicant has satisfactory work experience, a government certification, or a private certification as described in that chapter as an advanced practice registered nurse in a state that does not issue that license.

(4) The board may grant a nonrenewable temporary permit to practice nursing as an advanced practice registered nurse to an applicant for licensure under division (B)(2) or (3) of this section if the board is satisfied by the evidence that the applicant holds a valid, unrestricted license in or equivalent authorization from another jurisdiction. Chapter 4796. of the Revised Code does not apply to a temporary permit issued under this division. The temporary permit shall expire at the earlier

of one hundred eighty days after issuance or upon the issuance of a license under division (B)(2) or (3) of this section.

(C) An applicant who desires to practice nursing as a certified registered nurse anesthetist, certified nurse-midwife, or certified nurse practitioner is exempt from the educational requirements in division (A)(2) of this section if all of the following are the case:

(1) Before January 1, 2001, the board issued to the applicant a certificate of authority to practice as a certified registered nurse anesthetist, certified nurse-midwife, or certified nurse practitioner;

(2) The applicant submits documentation satisfactory to the board that the applicant obtained certification in the applicant's nursing specialty with a national certifying organization listed in division (A)(3) of section 4723.41 of the Revised Code as that division existed prior to March 20, 2013, or that was at that time approved by the board under section 4723.46 of the Revised Code;

(3) The applicant submits documentation satisfactory to the board that the applicant has maintained the certification described in division (C)(2) of this section.

(D) An applicant who desires to practice as a clinical nurse specialist is exempt from the examination requirement in division (A)(3) of this section if both of the following are the case:

(1) Before January 1, 2001, the board issued to the applicant a certificate of authority to practice as a clinical nurse specialist;

(2) The applicant submits documentation satisfactory to

the board that the applicant earned either of the following:

(a) A master's or doctoral degree with a major in a clinical area of nursing from an educational institution accredited by a national or regional accrediting organization;

(b) A master's or doctoral degree in nursing or a related field and was certified as a clinical nurse specialist by the American nurses credentialing center or another national certifying organization that was at that time approved by the board under section 4723.46 of the Revised Code.

Sec. 4723.43. A certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may provide to individuals and groups nursing care that requires knowledge and skill obtained from advanced formal education and clinical experience. In this capacity as an advanced practice registered nurse, a certified nurse-midwife is subject to division (A) of this section, a certified registered nurse anesthetist is subject to division (B) of this section, a certified nurse practitioner is subject to division (C) of this section, and a clinical nurse specialist is subject to division (D) of this section.

(A) ~~A~~ Subject to sections 4723.58 to 4723.584 of the Revised Code, a nurse authorized to practice as a certified nurse-midwife, in collaboration with one or more physicians, may provide the management of preventive services and those primary care services necessary to provide health care to women antepartally, intrapartally, postpartally, and gynecologically, consistent with the nurse's education and certification, and in accordance with rules adopted by the board of nursing.

No certified nurse-midwife may perform version, ~~deliver~~

~~breech or face presentation,~~ use forceps, do any obstetric operation, or treat any other abnormal condition outside of the scope of practice for certified nurse-midwives established by the American college of nurse-midwives, except in emergencies. No certified nurse-midwife may deliver breech or face presentation except in an emergency or as provided in section 4723.581 of the Revised Code. Division (A) of this section does not prohibit a certified nurse-midwife from performing episiotomies or normal vaginal deliveries, or repairing vaginal tears. A certified nurse-midwife may, in collaboration with one or more physicians, prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code. A certified nurse-midwife may, in collaboration with one or more physicians, attend births in hospitals, homes, medical offices, and freestanding birthing centers and provide care for normal newborns during the period consistent with the scope of practice for certified nurse-midwives established by the American college of nurse-midwives.

(B) A nurse authorized to practice as a certified registered nurse anesthetist, consistent with the nurse's education and certification and in accordance with rules adopted by the board, may do the following:

(1) With supervision and in the immediate presence of a physician, podiatrist, or dentist, administer anesthesia and perform anesthesia induction, maintenance, and emergence;

(2) With supervision, obtain informed consent for anesthesia care and perform preanesthetic preparation and evaluation, postanesthetic preparation and evaluation, postanesthesia care, and, subject to section 4723.433 of the Revised Code, clinical support functions;

(3) With supervision and in accordance with section 4723.434 of the Revised Code, engage in the activities described in division (A) of that section.

The physician, podiatrist, or dentist supervising a certified registered nurse anesthetist must be actively engaged in practice in this state. When a certified registered nurse anesthetist is supervised by a podiatrist, the nurse's scope of practice is limited to the anesthesia procedures that the podiatrist has the authority under section 4731.51 of the Revised Code to perform. A certified registered nurse anesthetist may not administer general anesthesia under the supervision of a podiatrist in a podiatrist's office. When a certified registered nurse anesthetist is supervised by a dentist, the nurse's scope of practice is limited to the anesthesia procedures that the dentist has the authority under Chapter 4715. of the Revised Code to perform.

(C) A nurse authorized to practice as a certified nurse practitioner, in collaboration with one or more physicians or podiatrists, may provide preventive and primary care services, provide services for acute illnesses, and evaluate and promote patient wellness within the nurse's nursing specialty, consistent with the nurse's education and certification, and in accordance with rules adopted by the board. A certified nurse practitioner may, in collaboration with one or more physicians or podiatrists, prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code.

When a certified nurse practitioner is collaborating with a podiatrist, the nurse's scope of practice is limited to the procedures that the podiatrist has the authority under section 4731.51 of the Revised Code to perform.

(D) A nurse authorized to practice as a clinical nurse specialist, in collaboration with one or more physicians or podiatrists, may provide and manage the care of individuals and groups with complex health problems and provide health care services that promote, improve, and manage health care within the nurse's nursing specialty, consistent with the nurse's education and in accordance with rules adopted by the board. A clinical nurse specialist may, in collaboration with one or more physicians or podiatrists, prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code.

When a clinical nurse specialist is collaborating with a podiatrist, the nurse's scope of practice is limited to the procedures that the podiatrist has the authority under section 4731.51 of the Revised Code to perform.

Sec. 4723.431. (A)(1) ~~An~~ A certified midwife or an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may practice only in accordance with a standard care arrangement entered into with each physician or podiatrist with whom the certified midwife or nurse collaborates. A copy of the standard care arrangement shall be retained on file by the certified midwife's or nurse's employer. Prior approval of the standard care arrangement by the board of nursing is not required, but the board may periodically review it for compliance with this section.

A certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may enter into a standard care arrangement with one or more collaborating physicians or podiatrists. If a collaborating physician or podiatrist enters into standard care arrangements with more than

five certified midwives or nurses, the physician or podiatrist shall not collaborate at the same time with more than five certified midwives or nurses in the prescribing component of their practices.

Not later than thirty days after first engaging in the practice of midwifery as a certified midwife or the practice of nursing as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, the certified midwife or nurse shall submit to the board the name and business address of each collaborating physician or podiatrist. Thereafter, the certified midwife or nurse shall notify the board of any additions or deletions to the midwife's or nurse's collaborating physicians or podiatrists. Except as provided in division (D) of this section, the notice must be provided not later than thirty days after the change takes effect.

(2) All of the following conditions apply with respect to the practice of a collaborating physician or podiatrist with whom a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may enter into a standard care arrangement:

(a) The physician or podiatrist must be authorized to practice in this state.

(b) Except as provided in division (A)(2)(c) of this section, the physician or podiatrist must be practicing in a specialty that is the same as or similar to the certified midwife's specialty or nurse's nursing specialty.

(c) If the nurse is a clinical nurse specialist who is certified as a psychiatric-mental health CNS or the equivalent of such title by the American nurses credentialing center or a

certified nurse practitioner who is certified as a psychiatric-mental health NP or the equivalent of such title by the American nurses credentialing center or American academy of nurse practitioners certification board, the nurse may enter into a standard care arrangement with a physician but not a podiatrist and the collaborating physician must be practicing in one of the following specialties:

(i) Psychiatry;

(ii) Pediatrics;

(iii) Primary care or family practice.

(B) A standard care arrangement shall be in writing and shall contain all of the following:

(1) Criteria for referral of a patient by the certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to a collaborating physician or podiatrist or another physician or podiatrist;

(2) A process for the certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to obtain a consultation with a collaborating physician or podiatrist or another physician or podiatrist;

(3) A plan for coverage in instances of emergency or planned absences of either the certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner or a collaborating physician or podiatrist that provides the means whereby a physician or podiatrist is available for emergency care;

(4) The process for resolution of disagreements regarding matters of patient management between the certified midwife,

clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and a collaborating physician or podiatrist;

(5) An agreement that the collaborating physician shall complete and sign the medical certificate of death pursuant to section 3705.16 of the Revised Code;

(6) Any other criteria required by rule of the board adopted pursuant to section 4723.07 or 4723.50 of the Revised Code.

(C) A standard care arrangement entered into pursuant to this section may permit a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to do any of the following:

(1) Supervise services provided by a home health agency as defined in section 3740.01 of the Revised Code;

(2) Admit a patient to a hospital in accordance with section 3727.06 of the Revised Code;

(3) Sign any document relating to the admission, treatment, or discharge of an inpatient receiving psychiatric or other behavioral health care services, but only if the conditions of section 4723.436 of the Revised Code have been met.

(D)(1) Except as provided in division (D)(2) of this section, if a physician or podiatrist terminates the collaboration between the physician or podiatrist and a certified midwife, certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist before their standard care arrangement expires, all of the following apply:

(a) The physician or podiatrist must give the certified

midwife or nurse written or electronic notice of the termination.

(b) Once the certified midwife or nurse receives the termination notice, the certified midwife or nurse must notify the board of nursing of the termination as soon as practicable by submitting to the board a copy of the physician's or podiatrist's termination notice.

(c) Notwithstanding the ~~requirement~~ requirements of ~~section~~ sections 4723.43 and 4723.57 of the Revised Code that the certified midwife or nurse practice in collaboration with a physician or podiatrist, the certified midwife or nurse may continue to practice under the existing standard care arrangement without a collaborating physician or podiatrist for not more than one hundred twenty days after submitting to the board a copy of the termination notice.

(2) In the event that the collaboration between a physician or podiatrist and a certified midwife, certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist terminates because of the physician's or podiatrist's death, the certified midwife or nurse must notify the board of the death as soon as practicable. The certified midwife or nurse may continue to practice under the existing standard care arrangement without a collaborating physician or podiatrist for not more than one hundred twenty days after notifying the board of the physician's or podiatrist's death.

(E)(1) Nothing in this section prohibits a hospital from hiring a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner as an employee and negotiating standard care arrangements on behalf of the employee as necessary to meet the requirements of this section.

A standard care arrangement between the hospital's employee and the employee's collaborating physician is subject to approval by the medical staff and governing body of the hospital prior to implementation of the arrangement at the hospital.

(2) Nothing in this section prohibits a standard care arrangement from specifying actions that a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner is authorized to take, or is prohibited from taking, as part of the nurse's practice in collaboration with a physician or podiatrist. In specifying such actions, the standard care arrangement shall not authorize the nurse to take any action that is otherwise prohibited by the Revised Code or rule of the board.

Sec. 4723.432. (A) ~~An~~ A certified midwife or an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner shall cooperate with the state medical board in any investigation the board conducts with respect to a physician or podiatrist who collaborates with the certified midwife or nurse. The certified midwife or nurse shall cooperate with the board in any investigation the board conducts with respect to the unauthorized practice of medicine by the certified midwife or nurse.

(B) An advanced practice registered nurse who is designated as a certified registered nurse anesthetist shall cooperate with the state medical board or state dental board in any investigation either board conducts with respect to a physician, podiatrist, or dentist who permits the nurse to practice with the supervision of that physician, podiatrist, or dentist. The nurse shall cooperate with either board in any

investigation it conducts with respect to the unauthorized practice of medicine or dentistry by the nurse.

Sec. 4723.481. This section establishes standards and conditions regarding the authority of an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to prescribe and personally furnish drugs and therapeutic devices under a license issued under section 4723.42 of the Revised Code.

This section also establishes standards and conditions regarding the authority of a certified midwife to prescribe and personally furnish drugs and therapeutic devices under a license issued under section 4723.56 of the Revised Code.

(A) A clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife shall not prescribe or furnish any drug or therapeutic device that is listed on the exclusionary formulary established in rules adopted under section 4723.50 of the Revised Code.

(B) The prescriptive authority of a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife shall not exceed the prescriptive authority of the collaborating physician or podiatrist, including the collaborating physician's authority to treat chronic pain with controlled substances and products containing tramadol as described in section 4731.052 of the Revised Code.

(C)(1) Except as provided in division (C)(2) or (3) of this section, a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife

may prescribe to a patient a schedule II controlled substance only if all of the following are the case:

(a) The patient has a terminal condition, as defined in section 2133.01 of the Revised Code.

(b) A physician initially prescribed the substance for the patient.

(c) The prescription is for an amount that does not exceed the amount necessary for the patient's use in a single, seventy-two-hour period.

(2) The restrictions on prescriptive authority in division (C)(1) of this section do not apply if a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife issues the prescription to the patient from any of the following entities:

(a) A hospital as defined in section 3722.01 of the Revised Code;

(b) An entity owned or controlled, in whole or in part, by a hospital or by an entity that owns or controls, in whole or in part, one or more hospitals;

(c) A health care facility operated by the department of mental health and addiction services or the department of developmental disabilities;

(d) A nursing home licensed under section 3721.02 of the Revised Code or by a political subdivision certified under section 3721.09 of the Revised Code;

(e) A county home or district home operated under Chapter 5155. of the Revised Code that is certified under the medicare or medicaid program;

(f) A hospice care program, as defined in section 3712.01 of the Revised Code;

(g) A community mental health services provider, as defined in section 5122.01 of the Revised Code;

(h) An ambulatory surgical facility, as defined in section 3702.30 of the Revised Code;

(i) A freestanding birthing center, as defined in section 3701.503 of the Revised Code;

(j) A federally qualified health center, as defined in section 3701.047 of the Revised Code;

(k) A federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;

(l) A health care office or facility operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code;

(m) A site where a medical practice is operated, but only if the practice is comprised of one or more physicians who also are owners of the practice; the practice is organized to provide direct patient care; and the clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife providing services at the site has a standard care arrangement and collaborates with at least one of the physician owners who practices primarily at that site;

(n) A site where a behavioral health practice is operated that does not qualify as a location otherwise described in division (C)(2) of this section, but only if the practice is organized to provide outpatient services for the treatment of

mental health conditions, substance use disorders, or both, and the clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife providing services at the site of the practice has a standard care arrangement and collaborates with at least one physician who is employed by that practice;

(o) A residential care facility, as defined in section 3721.01 of the Revised Code.

(3) A clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife shall not issue to a patient a prescription for a schedule II controlled substance from a convenience care clinic even if the clinic is owned or operated by an entity specified in division (C)(2) of this section.

(D) A pharmacist who acts in good faith reliance on a prescription issued by a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife under division (C)(2) of this section is not liable for or subject to any of the following for relying on the prescription: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action by the state board of pharmacy under Chapter 4729. of the Revised Code.

(E) A clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife shall comply with section 3719.061 of the Revised Code if the nurse prescribes for a minor, as defined in that section, an opioid analgesic, as defined in section 3719.01 of the Revised Code.

Sec. 4723.483. (A)(1) Subject to division (A)(2) of this section, and notwithstanding any provision of this chapter or

rule adopted by the board of nursing, a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner ~~who holds a certificate to prescribe issued under section 4723.48 of the Revised Code~~, or certified midwife may do either of the following without having examined an individual to whom epinephrine may be administered:

(a) Personally furnish a supply of epinephrine autoinjectors for use in accordance with sections 3313.7110, 3313.7111, 3314.143, 3326.28, 3328.29, 3728.03 to 3728.05, and 5180.26 of the Revised Code;

(b) Issue a prescription for epinephrine autoinjectors for use in accordance with sections 3313.7110, 3313.7111, 3314.143, 3326.28, 3328.29, 3728.03 to 3728.05, and 5180.26 of the Revised Code.

(2) An epinephrine autoinjector personally furnished or prescribed under division (A)(1) of this section must be furnished or prescribed in such a manner that it may be administered only in a manufactured dosage form.

(B) A nurse or certified midwife who acts in good faith in accordance with this section is not liable for or subject to any of the following for any action or omission of an entity to which an epinephrine autoinjector is furnished or a prescription is issued: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 4723.487. (A) As used in this section:

(1) "Drug database" means the database established and maintained by the state board of pharmacy pursuant to section 4729.75 of the Revised Code.

(2) "Opioid analgesic" and "benzodiazepine" have the same

meanings as in section 3719.01 of the Revised Code.

(B) Except as provided in divisions (C) and (E) of this section, an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner or a certified midwife shall comply with all of the following as conditions of prescribing a drug that is either an opioid analgesic or a benzodiazepine as part of a patient's course of treatment for a particular condition:

(1) Before initially prescribing the drug, the advanced practice registered nurse or certified midwife or the advanced practice registered nurse's or certified midwife's delegate shall request from the drug database a report of information related to the patient that covers at least the twelve months immediately preceding the date of the request. If the advanced practice registered nurse or certified midwife practices primarily in a county of this state that adjoins another state, the advanced practice registered nurse or certified midwife or delegate also shall request a report of any information available in the drug database that pertains to prescriptions issued or drugs furnished to the patient in the state adjoining that county.

(2) If the patient's course of treatment for the condition continues for more than ninety days after the initial report is requested, the advanced practice registered nurse or certified midwife or delegate shall make periodic requests for reports of information from the drug database until the course of treatment has ended. The requests shall be made at intervals not exceeding ninety days, determined according to the date the initial request was made. The request shall be made in the same manner provided in division (B)(1) of this section for requesting the

initial report of information from the drug database.

(3) On receipt of a report under division (B)(1) or (2) of this section, the advanced practice registered nurse or certified midwife shall assess the information in the report. The advanced practice registered nurse or certified midwife shall document in the patient's record that the report was received and the information was assessed.

(C) Division (B) of this section does not apply ~~if~~ in any of the following circumstances:

(1) A drug database report regarding the patient is not available, in which case the advanced practice registered nurse or certified midwife shall document in the patient's record the reason that the report is not available.

(2) The drug is prescribed in an amount indicated for a period not to exceed seven days.

(3) The drug is prescribed for the treatment of cancer or another condition associated with cancer.

(4) The drug is prescribed to a hospice patient in a hospice care program, as those terms are defined in section 3712.01 of the Revised Code, or any other patient diagnosed as terminally ill.

(5) The drug is prescribed for administration in a hospital, nursing home, or residential care facility.

(D) The board of nursing may adopt rules, in accordance with Chapter 119. of the Revised Code, that establish standards and procedures to be followed by an advanced practice registered nurse or certified midwife regarding the review of patient information available through the drug database under division

(A)(5) of section 4729.80 of the Revised Code. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

(E) This section and any rules adopted under it do not apply if the state board of pharmacy no longer maintains the drug database.

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

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

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

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

(3) The license holder does not practice ~~nursing~~ as an advanced practice registered nurse or certified midwife in this state.

(C) If a license holder certifies to the board of nursing that the holder has been granted access to the drug database and the board finds through an audit or other means that the holder

has not been granted access, the board may take action under section 4723.28 of the Revised Code.

Sec. 4723.4810. (A)(1) Notwithstanding any conflicting provision of this chapter or rule adopted by the board of nursing, a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, ~~who holds a license to practice nursing as an advanced practice registered nurse issued under section 4723.42 of the Revised Code~~ or certified midwife may issue a prescription for or personally furnish a complete or partial supply of a drug to treat chlamydia, gonorrhea, or trichomoniasis, without having examined the individual for whom the drug is intended, if all of the following conditions are met:

(a) The individual is a sexual partner of the nurse's or certified midwife's patient.

(b) The patient has been diagnosed with chlamydia, gonorrhea, or trichomoniasis.

(c) The patient reports to the nurse or certified midwife that the individual is unable or unlikely to be evaluated or treated by a health professional.

(2) A prescription issued under this section shall include the individual's name and address, if known. If the nurse or certified midwife is unable to obtain the individual's name and address, the prescription shall include the patient's name and address and the words "expedited partner therapy" or the letters "EPT."

(3) A nurse or certified midwife may prescribe or personally furnish a drug under this section for not more than a total of two individuals who are sexual partners of the nurse's

or certified midwife's patient.

(B) For each drug prescribed or personally furnished under this section, the nurse or certified midwife shall do all of the following:

(1) Provide the patient with information concerning the drug for the purpose of sharing the information with the individual, including directions for use of the drug and any side effects, adverse reactions, or known contraindications associated with the drug;

(2) Recommend to the patient that the individual seek treatment from a health professional;

(3) Document all of the following in the patient's record:

(a) The name of the drug prescribed or furnished and its dosage;

(b) That information concerning the drug was provided to the patient for the purpose of sharing the information with the individual;

(c) If known, any adverse reactions the individual experiences from treatment with the drug.

(C) A nurse or certified midwife who prescribes or personally furnishes a drug under this section may contact the individual for whom the drug is intended.

(1) If the nurse or certified midwife contacts the individual, the nurse or certified midwife shall do all of the following:

(a) Inform the individual that the individual may have been exposed to chlamydia, gonorrhea, or trichomoniasis;

(b) Encourage the individual to seek treatment from a health professional;

(c) Explain the treatment options available to the individual, including treatment with a prescription drug, directions for use of the drug, and any side effects, adverse reactions, or known contraindications associated with the drug;

(d) Document in the patient's record that the nurse or certified midwife contacted the individual.

(2) If the nurse or certified midwife does not contact the individual, the nurse or certified midwife shall document that fact in the patient's record.

(D) A nurse or certified midwife who in good faith prescribes or personally furnishes a drug under this section is not liable for or subject to any of the following:

(1) Damages in any civil action;

(2) Prosecution in any criminal proceeding;

(3) Professional disciplinary action.

Sec. 4723.4811. (A)(1) Subject to division (A)(2) of this section, and notwithstanding any provision of this chapter or rule adopted by the board of nursing, a clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner ~~licensed as an advanced practice registered nurse under Chapter 4723. of the Revised Code~~, or certified midwife may do either of the following without having examined an individual to whom glucagon may be administered:

(a) Personally furnish a supply of injectable or nasally administered glucagon for use in accordance with sections 3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5180.262

of the Revised Code;

(b) Issue a prescription for injectable or nasally administered glucagon for use in accordance with sections 3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5180.262 of the Revised Code.

(2) Injectable or nasally administered glucagon personally furnished or prescribed under division (A)(1) of this section must be furnished or prescribed in such a manner that it may be administered only in a manufactured dosage form.

(B) A nurse or certified midwife who acts in good faith in accordance with this section is not liable for or subject to any of the following for any action or omission of an entity to which injectable or nasally administered glucagon is furnished or a prescription is issued: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 4723.50. (A) As used in this section:

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

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

(B) In accordance with Chapter 119. of the Revised Code, the board of nursing shall adopt rules as necessary to implement the provisions of this chapter pertaining to the authority of ~~advanced practice registered nurses who are designated as~~ clinical nurse specialists, certified nurse-midwives, ~~and~~ certified nurse practitioners, and certified midwives to prescribe and furnish drugs and therapeutic devices.

The board shall adopt rules establishing an exclusionary formulary. The exclusionary formulary shall permit, in a manner consistent with section 4723.481 of the Revised Code, the prescribing of controlled substances, including drugs that contain buprenorphine used in medication-assisted treatment and both oral and long-acting opioid antagonists. The formulary shall not permit the prescribing or furnishing of any of the following:

(1) A drug or device to perform or induce an abortion;

(2) A drug or device prohibited by federal or state law.

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

(1) Establish standards for board approval of the course of study in advanced pharmacology and related topics required by ~~section~~ sections 4723.482 and 4723.551 of the Revised Code;

(2) Establish requirements for board approval of the two-hour course of instruction in the laws of this state as required under division (C)(1) of section 4723.482 of the Revised Code;

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

(a) Quality assurance standards;

(b) Standards for periodic review by a collaborating physician or podiatrist of the records of patients treated by

the clinical nurse specialist, certified nurse-midwife, ~~or~~ certified nurse practitioner, or certified midwife;

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

Sec. 4723.53. As used in sections 4723.43 and 4723.53 to 4723.60 of the Revised Code:

(A) "Accreditation commission for midwifery education" means the organization known by that name or its successor organization.

(B) "American college of nurse-midwives" means the organization known by that name or its successor organization.

(C) "American midwifery certification board" means the organization known by that name or its successor organization.

Sec. 4723.54. (A) Except as provided in division (B) of this section, no individual shall knowingly practice as a certified midwife unless the individual holds a current, valid license to practice as a certified midwife issued under section 4723.56 of the Revised Code.

(B) Division (A) of this section does not apply to any of the following:

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

(2) A physician assistant authorized under Chapter 4730.

of the Revised Code to practice as a physician assistant;

(3) A registered nurse, advanced practice registered nurse, or licensed practical nurse authorized under this chapter to practice nursing as a registered nurse, advanced practice registered nurse, or licensed practical nurse;

(4) A licensed midwife;

(5) A traditional midwife;

(6) A student who is participating in a midwifery education program accredited by the accreditation commission for midwifery education and who provides midwifery services under the auspices of the program and under the supervision of a certified midwife serving for the program as a faculty member, instructor, teaching assistant, or preceptor.

Sec. 4723.55. (A) An individual seeking a license to practice as a certified midwife shall file with the board of nursing an application in a manner prescribed by the board. The application shall include all the information the board considers necessary to process the application, including evidence satisfactory to the board that the applicant meets the requirements specified in division (B) of this section.

(B) To be eligible to receive a license to practice as a certified midwife, an applicant shall demonstrate to the board that the applicant meets all of the following requirements:

(1) Is at least eighteen years of age;

(2) Has attained a master's degree or higher;

(3) Has graduated from a midwifery education program accredited by the accreditation commission for midwifery education;

(4) Is certified by the American midwifery certification board;

(5) Is certified in neonatal and adult cardiopulmonary resuscitation;

(6) Has successfully completed the course of study in advanced pharmacology required by section 4723.551 of the Revised Code.

(C) The board shall review all applications received under this section. After receiving an application it considers complete, the board shall determine whether the applicant meets the requirements for a license to practice as a certified midwife.

Sec. 4723.551. (A) An applicant for a license to practice as a certified midwife shall include with the application submitted under section 4723.55 of the Revised Code evidence of successfully completing the course of study in advanced pharmacology and related topics in accordance with the requirements specified in division (B) of this section.

(B) With respect to the course of study in advanced pharmacology and related topics, all of the following requirements apply:

(1) The course of study shall be completed not more than five years before the application is filed.

(2) The course of study shall include at least forty-five contact hours.

(3) The course of study shall meet the requirements to be approved by the board in accordance with standards established in rules adopted under section 4723.50 of the Revised Code.

(4) The content of the course of study shall be specific to midwifery.

(5) The instruction provided in the course of study shall include all of the following:

(a) A minimum of thirty-six contact hours of instruction in advanced pharmacology that includes pharmacokinetic principles and clinical application and the use of drugs and therapeutic devices in the prevention of illness and maintenance of health;

(b) Instruction in the fiscal and ethical implications of prescribing drugs and therapeutic devices;

(c) Instruction in the state and federal laws that apply to the authority to prescribe;

(d) Instruction that is specific to schedule II controlled substances, including instruction in all of the following:

(i) Indications for the use of schedule II controlled substances in drug therapies;

(ii) The most recent guidelines for pain management therapies, as established by state and national organizations such as the Ohio pain initiative and the American pain society;

(iii) Fiscal and ethical implications of prescribing schedule II controlled substances;

(iv) State and federal laws that apply to the authority to prescribe schedule II controlled substances;

(v) Prevention of abuse and diversion of schedule II controlled substances, including identification of the risk of abuse and diversion, recognition of abuse and diversion, types

of assistance available for prevention of abuse and diversion, and methods of establishing safeguards against abuse and diversion.

Sec. 4723.56. (A) If the board of nursing determines under section 4723.55 of the Revised Code that an applicant meets the requirements for a license to practice as a certified midwife, the secretary of the board shall issue the license to the applicant.

(B) Each license shall be valid for a two-year period unless revoked or suspended, shall expire on the date that is two years after the date of issuance, and may be renewed for additional two-year periods in accordance with rules adopted under section 4723.59 of the Revised Code.

(C) To renew a license to practice as a certified midwife, an applicant for renewal shall demonstrate both of the following to the board:

(1) That the applicant has maintained certification in neonatal and adult cardiopulmonary resuscitation;

(2) That the applicant has satisfied the continuing education requirements of the American midwifery certification board.

Sec. 4723.57. (A) An individual who holds a current, valid license to practice as a certified midwife may, in collaboration with one or more physicians, engage in one or more of the following activities:

(1) Providing primary health care services for women from adolescence and beyond menopause, including the independent provision of gynecologic and family planning services, preconception care, and care during pregnancy, childbirth, and

the postpartum period;

(2) Attending births in hospitals, homes, medical offices, and freestanding birthing centers;

(3) Providing care for normal newborns during the period consistent with the scope of practice for certified nurse-midwives established by the American college of nurse-midwives;

(4) Providing initial and ongoing comprehensive assessment, diagnosis, and treatment;

(5) Conducting physical examinations;

(6) Ordering and interpreting laboratory and diagnostic tests;

(7) Administering medications, treatments, and executing regimens authorized by an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice;

(8) Providing care that includes health promotion, disease prevention, and individualized wellness education and counseling.

(B) When engaging in any of the activities permitted under this section, a certified midwife shall maintain appropriate medical records regarding patient history, treatment, and outcomes.

Sec. 4723.58. (A) This section establishes the process by which a certified nurse-midwife or certified midwife obtains a patient's consent to treatment authorized by section 4723.43 or 4723.57 of the Revised Code, but only when the certified nurse-midwife or certified midwife seeks to provide the treatment in a setting other than a hospital or facility.

(B) The following information shall be exchanged in writing between a certified nurse-midwife or certified midwife and patient when obtaining consent to treatment as described in division (A) of this section:

(1) The name and license number of the certified nurse-midwife or certified midwife;

(2) The patient's name, address, telephone number, and primary care provider, if the patient has one;

(3) A description of the certified nurse-midwife's or certified midwife's education, training, and experience in nurse-midwifery or midwifery;

(4) The certified nurse-midwife's or certified midwife's practice philosophy;

(5) A promise to provide the patient, upon request, with separate documents describing the rules governing the practice of a certified nurse-midwife or certified midwife, including a list of conditions indicating the need for consultation, referral, transfer, or mandatory transfer and the certified nurse-midwife's or certified midwife's personal written practice guidelines;

(6) A written plan for medical consultation and transfer of care;

(7) A description of any hospital care and procedures that may be necessary in the event of an emergency transfer or care;

(8) A description of the services provided to the patient by the certified nurse-midwife or certified midwife;

(9) That the certified nurse-midwife or certified midwife holds a current, valid license to practice issued under this

chapter;

(10) The availability of a grievance process;

(11) Whether the certified nurse-midwife or certified midwife is covered by professional liability insurance;

(12) Any other information required in rules adopted by the board.

(C) Once the required information has been exchanged and if the patient consents to treatment, the patient and certified nurse-midwife or certified midwife shall sign a written document to indicate as such. The certified nurse-midwife or certified midwife shall retain a copy of the document for at least four years from the date on which the document was signed.

Sec. 4723.581. (A) The board of nursing shall adopt rules establishing the circumstances in which a certified nurse-midwife or certified midwife shall be prohibited from attending a home birth, which may include a high-risk pregnancy. In adopting the rules, the board shall allow a certified nurse-midwife or certified midwife to attend any of the following as a home birth only if the conditions described in division (B) of this section are satisfied: a vaginal birth after cesarean, birth of twins, or breech birth.

(B) In the event of a home birth described in division (A) of this section, a certified nurse-midwife or certified midwife may attend the birth only if all of the following conditions are satisfied:

(1) In addition to the informed consent required under section 4723.58 of the Revised Code, the certified nurse-midwife or certified midwife obtains the patient's written informed consent for the vaginal birth after cesarean, birth of twins, or

breech birth, including a description of risks associated with the procedure.

(2) The certified nurse-midwife or certified midwife consults with a physician about the patient and together with the physician determines whether referral is appropriate for the patient.

If a referral is determined to be appropriate and the patient consents to the referral, the certified nurse-midwife or certified midwife shall refer the patient to the physician. If the patient refuses the referral, the certified nurse-midwife or certified midwife shall document the refusal and may continue to provide care to the patient, including attending the vaginal birth after cesarean, birth of twins, or breech birth at home.

(3) The certified nurse-midwife or certified midwife satisfies any other conditions required in rules adopted by the board of nursing.

(C) In adopting rules under this section, the board of nursing shall do both of the following:

(1) Consider any relevant peer-reviewed medical literature;

(2) Specify the content and format of the document to be used when obtaining informed consent as described in this section.

Sec. 4723.582. (A) As used in this section and section 4723.583 of the Revised Code, "emergency medical service," "emergency medical service personnel," and "emergency medical service organization" have the same meanings as in section 4765.01 of the Revised Code.

(B) For any pregnancy or childbirth in which a certified nurse-midwife or certified midwife provides care and a home birth is planned, both of the following apply:

(1) The certified nurse-midwife or certified midwife shall create an individualized transfer of care plan with each patient.

(2) The certified nurse-midwife or certified midwife shall assess the status of the patient, fetus, and newborn throughout the maternity care cycle and shall determine when or if a transfer to a hospital is necessary.

(C) Each individualized transfer of care plan shall contain all of the following:

(1) The name and location of geographically adjacent hospitals that are appropriately equipped to provide emergency care, obstetrical care, and newborn care;

(2) The approximate travel time to each hospital;

(3) A list of the modes of transport services available, including an emergency medical service organization available by calling 9-1-1;

(4) The requirements for activating each mode of transportation;

(5) The mechanism by which medical records and other information concerning the patient may be rapidly transmitted to each hospital;

(6) Confirmation that the certified nurse-midwife or certified midwife has recommended that the patient pre-register with the hospital closest to the patient's home that is appropriately equipped to provide emergency care, obstetrical

care, and newborn care;

(7) Contact information for either a health care provider or practice group who has agreed in advance to accept patients in transfer, or a hospital's preferred method of accessing care by the hospital's designated provider on call;

(8) Any other information required in rules adopted by the board of nursing.

(D) When it becomes necessary to transfer a patient, a certified nurse-midwife or certified midwife shall notify the receiving provider or hospital of all of the following:

(1) The incoming transfer;

(2) The reason for the transfer;

(3) A brief relevant clinical history;

(4) The planned mode of transport;

(5) The expected time of arrival;

(6) Any other information required in rules adopted by the board.

The certified nurse-midwife or certified midwife shall continue to provide routine or urgent care en route in coordination with any emergency medical services personnel or emergency medical service organization and shall address the psychosocial needs of the patient during the change of birth setting.

(E) On arrival at the hospital, the certified nurse-midwife or certified midwife shall do all of the following:

(1) Provide a verbal report that includes details on the patient's current health status and the need for urgent care;

(2) Provide a legible copy of relevant prenatal and labor medical records;

(3) Transfer clinical responsibility to the receiving provider or hospital;

(4) Satisfy any other requirement established in rules adopted by the board of nursing.

If the patient chooses, the certified nurse-midwife or certified midwife may remain at the hospital to provide continuous support. The certified nurse-midwife or certified midwife also may continue to provide midwifery services, but only if the hospital has granted the certified nurse-midwife or certified midwife clinical privileges. Whenever possible, the patient and her newborn shall be together during the transfer and after admission to the hospital.

Sec. 4723.583. Emergency medical service personnel or an emergency medical service organization, hospital, facility, physician, advanced practice registered nurse, or certified midwife that provides services or care following an adverse incident as defined in section 4723.584 of the Revised Code or during and after a transfer of care as described in section 4723.582 of the Revised Code are not liable in damages in a tort or other civil action for injury or loss to person or property arising from the services or care, unless the services or care are provided in a manner that constitutes willful or wanton misconduct.

Sec. 4723.584. (A) As used in this section, "adverse incident" means an incident over which a certified nurse-midwife or certified midwife could exercise control, that is associated with an attempted or completed birth in a setting or facility

other than a hospital, and that results in one or more of the following injuries or conditions:

(1) A maternal death that occurs during delivery or within forty-two days after delivery;

(2) The transfer of a maternal patient to a hospital intensive care unit;

(3) A maternal patient experiencing hemorrhagic shock or requiring a transfusion of more than two units of blood or blood products;

(4) A fetal or newborn death, including a stillbirth, associated with an obstetrical delivery;

(5) A transfer of a newborn to a neonatal intensive care unit due to a traumatic physical or neurological birth injury, including any degree of a brachial plexus injury;

(6) A transfer of a newborn to a neonatal intensive care unit within the first seventy-two hours after birth if the newborn remains in such unit for more than seventy-two hours;

(7) Any other condition as determined by the board of nursing in rules adopted under section 4723.07 or 4723.59 of the Revised Code.

(B) Beginning July 1, 2027, a certified nurse-midwife or certified midwife who attends a birth planned for a facility or setting other than a hospital must report any adverse incident, along with a medical summary of events, to the board of nursing within fifteen days after the adverse incident occurs.

(C) Beginning July 1, 2027, each certified nurse-midwife or certified midwife shall report annually to the board the following information regarding cases in which the midwife

provided services when the intended place of birth at the onset of care was in a facility or setting other than a hospital:

(1) The total number of patients provided nurse-midwifery or certified midwifery services at the onset of care;

(2) The number of live births attended;

(3) The number of cases of fetal demise, newborn deaths, and maternal deaths attended as a certified nurse-midwife or certified midwife at the discovery of the demise or death;

(4) The number, reason for, and outcome of each transport of a patient in the antepartum, intrapartum period, or immediate postpartum period;

(5) A brief description of any complications resulting in the morbidity or mortality of a maternal patient or a newborn;

(6) The planned delivery setting and the actual setting;

(7) Any other information required in rules adopted by the department.

(D) Beginning eighteen months after the effective date of this section, the board shall submit an annual report to the department of health that compiles all information submitted to the board pursuant to divisions (B) and (C) of this section in the preceding calendar year.

(E) The department shall adopt rules to implement this section and shall develop a form to be used for the reporting required under divisions (B) and (C) of this section.

Sec. 4723.59. (A) In addition to the rules described in section 4723.07 of the Revised Code, the board of nursing shall adopt rules establishing standards and procedures for the

licensure and regulation of certified midwives, including those establishing license application and renewal procedures. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

(B) The board also may adopt, in accordance with Chapter 119. of the Revised Code, any other rules it considers necessary to implement and administer sections 4723.53 to 4723.60 of the Revised Code. The rules may require the completion of a criminal records check and, in the case of a license to practice as a certified midwife issued by another jurisdiction, may provide for licensure by endorsement.

Sec. 4723.60. Sections 4723.53 to 4723.59 of the Revised Code do not abridge, change, or limit in any way the right of a parent to deliver the parent's baby where, when, how, and with whom the parent chooses, regardless of the licensure requirements established in those sections.

Sec. 4723.91. On receipt of a notice pursuant to section 3123.43 of the Revised Code, the board of nursing shall comply with sections 3123.41 to 3123.50 of the Revised Code and any applicable rules adopted under section 3123.63 of the Revised Code with respect to a nursing license, certified midwife license, medication aide certificate, dialysis technician certificate, or community health worker certificate issued pursuant to this chapter.

Sec. 4723.99. (A) Except as provided in division (B) or (C) of this section, whoever violates section 4723.03, 4723.44, 4723.54, 4723.653, or 4723.73 of the Revised Code is guilty of a felony of the fifth degree on a first offense and a felony of the fourth degree on each subsequent offense.

(B) Each of the following is guilty of a minor misdemeanor:

(1) A registered nurse, advanced practice registered nurse, or licensed practical nurse who violates division (A), (B), (C), or (D) of section 4723.03 of the Revised Code by reason of a license to practice nursing that has lapsed for failure to renew or by practicing nursing after a license has been classified as inactive;

(2) A medication aide who violates section 4723.653 of the Revised Code by reason of a medication aide certificate that has lapsed for failure to renew or by administering medication as a medication aide after a certificate has been classified as inactive.

(C) Whoever violates division (H) of section 4723.03 of the Revised Code is guilty of a misdemeanor of the first degree.

Sec. 4724.01. As used in this chapter:

(A) "Certified international midwife" means an individual who is certified by the international registry of midwives but is not a licensed midwife.

(B) "Certified professional midwife" means an individual who is certified by the north American registry of midwives but is not a licensed midwife.

(C) "International registry of midwives" means the organization known by that name or its successor organization.

(D) "Licensed midwife" means an individual holding a license to practice issued under section 4724.04 of the Revised Code.

(E) "Midwifery education accreditation council" means the

organization known by that name or its successor organization.

(F) "North American registry of midwives" means the organization known by that name or its successor organization.

(G) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.

(H) "Traditional midwife" means an individual who provides traditional midwifery services pursuant to sections 4724.14 and 4724.15 of the Revised Code, does not hold a license to practice as a licensed midwife issued under this chapter, and does not hold a license to practice as a certified nurse-midwife or certified midwife issued under Chapter 4723. of the Revised Code.

Sec. 4724.02. (A) Except as provided in division (B) of this section, no individual shall knowingly practice as a licensed midwife unless the individual holds a current, valid license to practice issued under section 4724.04 of the Revised Code.

(B) Division (A) of this section does not apply to any of the following:

(1) A physician;

(2) A physician assistant authorized under Chapter 4730. of the Revised Code to practice as a physician assistant;

(3) A registered nurse, advanced practice registered nurse, or licensed practical nurse authorized under Chapter 4723. of the Revised Code to practice nursing as a registered nurse, advanced practice registered nurse, or licensed practical nurse;

(4) A certified midwife authorized under Chapter 4723. of the Revised Code to practice as a certified midwife;

(5) A student who is participating in a professional midwifery education program and who provides midwifery services under the auspices of the program and under the supervision of a licensed midwife serving for the program as a faculty member, instructor, teaching assistant, or preceptor;

(6) An individual who is participating in a professional midwifery apprenticeship and who provides midwifery services as part of the apprenticeship program and under the supervision of a licensed midwife serving for the program as an instructor, teaching assistant, or preceptor;

(7) An individual who provides midwifery services without a license while engaging in good faith in the practice of the religious tenets of any church or in any religious act;

(8) An individual who is not engaged in the practice of the religious tenets of any church or in any religious act but who provides midwifery services without a license to others engaging in good faith in the practice of the religious tenets of any church or in any religious act;

(9) An individual who is a member of a Native American community and provides midwifery services without a license to another member of the community;

(10) A traditional midwife;

(11) An individual who is participating in a midwifery apprenticeship under the supervision of a traditional midwife and who provides midwifery services as part of the apprenticeship program under the supervision of a traditional midwife;

(12) A certified professional midwife or certified international midwife, but only if the certified professional midwife or certified international midwife does not, as a part of the midwife's practice, obtain or administer drugs or perform surgical suturing.

(C) No individual shall knowingly use the title "licensed midwife" or any other title implying that the individual is a licensed midwife unless the individual holds a current, valid license to practice issued under section 4724.04 of the Revised Code.

Sec. 4724.03. (A) An individual seeking a license to practice as a licensed midwife shall file with the department of commerce an application in a manner prescribed by the department. The application shall include all the information the department considers necessary to process the application, including evidence satisfactory to the department that the applicant meets the requirements specified in division (B)(1) or (2) of this section.

(B)(1) To be eligible to receive a license to practice as a licensed midwife, an applicant shall demonstrate to the department that the applicant meets all of the following requirements:

(a) Is at least eighteen years of age;

(b) Has attained a high school degree or equivalent;

(c) Is certified by the north American registry of midwives, international registry of midwives, or another certifying organization approved by the department in rules adopted under section 4724.11 of the Revised Code;

(d) Is certified in neonatal and adult cardiopulmonary

resuscitation;

(e) Has successfully completed a course of study in breech births approved by the department in rules adopted under section 4724.11 of the Revised Code;

(f) Has successfully completed a course of study in pharmacology approved by the department in rules adopted under section 4724.11 of the Revised Code.

(2) In lieu of meeting the requirements described in division (B)(1)(c) of this section, an applicant may demonstrate either of the following:

(a) That the applicant holds a current, valid license to practice as a licensed midwife issued by another state and the department has determined that the other state's requirements for licensure are substantially similar to those described in division (B)(1) of this section;

(b) That the applicant is certified by the north American registry of midwives and holds a midwifery bridge certificate.

(C) The department shall review all applications received under this section. After receiving an application it considers complete, the department shall determine whether the applicant meets the requirements for a license to practice as a licensed midwife.

Sec. 4724.04. (A) If the department of commerce determines under section 4724.03 of the Revised Code that an applicant meets the requirements for a license to practice as a licensed midwife, the department shall issue the license to the applicant.

(B) Each license shall be valid for a two-year period

unless revoked or suspended, shall expire on the date that is two years after the date of issuance, and may be renewed for additional two-year periods in accordance with rules adopted under section 4724.11 of the Revised Code.

(C) To renew a license to practice as a licensed midwife, an applicant for renewal shall demonstrate both of the following to the department:

(1) That the applicant has maintained certification in neonatal and adult cardiopulmonary resuscitation;

(2) That the applicant has maintained certification with the north American registry of midwives, international registry of midwives, or another certifying organization approved by the department in rules adopted under section 4724.11 of the Revised Code.

(D) In the event a license issued under this section is not renewed and is therefore expired or inactive, the department shall reinstate or restore the license if the individual seeking reinstatement or restoration satisfies the conditions specified in rules adopted under section 4724.11 of the Revised Code.

Sec. 4724.05. (A) An individual who holds a current, valid license to practice as a licensed midwife may engage in one or more of the following activities during the antepartum, intrapartum, postpartum, and newborn period as part of the scope of practice for a licensed midwife:

(1) Offering care, education, counseling, and support to women and newborns during pregnancy, birth, and the postpartum period;

(2) Attending births in hospitals, homes, medical offices, and freestanding birthing centers;

(3) Providing ongoing and routine prenatal care throughout pregnancy and hands on care during labor, birth, and the immediate postpartum period;

(4) Providing maternal and newborn assessment for the six- to eight-week period following delivery;

(5) Providing initial and ongoing comprehensive assessment, diagnosis, and treatment;

(6) Recognizing abnormal or dangerous conditions requiring consultations with or referrals to other licensed health care professionals;

(7) Conducting maternal and newborn physical examinations;

(8) Ordering and interpreting laboratory and diagnostic tests without a physician's order.

(B) An individual who holds a current, valid license to practice as a licensed midwife shall not engage in any of the following activities:

(1) Administering cytotec or oxytocics, including pitocin and methergine, except when indicated during the postpartum period;

(2) Using forceps or vacuum extraction to assist with birth;

(3) Performing any operative procedures or surgical repairs other than the following: artificial rupture of membranes; episiotomies; first or second degree perineal, vaginal, or labial repairs; clamping or cutting the umbilical cord; or frenotomies.

(C) For the purpose of engaging in one or more of the

activities permitted under division (A) of this section, the scope of practice for a licensed midwife shall include the ability to purchase, obtain, possess, and administer the following:

(1) Subject to division (B) of this section, an antihemorraghic agent or device, including tranexamic acid, pitocin, oxytocin, misoprostol, and methergine;

(2) Intravenous fluids to stabilize the laboring or postpartum patient or as necessary to administer another drug authorized by this division;

(3) Neonatal injectable vitamin K;

(4) Newborn antibiotic eye prophylaxis;

(5) Oxygen;

(6) Intravenous antibiotics for group B streptococcal prophylaxis;

(7) Rho (D) immune globulin;

(8) Local anesthesia;

(9) Epinephrine;

(10) A drug prescribed for the patient by a prescriber.

A licensed midwife also may obtain, without a physician's order, one or more supplies necessary to administer any of the drugs described in division (C) of this section.

(D) This section does not authorize a licensed midwife to prescribe, personally furnish, obtain, or administer either of the following:

(1) Any controlled substance as defined in section 3719.01

of the Revised Code;

(2) A drug or device to perform or induce an abortion.

(E) When engaging in any of the activities permitted under this section, a licensed midwife shall maintain appropriate medical records regarding patient history, treatment, and outcomes.

Sec. 4724.06. (A) The department of commerce shall limit, revoke, or suspend an individual's license to practice as a licensed midwife, refuse to issue a license to an applicant, refuse to renew a license, refuse to reinstate or restore a license, or reprimand or place on probation the holder of a license for any of the reasons specified in rules adopted under section 4724.11 of the Revised Code.

(B) The department may limit, revoke, or suspend an individual's license to practice as a licensed midwife, refuse to issue a license to an applicant, refuse to renew a license, refuse to reinstate or restore a license, or reprimand or place on probation the holder of a license on the recommendation of the licensed midwifery advisory council pursuant to section 4724.13 of the Revised Code.

Sec. 4724.07. (A) This section establishes the process by which a licensed midwife obtains a patient's consent to treatment authorized by section 4724.05 of the Revised Code, including attending a home birth or providing care during a high-risk pregnancy.

(B) The following information shall be exchanged in writing between a licensed midwife and patient when obtaining consent to treatment as described in division (A) of this section:

(1) The name and license number of the licensed midwife;

(2) The patient's name, address, telephone number, and primary care provider, if the patient has one;

(3) A description of the licensed midwife's education, training, and experience in midwifery;

(4) The licensed midwife's practice philosophy;

(5) A promise to provide the patient, upon request, with separate documents describing the rules governing the practice of midwifery, including a list of conditions indicating the need for consultation, referral, transfer, or mandatory transfer and the licensed midwife's personal written practice guidelines;

(6) A written plan for medical consultation and transfer of care;

(7) A description of any hospital care and procedures that may be necessary in the event of an emergency transfer or care;

(8) A description of the services provided to the patient by the licensed midwife;

(9) That the licensed midwife holds a current, valid license to practice issued under this chapter;

(10) The availability of a grievance process;

(11) Whether the licensed midwife is covered by professional liability insurance;

(12) Any other information required in rules adopted by the department.

(C) Once the required information has been exchanged and if the patient consents to treatment, the patient and licensed midwife shall sign a written document to indicate as such. The

licensed midwife shall retain a copy of the document for at least four years from the date on which the document was signed.

Sec. 4724.08. (A) The department of commerce shall adopt rules establishing the circumstances in which a licensed midwife shall be prohibited from attending a home birth, which may include a high-risk pregnancy. In adopting the rules, the department shall allow a licensed midwife to attend a vaginal birth after cesarean, birth of twins, or breech birth as a home birth if the conditions described in division (B) of this section are satisfied.

(B) In the event of a home birth described in division (A) of this section, a licensed midwife may attend the birth only if all of the following conditions are satisfied:

(1) In addition to the informed consent required under section 4724.07 of the Revised Code, the licensed midwife obtains the patient's written informed consent for the vaginal birth after cesarean, birth of twins, or breech birth, including a description of risks associated with the procedure.

(2) The licensed midwife consults with a physician, certified nurse-midwife, or certified midwife about the patient and together with the physician or midwife determines whether referral is appropriate for the patient. If a referral is determined to be appropriate and the patient consents to the referral, the licensed midwife shall refer the patient to the physician or provider. If the patient refuses the referral, the licensed midwife shall document the refusal and may continue to provide care to the patient, including attending the vaginal birth after cesarean, birth of twins, or breech birth.

(3) The licensed midwife satisfies any other conditions

required in rules adopted by the department.

(C) In adopting rules under this section, the department shall do both of the following:

(1) Adhere to the recommendations of the licensed midwifery advisory council and any relevant peer-reviewed medical literature;

(2) Specify the content and format of the document to be used when obtaining informed consent as described in this section.

Sec. 4724.09. (A) As used in this section and section 4724.10 of the Revised Code, "emergency medical service," "emergency medical service personnel," and "emergency medical service organization" have the same meanings as in section 4765.01 of the Revised Code.

(B) For any pregnancy or childbirth in which a licensed midwife provides care and a home birth is planned, both of the following apply:

(1) The licensed midwife shall create an individualized transfer of care plan with each patient.

(2) The licensed midwife shall assess the status of the patient, fetus, and newborn throughout the maternity care cycle and shall determine when or if a transfer to a hospital is necessary.

(C) Each individualized transfer of care plan shall contain all of the following:

(1) The name and location of geographically adjacent hospitals that are appropriately equipped to provide emergency care, obstetrical care, and newborn care;

(2) The approximate travel time to each hospital;

(3) A list of the modes of transport services available, including an emergency medical service organization available by calling 9-1-1;

(4) The requirements for activating each mode of transportation;

(5) The mechanism by which medical records and other information concerning the patient may be rapidly transmitted to each hospital;

(6) Confirmation that the licensed midwife has recommended that the patient pre-register with the hospital closest to the patient's home that is appropriately equipped to provide emergency care, obstetrical care, and newborn care;

(7) Contact information for either a health care provider or practice group who has agreed in advance to accept patients in transfer, or a hospital's preferred method of accessing care by the hospital's designated provider on call;

(8) Any other information required in rules adopted by the department of commerce.

(D) When it becomes necessary to transfer a patient, a licensed midwife shall notify the receiving provider or hospital of all of the following:

(1) The incoming transfer;

(2) The reason for the transfer;

(3) A brief relevant clinical history;

(4) The planned mode of transport;

(5) The expected time of arrival;

(6) Any other information required in rules adopted by the department.

The licensed midwife may continue to provide routine or urgent care en route in coordination with any emergency medical services personnel or emergency medical service organization and, if continued care is provided, the licensed midwife shall address the psychosocial needs of the patient during the change of birth setting.

(E) On arrival at the hospital, the licensed midwife shall do all of the following:

(1) Provide a verbal report that includes details on the patient's current health status and the need for urgent care;

(2) Provide a legible copy of relevant prenatal and labor medical records;

(3) Transfer clinical responsibility to the receiving provider or hospital;

(4) Satisfy any other requirement established in rules adopted by the department.

If the patient chooses, the licensed midwife may remain at the hospital to provide continuous support. The licensed midwife also may continue to provide midwifery services, but only if the hospital has granted the licensed midwife clinical privileges. Whenever possible, the patient and her newborn shall be together during the transfer and after admission to the hospital.

Sec. 4724.10. (A) As used in this section, "adverse incident" means an incident over which a licensed midwife could exercise control, that is associated with an attempted or completed birth in a setting or facility other than a hospital,

and that results in one or more of the following injuries or conditions:

(1) A maternal death that occurs during delivery or within forty-two days after delivery;

(2) The transfer of a maternal patient to a hospital intensive care unit;

(3) A maternal patient experiencing hemorrhagic shock or requiring a transfusion of more than two units of blood or blood products;

(4) A fetal or neonatal death, including a stillbirth, associated with an obstetrical delivery;

(5) A transfer of a newborn to a neonatal intensive care unit due to a traumatic physical or neurological birth injury, including any degree of a brachial plexus injury;

(6) A transfer of a newborn to a neonatal intensive care unit within the first seventy-two hours after birth if the newborn remains in such unit for more than seventy-two hours;

(7) Any other condition as determined by the department of commerce in rules adopted under section 4724.11 of the Revised Code.

(B) Beginning July 1, 2027, a licensed midwife who attends a birth planned for a facility or setting other than a hospital must report any adverse incident, along with a medical summary of events, to the licensed midwifery advisory council within fifteen days after the adverse incident occurs.

(C) Beginning July 1, 2027, each licensed midwife shall report annually to the licensed midwifery advisory council the following information regarding cases in which the licensed

midwife provided services when the intended place of birth at the onset of care was in a facility or setting other than a hospital:

(1) The total number of patients provided licensed midwifery services at the onset of care;

(2) The number of live births attended;

(3) The number of cases of fetal demise, newborn deaths, and maternal deaths attended as a licensed midwife at the discovery of the demise or death;

(4) The number, reason for, and outcome of each transport of a patient in the antepartum, intrapartum period, or immediate postpartum period;

(5) A brief description of any complications resulting in the morbidity or mortality of a maternal patient or a newborn;

(6) The planned delivery setting and the actual setting;

(7) Any other information required in rules adopted by the department of commerce.

(D) The department shall adopt rules to implement this section and shall develop a form to be used for the reporting required under divisions (B) and (C) of this section.

Sec. 4724.11. (A) In accordance with Chapter 119. of the Revised Code, the department of commerce shall adopt rules that establish all of the following:

(1) Standards and procedures for applying for, renewing, reinstating, or restoring a license to practice as a licensed midwife;

(2) Application, renewal, reinstatement, and restoration

fee amounts for a license to practice as a licensed midwife, with the amount of the application fee not to exceed forty-five dollars and the amount of the renewal fee not to exceed twenty dollars;

(3) Standards and procedures for approving and successfully completing a course of study in breech births and a course of study in pharmacology, each as described in section 4724.03 of the Revised Code;

(4) Subject to division (C) of this section, standards and procedures for approving certifying organizations as described in section 4724.03 of the Revised Code;

(5) Reasons for which the department may refuse to issue, or renew, suspend, or revoke a license or otherwise impose discipline on a licensed midwife;

(6) Conditions to be satisfied before the department reinstates or restores an expired or inactive license;

(7) Procedures for reporting to the licensed midwifery advisory council license holder misconduct;

(8) Procedures by which the department conducts disciplinary investigations.

(B) In adopting rules establishing standards and procedures for the approval of certifying organizations, the department shall approve an organization only if its certification requirements meet or exceed those of the north American registry of midwives or the international registry of midwives.

(C) The department also may adopt, in accordance with Chapter 119. of the Revised Code, any other rules it considers

necessary to implement and administer this chapter. The rules may require the completion of a criminal records check.

Sec. 4724.12. This chapter does not abridge, change, or limit in any way the right of a parent to deliver the parent's baby where, when, how, and with whom the parent chooses, regardless of the licensure requirements established in this chapter.

Sec. 4724.13. (A) There is hereby created within the department of commerce the licensed midwifery advisory council. The council shall consist of all of the following members:

(1) One certified nurse-midwife and one certified midwife or certified nurse-midwife, preferably with experience attending a birth in a setting or facility other than a hospital;

(2) Four licensed midwives, including one practicing in an urban setting and one serving a plain Amish or Mennonite community;

(3) One physician who is board-certified in obstetrics and gynecology, as those designations are issued by a medical specialty certifying board recognized by the American board of medical specialties or American osteopathic association, and with experience consulting with midwives who provide midwifery services in locations other than hospitals;

(4) One physician who is board-certified in neonatal medicine, as that designation is issued by a medical specialty certifying board recognized by the American board of medical specialties or American osteopathic association, and with experience consulting with midwives who provide midwifery services in locations other than hospitals;

(5) One member of the public who has experience utilizing

or receiving midwifery services in locations other than hospitals.

Of the members who are licensed midwives, each shall obtain licensure as a licensed midwife under this chapter not later than January 1, 2028.

(B) The department shall appoint the members described in division (A) of this section. The department may solicit nominations for initial appointments and for filling any vacancies from individuals or organizations with an interest in midwifery services. If the department does not receive any nominations or receives an insufficient number of nominations, the department shall appoint members and fill vacancies on its own advice.

Of the physician members described in divisions (A)(3) and (4) of this section, if the department does not receive any nominations for physicians with experience consulting with midwives who provide midwifery services in locations other than hospitals, the department shall appoint physicians without such experience, but only if the department determines that each physician satisfies the other requirements of division (A)(3) or (4) of this section.

Initial appointments to the council shall be made not later than ninety days after the effective date of this section. Of the initial appointments described in division (A) of this section, four shall be for terms of three years and five shall be for terms of four years. Thereafter, terms shall be for four years, with each term ending on the same day of the same month as did the term that it succeeds. Vacancies shall be filled in the same manner as appointments.

When the term of any member expires, a successor shall be appointed in the same manner as the initial appointment. 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 that term. A 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. A member may be reappointed.

(C) The council shall organize by selecting a chairperson from among its members. The council may select a new chairperson at any time. Four members constitute a quorum for the transaction of official business. Members shall serve without compensation but shall receive payment for their actual and necessary expenses incurred in the performance of their official duties. The expenses shall be paid by the department.

(D) The council shall advise and make recommendations to the department regarding the practice and regulation of licensed midwives. The department shall adhere to such advice and recommendations when adopting any rules governing the practice of licensed midwives, including rules to address the following:

(1) Circumstances in which attending a home birth is prohibited, as described in section 4724.08 of the Revised Code;

(2) Limitations on providing care during a high-risk pregnancy, including when a home birth is planned;

(3) Adverse incident reporting and annual reporting, both required under section 4724.10 of the Revised Code;

(4) Obtaining a patient's informed consent, as described in section 4724.07 of the Revised Code;

(5) Creating an individualized transfer of care plan, as described in section 4724.09 of the Revised Code.

(E)(1) The council shall review each adverse incident report submitted to the council as described in section 4724.10 of the Revised Code. As soon as practicable after the required review, the council shall make a recommendation to the department regarding whether discipline should be imposed on the licensed midwife, and if so, the type of discipline to be imposed.

The council shall develop a policy by which it addresses and considers adverse incident reports.

(2) Beginning eighteen months after the effective date of this section, the council shall submit an annual report to the department of health that compiles all information submitted to the council pursuant to divisions (B) and (C) of section 4724.10 of the Revised Code in the preceding calendar year.

(F)(1) Any person who wishes to make a complaint against a licensed midwife shall submit the complaint in writing to the council within one year after the date of the action or event upon which the complaint is based. The council shall review each complaint submitted to the council. As soon as practicable after the required review, the council shall make a recommendation to the department of commerce regarding whether discipline should be imposed on the licensed midwife, and if so, the type of discipline to be imposed.

(2) The council shall investigate any alleged irregularities in the practice of midwifery by a licensed midwife and any violations of this chapter or rules adopted by the department.

(3) The council shall not investigate any person exempted from licensure under section 4724.02 of the Revised Code.

Sec. 4724.14. A traditional midwife may engage in one or more of the following activities during the antepartum, intrapartum, postpartum, and newborn period as part of the scope of practice for a traditional midwife:

(A) Offering care, education, counseling, and support during pregnancy, birth, and the postpartum period;

(B) Attending births in locations other than hospitals;

(C) Providing ongoing and routine prenatal care throughout pregnancy and hands on care during labor, birth, and the immediate postpartum period;

(D) Providing maternal and newborn assessment for the six- to eight-week period following delivery;

(E) Recognizing abnormal or dangerous conditions requiring consultations with or referrals to licensed health care professionals.

Sec. 4724.15. (A) This section establishes the process by which a traditional midwife obtains a patient's consent to treatment authorized by section 4724.14 of the Revised Code.

(B) The following information shall be exchanged in writing between a traditional midwife and patient when obtaining consent to treatment as described in division (A) of this section:

(1) The name of the traditional midwife;

(2) The patient's name, address, telephone number, and primary care provider, if the patient has one;

(3) A description of the traditional midwife's education, training, and experience in midwifery;

(4) The traditional midwife's practice philosophy;

(5) A promise to provide the patient, upon request, with separate documents describing a traditional midwife's scope of practice;

(6) A written plan for medical consultation and transfer of care;

(7) A description of any hospital care and procedures that may be necessary in the event of an emergency transfer of care;

(8) A description of the services provided to the patient by the traditional midwife;

(9) Whether the traditional midwife is covered by professional liability insurance;

(10) Any other information required in rules adopted by the department.

(C) Once the required information has been exchanged and if the patient consents to treatment, the patient and traditional midwife shall sign a written document to indicate as such. The traditional midwife shall retain a copy of the document for at least four years from the date on which the document was signed.

(D) The rights and liabilities arising from the provision of traditional midwifery services shall be governed exclusively by the agreement between the traditional midwife and the patient entered pursuant to division (C) of this section.

Sec. 4724.16. Emergency medical service personnel or an

emergency medical service organization, hospital, facility, physician, advanced practice registered nurse, licensed midwife, or traditional midwife that provides services or care following an adverse incident as defined in section 4724.10 of the Revised Code, or during and after a transfer of care as described in section 4724.09 of the Revised Code, are not liable in damages in a tort or other civil action for injury or loss to person or property arising from the services or care, unless the services or care are provided in a manner that constitutes willful or wanton misconduct.

Sec. 4724.99. (A) Whoever violates division (A) of section 4724.02 of the Revised Code is guilty of a felony of the fifth degree on a first offense and a felony of the fourth degree on each subsequent offense.

(B) Whoever violates division (C) of section 4724.02 of the Revised Code is guilty of a misdemeanor of the first degree and is subject to a fine in the amount of one thousand dollars and a jail term of not more than one hundred eighty days.

Sec. 4731.22. (A) The state medical board, by an affirmative vote of not fewer than six of its members, may limit, revoke, or suspend a license or certificate to practice or certificate to recommend, refuse to grant a license or certificate, refuse to renew a license or certificate, refuse to reinstate a license or certificate, or reprimand or place on probation the holder of a license or certificate if the individual applying for or holding the license or certificate is found by the board to have committed fraud during the administration of the examination for a license or certificate to practice or to have committed fraud, misrepresentation, or deception in applying for, renewing, or securing any license or

certificate to practice or certificate to recommend issued by the board.

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

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

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

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

(4) Willfully betraying a professional confidence.

For purposes of this division, "willfully betraying a professional confidence" does not include providing any

information, documents, or reports under sections 307.621 to 307.629 of the Revised Code to a child fatality review board; does not include providing any information, documents, or reports under sections 307.631 to 307.6410 of the Revised Code to a drug overdose fatality review committee, a suicide fatality review committee, or hybrid drug overdose fatality and suicide fatality review committee; does not include providing any information, documents, or reports under sections 307.651 to 307.659 of the Revised Code to a domestic violence fatality review board; does not include providing any information, documents, or reports to the director of health pursuant to guidelines established under section 3701.70 of the Revised Code; does not include written notice to a mental health professional under section 4731.62 of the Revised Code; does not include making a report as described in division (F) of section 2921.22 and section 4731.224 of the Revised Code; and does not include the making of a report of an employee's use of a drug of abuse, or a report of a condition of an employee other than one involving the use of a drug of abuse, to the employer of the employee as described in division (B) of section 2305.33 of the Revised Code. Nothing in this division affects the immunity from civil liability conferred by section 2305.33 or 4731.62 of the Revised Code upon a physician who makes a report in accordance with section 2305.33 or notifies a mental health professional in accordance with section 4731.62 of the Revised Code. As used in this division, "employee," "employer," and "physician" have the same meanings as in section 2305.33 of the Revised Code.

(5) Making a false, fraudulent, deceptive, or misleading statement in the solicitation of or advertising for patients; in relation to the practice of medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or a

limited branch of medicine; or in securing or attempting to secure any license or certificate to practice issued by the board.

As used in this division, "false, fraudulent, deceptive, or misleading statement" means a statement that includes a misrepresentation of fact, is likely to mislead or deceive because of a failure to disclose material facts, is intended or is likely to create false or unjustified expectations of favorable results, or includes representations or implications that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

(6) A departure from, or the failure to conform to, minimal standards of care of similar practitioners under the same or similar circumstances, whether or not actual injury to a patient is established;

(7) Representing, with the purpose of obtaining compensation or other advantage as personal gain or for any other person, that an incurable disease or injury, or other incurable condition, can be permanently cured;

(8) The obtaining of, or attempting to obtain, money or anything of value by fraudulent misrepresentations in the course of practice;

(9) A plea of guilty to, a judicial finding of guilt of, or a judicial finding of eligibility for intervention in lieu of conviction for, a felony;

(10) Commission of an act that constitutes a felony in this state, regardless of the jurisdiction in which the act was committed;

(11) A plea of guilty to, a judicial finding of guilt of,

or a judicial finding of eligibility for intervention in lieu of conviction for, a misdemeanor committed in the course of practice;

(12) Commission of an act in the course of practice that constitutes a misdemeanor in this state, regardless of the jurisdiction in which the act was committed;

(13) A plea of guilty to, a judicial finding of guilt of, or a judicial finding of eligibility for intervention in lieu of conviction for, a misdemeanor involving moral turpitude;

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

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

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

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

(18) Subject to section 4731.226 of the Revised Code, violation of any provision of a code of ethics of the American medical association, the American osteopathic association, the American podiatric medical association, or any other national professional organizations that the board specifies by rule. The state medical board shall obtain and keep on file current copies of the codes of ethics of the various national professional organizations. The individual whose license or certificate is

being suspended or revoked shall not be found to have violated any provision of a code of ethics of an organization not appropriate to the individual's profession.

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

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

In enforcing this division, the board, upon a showing of a possible violation, shall refer any individual who is authorized to practice by this chapter or who has submitted an application pursuant to this chapter to the monitoring organization that conducts the confidential monitoring program established under section 4731.25 of the Revised Code. The board also may compel the individual to submit to a mental examination, physical examination, including an HIV test, or both a mental and a physical examination. The expense of the examination is the

responsibility of the individual compelled to be examined. Failure to submit to a mental or physical examination or consent to an HIV test ordered by the board constitutes an admission of the allegations against the individual unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence. If the board finds an individual unable to practice because of the reasons set forth in this division, the board shall require the individual to submit to care, counseling, or treatment by physicians approved or designated by the board, as a condition for initial, continued, reinstated, or renewed authority to practice. An individual affected under this division shall be afforded an opportunity to demonstrate to the board the ability to resume practice in compliance with acceptable and prevailing standards under the provisions of the individual's license or certificate. For the purpose of this division, any individual who applies for or receives a license or certificate to practice under this chapter accepts the privilege of practicing in this state and, by so doing, shall be deemed to have given consent to submit to a mental or physical examination when directed to do so in writing by the board, and to have waived all objections to the admissibility of testimony or examination reports that constitute a privileged communication.

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

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

(21) The violation of section 3701.79 of the Revised Code or of any abortion rule adopted by the director of health 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 health care services in this state or another jurisdiction, for any reason other than the nonpayment of fees: the limitation, revocation, or suspension of an individual's license to practice; acceptance of an individual's license surrender; denial of a license; refusal to renew or reinstate a license; imposition of probation; or issuance of an order of censure or other reprimand;

(23) The violation of section 2919.12 of the Revised Code or the performance or inducement of an abortion upon a pregnant woman with actual knowledge that the conditions specified in

division (B) of section 2317.56 of the Revised Code have not been satisfied or with a heedless indifference as to whether those conditions have been satisfied, unless an affirmative defense as specified in division (H)(2) of that section would apply in a civil action authorized by division (H)(1) of that section;

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

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

(26) Impairment of ability to practice according to acceptable and prevailing standards of care because of substance use disorder or excessive use or abuse of drugs, alcohol, or other substances that may impair ability to practice.

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

If it has reason to believe that any individual authorized

to practice by this chapter or any applicant for licensure or certification to practice suffers such impairment, the board shall refer the individual to the monitoring organization that conducts the confidential monitoring program established under section 4731.25 of the Revised Code. The board also may compel the individual to submit to a mental or physical examination, or both. The expense of the examination is the responsibility of the individual compelled to be examined. Any mental or physical examination required under this division shall be undertaken by a treatment provider or physician who is qualified to conduct the examination and who is approved under section 4731.251 of the Revised Code.

Failure to submit to a mental or physical examination ordered by the board constitutes an admission of the allegations against the individual unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence. If the board determines that the individual's ability to practice is impaired, the board shall suspend the individual's license or certificate or deny the individual's application and shall require the individual, as a condition for initial, continued, reinstated, or renewed licensure or certification to practice, to submit to treatment.

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

(a) Certification from a treatment provider approved under section 4731.251 of the Revised Code that the individual has successfully completed any required inpatient treatment;

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

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

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

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

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

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

(a) Waiving the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or

health care policy, contract, or plan that covers the individual's services, otherwise would be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that individual;

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

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

(30) Failure to provide notice to, and receive acknowledgment of the notice from, a patient when required by section 4731.143 of the Revised Code prior to providing nonemergency professional services, or failure to maintain that notice in the patient's medical record;

(31) Failure of a physician supervising a physician assistant to maintain supervision in accordance with the requirements of Chapter 4730. of the Revised Code and the rules adopted under that chapter;

(32) Failure of a physician or podiatrist to enter into a standard care arrangement with a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner with whom the physician or podiatrist is in collaboration pursuant to section 4731.27 of the Revised Code or failure to fulfill the responsibilities of collaboration after entering into a standard care arrangement;

(33) Failure to comply with the terms of a consult

agreement entered into with a pharmacist pursuant to section 4729.39 of the Revised Code;

(34) Failure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board in an investigative interview, an investigative office conference, at a deposition, or in written interrogatories, except that failure to cooperate with an investigation shall not constitute grounds for discipline under this section if a court of competent jurisdiction has issued an order that either quashes a subpoena or permits the individual to withhold the testimony or evidence in issue;

(35) Failure to supervise an anesthesiologist assistant in accordance with Chapter 4760. of the Revised Code and the board's rules for supervision of an anesthesiologist assistant;

(36) Assisting suicide, as defined in section 3795.01 of the Revised Code;

(37) Failure to comply with the requirements of section 2317.561 of the Revised Code;

(38) Failure to supervise a radiologist assistant in accordance with Chapter 4774. of the Revised Code and the board's rules for supervision of radiologist assistants;

(39) Performing or inducing an abortion at an office or facility with knowledge that the office or facility fails to post the notice required under section 3701.791 of the Revised Code;

(40) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code

for the operation of or the provision of care at a pain management clinic;

(41) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for providing supervision, direction, and control of individuals at a pain management clinic;

(42) Failure to comply with the requirements of section 4729.79 or 4731.055 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code;

(43) Failure to comply with the requirements of section 2919.171, 2919.202, or 2919.203 of the Revised Code or failure to submit to the department of health in accordance with a court order a complete report as described in section 2919.171 or 2919.202 of the Revised Code;

(44) Practicing at a facility that is subject to licensure as a category III terminal distributor of dangerous drugs with a pain management clinic classification unless the person operating the facility has obtained and maintains the license with the classification;

(45) Owning a facility that is subject to licensure as a category III terminal distributor of dangerous drugs with a pain management clinic classification unless the facility is licensed with the classification;

(46) Failure to comply with any of the requirements regarding making or maintaining medical records or documents described in division (A) of section 2919.192, division (C) of section 2919.193, division (B) of section 2919.195, or division (A) of section 2919.196 of the Revised Code;

(47) Failure to comply with the requirements in section 3719.061 of the Revised Code before issuing for a minor a prescription for an opioid analgesic, as defined in section 3719.01 of the Revised Code;

(48) Failure to comply with the requirements of section 4731.30 of the Revised Code or rules adopted under section 4731.301 of the Revised Code when recommending treatment with medical marijuana;

(49) A pattern of continuous or repeated violations of division (E)(2) or (3) of section 3963.02 of the Revised Code;

(50) Failure to fulfill the responsibilities of a collaboration agreement entered into with an athletic trainer as described in section 4755.621 of the Revised Code;

(51) Failure to take the steps specified in section 4731.911 of the Revised Code following an abortion or attempted abortion in an ambulatory surgical facility or other location that is not a hospital when a child is born alive;

(52) Violation of section 4731.77 of the Revised Code;

(53) Failure of a physician supervising a certified mental health assistant to maintain supervision in accordance with the requirements of Chapter 4772. of the Revised Code and the rules adopted under that chapter;

(54) Failure to comply with the requirements of section 3705.16 of the Revised Code when certifying a decedent's cause of death and completing and signing the medical certificate of death.

(C) Disciplinary actions taken by the board under divisions (A) and (B) of this section shall be taken pursuant to

an adjudication under Chapter 119. of the Revised Code, except that in lieu of an adjudication, the board may enter into a consent agreement with an individual to resolve an allegation of a violation of this chapter or any rule adopted under it. A consent agreement, when ratified by an affirmative vote of not fewer than six members of the board, shall constitute the findings and order of the board with respect to the matter addressed in the agreement. If the board refuses to ratify a consent agreement, the admissions and findings contained in the consent agreement shall be of no force or effect.

A telephone conference call may be utilized for ratification of a consent agreement that revokes or suspends an 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.

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

license or certificate to practice.

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

(E) The sealing or expungement of conviction records by any court shall have no effect upon a prior board order entered under this section or upon the board's jurisdiction to take action under this section if, based upon a plea of guilty, a judicial finding of guilt, or a judicial finding of eligibility for intervention in lieu of conviction, the board issued a notice of opportunity for a hearing prior to the court's order to seal or expunge the records. The board shall not be required to seal, expunge, destroy, redact, or otherwise modify its records to reflect the court's sealing of conviction records.

(F)(1) The board shall investigate evidence that appears to show that a person has violated any provision of this chapter or any rule adopted under it. Any person may report to the board in a signed writing any information that the person may have that appears to show a violation of any provision of this chapter or any rule adopted under it. In the absence of bad faith, any person who reports information of that nature or who testifies before the board in any adjudication conducted under Chapter 119. of the Revised Code shall not be liable in damages

in a civil action as a result of the report or testimony. Each complaint or allegation of a violation received by the board shall be assigned a case number and shall be recorded by the board.

(2) Investigations of alleged violations of this chapter or any rule adopted under it shall be supervised by the supervising member elected by the board in accordance with section 4731.02 of the Revised Code and by the secretary as provided in section 4731.39 of the Revised Code. The president may designate another member of the board to supervise the investigation in place of the supervising member. Upon a vote of the majority of the board to authorize the addition of a consumer member in the supervision of any part of any investigation, the president shall designate a consumer member for supervision of investigations as determined by the president. The authorization of consumer member participation in investigation supervision may be rescinded by a majority vote of the board. No member of the board who supervises the investigation of a case shall participate in further adjudication of the case.

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

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

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

(c) A subpoena issued by the board may be served by a sheriff, the sheriff's deputy, or a board employee or agent designated by the board. Service of a subpoena issued by the board may be made by delivering a copy of the subpoena to the person named therein, reading it to the person, or leaving it at the person's usual place of residence, usual place of business, or address on file with the board. When serving a subpoena to an applicant for or the holder of a license or certificate issued under this chapter, service of the subpoena may be made by certified mail, return receipt requested, and the subpoena shall be deemed served on the date delivery is made or the date the person refuses to accept delivery. If the person being served refuses to accept the subpoena or is not located, service may be made to an attorney who notifies the board that the attorney is representing the person.

(d) A sheriff's deputy who serves a subpoena shall receive the same fees as a sheriff. Each witness who appears before the

board in obedience to a subpoena shall receive the fees and mileage provided for under section 119.094 of the Revised Code.

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

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

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

The board may share any information it receives pursuant to an investigation or inspection, including patient records and patient record information, with law enforcement agencies, other licensing boards, and other governmental agencies that are prosecuting, adjudicating, or investigating alleged violations of statutes or administrative rules. An agency or board that receives the information shall comply with the same requirements regarding confidentiality as those with which the state medical board must comply, notwithstanding any conflicting provision of

the Revised Code or procedure of the agency or board that applies when it is dealing with other information in its possession. In a judicial proceeding, the information may be admitted into evidence only in accordance with the Rules of Evidence, but the court shall require that appropriate measures are taken to ensure that confidentiality is maintained with respect to any part of the information that contains names or other identifying information about patients or complainants whose confidentiality was protected by the state medical board when the information was in the board's possession. Measures to ensure confidentiality that may be taken by the court include sealing its records or deleting specific information from its records.

No person shall knowingly access, use, or disclose confidential investigatory information in a manner prohibited by law.

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

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

(b) The type of license or certificate to practice, if any, held by the individual against whom the complaint is directed;

(c) A description of the allegations contained in the complaint;

(d) Whether witnesses were interviewed;

(e) Whether the individual against whom the complaint is

directed is the subject of any pending complaints;

(f) The disposition of the case.

The report shall state how many cases are still pending and shall be prepared in a manner that protects the identity of each person involved in each case. The report shall be a public record under section 149.43 of the Revised Code.

(7) The board may provide a status update regarding an investigation to a complainant on request if the board verifies the complainant's identity.

(G)(1) If either of the following circumstances occur, the secretary and supervising member may recommend that the board suspend an individual's license or certificate to practice or certificate to recommend without a prior hearing:

(a) The secretary and supervising member determine both of the following:

(i) That there is clear and convincing evidence that an individual has violated division (B) of this section;

(ii) That the individual's continued practice presents a danger of immediate and serious harm to the public.

(b) The board receives verifiable information that a licensee has been charged in any state or federal court with a crime classified as a felony under the charging court's law and the conduct constitutes a violation of division (B) of this section.

(2) If a recommendation is made to suspend without a prior hearing pursuant to division (G)(1) of this section, written allegations shall be prepared for consideration by the board. The board, upon review of those allegations and by an

affirmative vote of not fewer than six of its members, excluding the secretary and supervising member, may suspend a license or certificate without a prior hearing. A telephone conference call may be utilized for reviewing the allegations and taking the vote on the summary suspension.

The board shall serve a written order of suspension in accordance with sections 119.05 and 119.07 of the Revised Code. If the individual subject to the summary suspension requests an adjudicatory hearing by the board, the date set for the hearing shall be within fifteen days, but not earlier than seven days, after the individual requests the hearing, unless otherwise agreed to by both the board and the individual.

(3) Any summary suspension imposed under division (G)(2) of this section is not a final appealable order and is not an adjudication that may be appealed under section 119.12 of the Revised Code. The summary suspension shall remain in effect until a final adjudicative order issued by the board pursuant to this section and Chapter 119. of the Revised Code becomes effective. Once a final adjudicative order has been issued by the board, any party adversely affected by it may file an appeal in accordance with the requirements of Chapter 119. of the Revised Code.

The board shall issue its final adjudicative order within seventy-five days after completion of its hearing. A failure to issue the order within seventy-five days shall result in dissolution of the summary suspension order but shall not invalidate any subsequent, final adjudicative order.

(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 order may be filed with the board along with appropriate court documents. Upon receipt of a petition of that nature and supporting court documents, the board shall reinstate the individual's license or certificate to practice. The board may then hold an adjudication under Chapter 119. of the Revised Code to determine whether the individual committed the act in question. Notice of an opportunity for a hearing shall be given in accordance with Chapter 119. of the Revised Code. If the board finds, pursuant to an adjudication held under this division, that the individual committed the act or if no hearing is requested, the board may order any of the sanctions identified under division (B) of this section.

(I) The license or certificate to practice issued to an individual under this chapter and the individual's practice in this state are automatically suspended as of the date of the individual's second or subsequent plea of guilty to, or judicial finding of guilt of, a violation of section 2919.123 or 2919.124 of the Revised Code. In addition, the license or certificate to practice or certificate to recommend issued to an individual under this chapter and the individual's practice in this state are automatically suspended as of the date the individual pleads guilty to, is found by a judge or jury to be guilty of, or is subject to a judicial finding of eligibility for intervention in lieu of conviction in this state or treatment or intervention in lieu of conviction in another jurisdiction for any of the following criminal offenses in this state or a substantially equivalent criminal offense in another jurisdiction: aggravated murder, murder, voluntary manslaughter, felonious assault, trafficking in persons, kidnapping, rape, sexual battery, gross

sexual imposition, aggravated arson, aggravated robbery, or aggravated burglary. Continued practice after suspension shall be considered practicing without a license or certificate.

The board shall notify the individual subject to the suspension in accordance with sections 119.05 and 119.07 of the Revised Code. If an individual whose license or certificate is automatically suspended under this division fails to make a timely request for an adjudication under Chapter 119. of the Revised Code, the board shall do whichever of the following is applicable:

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

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

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

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

(L) When the board refuses to grant or issue a license or certificate to practice to an applicant, revokes an individual's license or certificate to practice, refuses to renew an individual's license or certificate to practice, or refuses to reinstate an individual's license or certificate to practice, the board may specify that its action is permanent. An individual subject to a permanent action taken by the board is forever thereafter ineligible to hold a license or certificate to practice and the board shall not accept an application for reinstatement of the license or certificate or for issuance of a new license or certificate.

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

(1) The surrender of a license or certificate issued under this chapter shall not be effective unless or until accepted by the board. A telephone conference call may be utilized for acceptance of the surrender of an individual's license or certificate to practice. The telephone conference call shall be considered a special meeting under division (F) of section 121.22 of the Revised Code. Reinstatement of a license or certificate surrendered to the board requires an affirmative

vote of not fewer than six members of the board.

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

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

(4) The placement of an individual's license on retired status, as described in section 4731.283 of the Revised Code, does not remove or limit the board's jurisdiction to take any disciplinary action against the individual with regard to the license as it existed before being placed on retired status.

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

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

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

(2) For professional services rendered to any other person

authorized to practice pursuant to this chapter, to the extent allowed by this chapter and rules adopted by the board.

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

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

(2) Select providers of educational and assessment services, including a quality intervention program panel of case reviewers;

(3) Make referrals to educational and assessment service providers and approve individual educational programs recommended by those providers. The board shall monitor the progress of each individual undertaking a recommended individual educational program.

(4) Determine what constitutes successful completion of an individual educational program and require further monitoring of the individual who completed the program or other action that the board determines to be appropriate;

(5) Adopt rules in accordance with Chapter 119. of the Revised Code to further implement the quality intervention program.

An individual who participates in an individual educational program pursuant to this division shall pay the financial obligations arising from that educational program.

(P) The board shall not refuse to issue a license to an applicant because of a conviction, plea of guilty, judicial finding of guilt, judicial finding of eligibility for intervention in lieu of conviction, or the commission of an act that constitutes a criminal offense, unless the refusal is in accordance with section 9.79 of the Revised Code.

(Q) A license or certificate to practice or certificate to recommend issued to an individual under this chapter and an individual's practice under this chapter in this state are automatically suspended if the individual's license or certificate to practice a health care occupation or provide health care services is suspended, revoked, or surrendered or relinquished in lieu of discipline by an agency responsible for authorizing, certifying, or regulating an individual to practice a health care occupation or provide health care services in this state or another jurisdiction. The automatic suspension begins immediately upon entry of the order by the agency and lasts for ninety days to permit the board to investigate the basis for the action under this chapter. Continued practice during the automatic suspension shall be considered practicing without a license or certificate.

The board shall notify the individual subject to the automatic suspension by certified mail or in person in accordance with section 119.07 of the Revised Code. If an individual subject to an automatic suspension under this division fails to make a timely request for an adjudication under Chapter 119. of the Revised Code, the board is not

required to hold a hearing, but may adopt, by an affirmative vote of not fewer than six of its members, a final order that contains the board's findings. In that final order, the board may order any of the sanctions identified under division (A) or (B) of this section.

Sec. 4731.27. (A) As used in this section, "collaboration," "physician," "standard care arrangement," and "supervision" have the same meanings as in section 4723.01 of the Revised Code.

(B) A physician or podiatrist shall enter into a standard care arrangement with each certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner with whom the physician or podiatrist is in collaboration.

The collaborating physician or podiatrist shall fulfill the responsibilities of collaboration, as specified in the arrangement and in accordance with division (A) of section 4723.431 of the Revised Code. A copy of the standard care arrangement shall be retained on file by the certified midwife's or nurse's employer. Prior approval of the standard care arrangement by the state medical board is not required, but the board may periodically review it.

A physician or podiatrist who terminates collaboration with a certified midwife, certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist before their standard care arrangement expires shall give the certified midwife or nurse the written or electronic notice of termination required by division (D)(1) of section 4723.431 of the Revised Code.

Nothing in this division prohibits a hospital from hiring a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner as an employee and negotiating standard care arrangements on behalf of the employee as necessary to meet the requirements of this section. A standard care arrangement between the hospital's employee and the employee's collaborating physician is subject to approval by the medical staff and governing body of the hospital prior to implementation of the arrangement at the hospital.

(C) A physician or podiatrist shall cooperate with the board of nursing in any investigation the board conducts with respect to a certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who collaborates with the physician or podiatrist or with respect to a certified registered nurse anesthetist who practices with the supervision of the physician or podiatrist.

Section 2. That existing sections 3701.351, 3702.30, 3702.301, 4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 4723.41, 4723.43, 4723.431, 4723.432, 4723.481, 4723.483, 4723.487, 4723.488, 4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 4731.27 of the Revised Code are hereby repealed.

Section 3. Sections 4723.54 and 4724.02 of the Revised Code, as enacted by this act, take effect January 1, 2028.

Section 4. The General Assembly, applying the principle stated in division (B) of section 1.52 of the Revised Code that amendments are to be harmonized if reasonably capable of simultaneous operation, finds that the following sections, presented in this act as composites of the sections as amended

by the acts indicated, are the resulting versions of the sections in effect prior to the effective date of the sections as presented in this act:

Section 4723.08 of the Revised Code as amended by both H.B. 509 and S.B. 131 of the 134th General Assembly.

Section 4723.431 of the Revised Code as amended by both H.B. 497 and S.B. 196 of the 135th General Assembly.

Section 4723.481 of the Revised Code as amended by H.B. 33 of the 135th General Assembly and by H.B. 110 and H.B. 509 of the 134th General Assembly.