As Passed by the House

133rd General Assembly

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Representative Ginter

Cosponsors: Representatives Seitz, Blair, Lightbody, Koehler, Liston, Abrams, Brent, Brown, Callender, Carfagna, Carruthers, Crawley, Crossman, Cupp, Denson, Edwards, Fraizer, Galonski, Hambley, Hicks-Hudson, Hillyer, Holmes, A., Kick, Lanese, LaRe, Leland, Lepore-Hagan, Manning, D., Manning, G., McClain, Miller, J., O'Brien, Patterson, Perales, Richardson, Riedel, Robinson, Roemer, Rogers, Romanchuk, Russo, Scherer, Sheehy, Smith, T., Sobecki, Stein, Swearingen, Sweeney, Upchurch, Weinstein, West, Wiggam

A BILL

То	amend sections 4723.52, 4729.45, 4729.553,	1
	4729.80, 4730.56, and 4731.83 of the Revised	2
	Code regarding the administration of addiction	3
	treatment drugs and federal agency access to the	4
	Ohio Automated Rx Reporting System.	5

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

Section 1. That sections 4723.52, 4729.45, 4729.553,	6				
4729.80, 4730.56, and 4731.83 of the Revised Code be amended to	7				
read as follows:	8				
Sec. 4723.52. (A) As used in this section:	9				
(1) "Community addiction services provider" has the same	10				
meaning as in section 5119.01 of the Revised Code.					
(2) "Medication-assisted treatment" has the same meaning	12				
as in section 340.01 of the Revised Code.	13				

(B) An advanced practice registered nurse shall comply
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with section 3719.064 of the Revised Code and rules adopted
under section 4723.51 of the Revised Code when treating a
patient for addiction with medication-assisted treatment or
proposing to initiate such treatment.

(C) An advanced practice registered nurse who fails to comply with this section shall treat not more than thirty patients at any one time with medication-assisted treatment even if the facility or location at which the treatment is provided is either of the following:

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

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

Sec. 4729.45. (A) As used in this section, "physician"32means an individual authorized under Chapter 4731. of the33Revised Code to practice medicine and surgery or osteopathic34medicine and surgery.35

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

(a) An opioid antagonist used for treatment of drug 42

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addiction and <u>An addiction treatment drug</u> administered in a	43
long-acting or extended-release form;	44
(b) An antipsychotic drug administered in a long-acting or	45
extended-release form;	46
(c) Hydroxyprogesterone caproate;	47
(d) Medroxyprogesterone acetate;	48
(e) Cobalamin.	49
(2) As part of engaging in the administration of drugs by	50
injection pursuant to this section, a pharmacist may administer	51
epinephrine or diphenhydramine, or both, to an individual in an	52
emergency situation resulting from an adverse reaction to a drug	53
administered by the pharmacist.	54
(C) To be authorized to administer drugs pursuant to this	55
section, a pharmacist must do all of the following:	56
(1) Successfully complete a course in the administration	57
of drugs that satisfies the requirements established by the	58
state board of pharmacy in rules adopted under division (H)(1)	59
(a) of this section;	60
(2) Receive and maintain certification to perform basic	61
life-support procedures by successfully completing a basic life-	62
support training course that is certified by the American red	63
cross or American heart association or approved by the state	64
board of pharmacy;	65
(3) Practice in accordance with a protocol that meets the	66
requirements of division (F) of this section.	67
(D) Each time a pharmacist administers a drug pursuant to	68
this section, the pharmacist shall do all of the following:	69

(1) Obtain permission in accordance with the procedures 70 specified in rules adopted under division (H) of this section 71 and comply with the following requirements: 72 (a) Except as provided in division (D)(1)(c) of this 73 section, for each drug administered by a pharmacist to an 74 individual who is eighteen years of age or older, the pharmacist 75 shall obtain permission from the individual. 76 (b) For each drug administered by a pharmacist to an 77 individual who is under eighteen years of age, the pharmacist 78 shall obtain permission from the individual's parent or other 79 person having care or charge of the individual. 80 (c) For each drug administered by a pharmacist to an 81 individual who lacks the capacity to make informed health care 82 decisions, the pharmacist shall obtain permission from the 83 person authorized to make such decisions on the individual's 84 behalf. 85 (2) In the case of an opioid antagonist an addiction 86 treatment drug described in division (B) (1) (a) of this section, 87 obtain in accordance with division (E) of this section test 88 results indicating that it is appropriate to administer the drug 89 to the individual if either of the following is to be 90 administered: 91 (a) The initial dose of the drug; 92 (b) Any subsequent dose, if the administration occurs more 93 than thirty days after the previous dose of the drug was 94 administered. 95 (3) Observe the individual to whom the drug is 96 administered to determine whether the individual has an adverse 97 reaction to the drug; 98

(4) Notify the physician who prescribed the drug that the 99 drug has been administered to the individual. 100 (E) A pharmacist may obtain the test results described in 101 division (D)(2) of this section in either of the following ways: 102 103 (1) From the physician; (2) By ordering blood and urine tests for the individual 104 to whom the opioid antagonist drug is to be administered. 105 If a pharmacist orders blood and urine tests, the 106 pharmacist shall evaluate the results of the tests to determine 107 whether they indicate that it is appropriate to administer the 108 opioid antagonist drug. A pharmacist's authority to evaluate 109 test results under this division does not authorize the 110 pharmacist to make a diagnosis. 111 (F) All of the following apply with respect to the 112 protocol required by division (C)(3) of this section: 113 (1) The protocol must be established by a physician who 114 has a scope of practice that includes treatment of the condition 115 for which the individual has been prescribed the drug to be 116 administered. 117 (2) The protocol must satisfy the requirements established 118 in rules adopted under division (H)(1)(b) of this section. 119 (3) The protocol must do all of the following: 120 (a) Specify a definitive set of treatment guidelines; 121 (b) Specify the locations at which a pharmacist may engage 122 in the administration of drugs pursuant to this section; 123 (c) Include provisions for implementing the requirements 124 of division (D) of this section, including for purposes of 125

division (D)(3) of this section provisions specifying the length 126 of time and location at which a pharmacist must observe an 127 individual who receives a drug to determine whether the 128 individual has an adverse reaction to the drug; 129 (d) Specify procedures to be followed by a pharmacist when 130 administering epinephrine, diphenhydramine, or both, to an 131 individual who has an adverse reaction to a drug administered by 132 the pharmacist. 133 (G) A pharmacist shall not do either of the following: 134 (1) Engage in the administration of drugs pursuant to this 135 section unless the requirements of division (C) of this section 136 have been met; 137 (2) Delegate to any person the pharmacist's authority to 138 engage in the administration of drugs pursuant to this section. 139 (H) (1) The state board of pharmacy shall adopt rules to 140 implement this section. The rules shall be adopted in accordance 141 with Chapter 119. of the Revised Code and include all of the 142 following: 143 (a) Requirements for courses in administration of drugs; 144 145 (b) Requirements for protocols to be followed by pharmacists in administering drugs pursuant to this section; 146 (c) Procedures to be followed by a pharmacist in obtaining 147 permission to administer a drug to an individual. 148

(2) The board shall consult with the state medical boardbefore adopting rules regarding requirements for protocols underthis section.

Sec. 4729.553. (A) As used in this section: 152

(1) "Advanced practice registered nurse" has the same	153
meaning as in section 4723.01 of the Revised Code.	154
(2) "Controlled substance" has the same meaning as in	155
section 3719.01 of the Revised Code.	156
$\frac{(2)}{(3)}$ "Hospital" means a hospital registered with the	157
department of health under section 3701.07 of the Revised Code.	158
(3) (4) "Office-based opioid treatment" means the	159
treatment of opioid dependence or addiction using a controlled	160
substance.	161
(5) "Physician" means an individual who is authorized	162
under Chapter 4731. of the Revised Code to practice medicine and	163
surgery or osteopathic medicine and surgery.	164
(6) "Physician assistant" means an individual who is	165
licensed under Chapter 4730. of the Revised Code.	166
(B)(1) Except as provided in division divisions (B)(2) and	167
(3) of this section, no person shall knowingly operate a	168
facility, clinic, or other location where a prescriber provides	169
office-based opioid treatment to more than thirty patients or	170
that meets any other identifying criteria established in rules	171
adopted under this section without holding a category III	172
terminal distributor of dangerous drugs license with an office-	173
based opioid treatment classification.	174
(2) Division (B)(1) of this section does not apply to any	175
of the following:	176
(a) A hospital;	177
(b) A facility for the treatment of opioid dependence or	178
addiction that is operated by a hospital;	179

(c) A physician practice owned or controlled, in whole or
in part, by a hospital or by an entity that owns or controls, in
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whole or in part, one or more hospitals;
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(d) A facility that conducts only clinical research and
uses controlled substances in studies approved by a hospitalbased institutional review board or an institutional review
board that is accredited by the association for the
accreditation of human research protection programs, inc.;

(e) A facility that holds a category III terminal 188 distributor of dangerous drugs license in accordance with 189 section 4729.54 of the Revised Code for the purpose of treating 190 drug dependence or addiction as part of an opioid treatment 191 program and is the subject of a current, valid certification 192 from the substance abuse and mental health services 193 administration of the United States department of health and 194 human services pursuant to 42 C.F.R. 8.11; 195

(f) A program or facility that holds a license or 196 certification issued by the department of mental health and 197 addiction services under Chapter 5119. of the Revised Code if 198 the license or certification is approved by the state board of 199 pharmacy; 200

(g) A federally qualified health center or federally
qualified health center look-alike, as defined in section
3701.047 of the Revised Code;
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(h) A state or local correctional facility, as defined in 204section 5163.45 of the Revised Code; 205

(i) <u>A facility in which patients are treated on-site for</u>206opioid dependence or addiction exclusively through direct207administration by a physician, physician assistant, or advanced208

practice registered nurse of drugs that are used for treatment	209					
of opioid dependence or addiction and are neither dispensed nor						
personally furnished to patients for off-site self-						
administration;						
(i) Any other facility apacified in rules adopted under	213					
(j) Any other facility specified in rules adopted under						
this section.	214					
(3) A patient who receives treatment on-site for opioid	215					
dependence or addiction through direct administration of a drug	216					
by a physician, physician assistant, or advanced practice	217					
registered nurse shall not be included in determining whether	218					
more than thirty patients are being provided office-based opioid	219					
treatment in a particular facility, clinic, or other location	220					
that is subject to division (B)(1) of this section.	221					
(C) To be eligible to receive a license as a category III	222					
terminal distributor of dangerous drugs with an office-based	223					
opioid treatment classification, an applicant shall submit	224					
evidence satisfactory to the <u>state</u> board <u>of pharmacy</u> that the	225					
applicant's office-based opioid treatment will be operated in	226					
accordance with the requirements specified in division (D) of	227					
this section and that the applicant meets any other applicable						
requirements of this chapter.	229					
If the board determines that an applicant meets all of the	230					
requirements, the board shall issue to the applicant a license	231					
as a category III terminal distributor of dangerous drugs with	232					
an office-based opioid treatment classification.	233					
(D) The holder of a category III terminal distributor	234					
license with an office-based opioid treatment classification	235					
shall do all of the following:	236					
(1) Be in control of a facility that is owned and operated	237					

solely by one or more physicians authorized under Chapter 4731.	238					
of the Revised Code to practice medicine and surgery or						
osteopathic medicine and surgery, unless the state board of						
pharmacy waives this requirement for the holder;	241					
(2) Comply with the requirements for conducting office-	242					
based opioid treatment, as established by the state medical	243					
board in rules adopted under section 4731.056 of the Revised	244					
Code;	245					
(3) Require any person with ownership of the facility to	246					
submit to a criminal records check in accordance with section	247					
4776.02 of the Revised Code and send the results of the criminal	248					
records check directly to the state board of pharmacy for review	249					
and decision under section 4729.071 of the Revised Code;	250					
(4) Require each person employed by or seeking employment	251					
with the facility to submit to a criminal records check in	252					
accordance with section 4776.02 of the Revised Code;	253					
(5) Ensure that a person is not employed by the facility	254					
if the person, within the ten years immediately preceding the	255					
date the person applied for employment, was convicted of or	256					
pleaded guilty to either of the following, unless the state	257					
board of pharmacy permits the person to be employed by waiving	258					
this requirement for the facility:	259					
(a) A theft offense, described in division (K)(3) of	260					
section 2913.01 of the Revised Code, that would constitute a	261					
felony under the laws of this state, any other state, or the						
United States;	263					
(b) A felony drug offense, as defined in section 2925.01	264					
of the Revised Code.	265					
(6) Maintain a list of each person with ownership of the	266					

facility and notify the state board of pharmacy of any change to that list.

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

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

(G) The state board of pharmacy shall adopt rules as it
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considers necessary to implement and administer this section.
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The rules shall be adopted in accordance with Chapter 119. of
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the Revised Code.
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Sec. 4729.80. (A) If the state board of pharmacy 284
establishes and maintains a drug database pursuant to section 285
4729.75 of the Revised Code, the board is authorized or required 286
to provide information from the database only as follows: 287

288 (1) On receipt of a request from a designated representative of a government entity responsible for the 289 licensure, regulation, or discipline of health care 290 professionals with authority to prescribe, administer, or 291 dispense drugs, the board may provide to the representative 292 information from the database relating to the professional who 293 is the subject of an active investigation being conducted by the 294 government entity or relating to a professional who is acting as 295

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an expert witness for the government entity in such an 296 investigation. 297

(2) On receipt of a request from a federal officer, or a 298 state or local officer of this or any other state, whose duties 299 include enforcing laws relating to drugs, the board shall 300 provide to the officer information from the database relating to 301 the person who is the subject of an active investigation of a 302 drug abuse offense, as defined in section 2925.01 of the Revised 303 Code, being conducted by the officer's employing government 304 305 entity.

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

(4) Pursuant to a subpoena, search warrant, or court order in connection with the investigation or prosecution of a possible or alleged criminal offense, the board shall provide information from the database as necessary to comply with the subpoena, search warrant, or court order.

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

(a) The prescriber certifies in a form specified by the
board that it is for the purpose of providing medical treatment
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to the patient who is the subject of the request;
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(b) The prescriber has not been denied access to the 325 database by the board. 326

(6) On receipt of a request from a pharmacist or the 327 pharmacist's delegate approved by the board, the board shall 328 provide to the pharmacist information from the database relating 329 to a current patient of the pharmacist, if the pharmacist 330 certifies in a form specified by the board that it is for the 331 purpose of the pharmacist's practice of pharmacy involving the 332 patient who is the subject of the request and the pharmacist has 333 not been denied access to the database by the board. 334

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

(8) On receipt of a request from a medical director or a 340 pharmacy director of a managed care organization that has 341 entered into a contract with the department of medicaid under 342 section 5167.10 of the Revised Code and a data security 343 agreement with the board required by section 5167.14 of the 344 Revised Code, the board shall provide to the medical director or 345 the pharmacy director information from the database relating to 346 a medicaid recipient enrolled in the managed care organization, 347 including information in the database related to prescriptions 348 for the recipient that were not covered or reimbursed under a 349 program administered by the department of medicaid. 350

(9) On receipt of a request from the medicaid director,
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the board shall provide to the director information from the
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database relating to a recipient of a program administered by
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the department of medicaid, including information in the
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database related to prescriptions for the recipient that were355not covered or paid by a program administered by the department.356

(10) On receipt of a request from a medical director of a 357 managed care organization that has entered into a contract with 358 the administrator of workers' compensation under division (B)(4) 359 of section 4121.44 of the Revised Code and a data security 360 agreement with the board required by section 4121.447 of the 361 Revised Code, the board shall provide to the medical director 362 information from the database relating to a claimant under 363 Chapter 4121., 4123., 4127., or 4131. of the Revised Code 364 assigned to the managed care organization, including information 365 in the database related to prescriptions for the claimant that 366 were not covered or reimbursed under Chapter 4121., 4123., 367 4127., or 4131. of the Revised Code, if the administrator of 368 workers' compensation confirms, upon request from the board, 369 that the claimant is assigned to the managed care organization. 370

(11) On receipt of a request from the administrator of 371 workers' compensation, the board shall provide to the 372 administrator information from the database relating to a 373 claimant under Chapter 4121., 4123., 4127., or 4131. of the 374 Revised Code, including information in the database related to 375 prescriptions for the claimant that were not covered or 376 reimbursed under Chapter 4121., 4123., 4127., or 4131. of the 377 Revised Code. 378

(12) On receipt of a request from a prescriber or the 379 prescriber's delegate approved by the board, the board shall 380 provide to the prescriber information from the database relating 381 to a patient's mother, if the prescriber certifies in a form 382 specified by the board that it is for the purpose of providing 383 medical treatment to a newborn or infant patient diagnosed as 384

opioid dependent and the prescriber has not been denied access 385 to the database by the board. 386

(13) On receipt of a request from the director of health, 387 the board shall provide to the director information from the 388 database relating to the duties of the director or the 389 department of health in implementing the Ohio violent death 390 reporting system established under section 3701.93 of the 391 Revised Code. 392

(14) On receipt of a request from a requestor described in 393 division (A)(1), (2), (5), or (6) of this section who is from or 394 participating with another state's prescription monitoring 395 program, the board may provide to the requestor information from 396 the database, but only if there is a written agreement under 397 which the information is to be used and disseminated according 398 to the laws of this state. 399

(15) On receipt of a request from a delegate of a retail 400 dispensary licensed under Chapter 3796. of the Revised Code who 401 is approved by the board to serve as the dispensary's delegate, 402 the board shall provide to the delegate a report of information 403 from the database pertaining only to a patient's use of medical 404 marijuana, if both of the following conditions are met: 405

(a) The delegate certifies in a form specified by the
board that it is for the purpose of dispensing medical marijuana
for use in accordance with Chapter 3796. of the Revised Code.
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(b) The retail dispensary or delegate has not been denied409access to the database by the board.410

(16) On receipt of a request from a judge of a program
certified by the Ohio supreme court as a specialized docket
program for drugs, the board shall provide to the judge, or an
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employee of the program who is designated by the judge to414receive the information, information from the database that415relates specifically to a current or prospective program416participant.417

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

(18) On receipt of a request from a prescriber, the board
may provide to the prescriber a summary of the prescriber's
prescribing record if such a record is created by the board.
Information in the summary is subject to the confidentiality
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requirements of this chapter.
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(19) (a) On receipt of a request from a pharmacy's
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responsible person, the board may provide to the responsible
person a summary of the pharmacy's dispensing record if such a
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record is created by the board. Information in the summary is
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subject to the confidentiality requirements of this chapter.
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(b) As used in division (A) (19) (a) of this section,
"responsible person" has the same meaning as in rules adopted by
the board under section 4729.26 of the Revised Code.
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(20) The board may provide information from the database
without request to a prescriber or pharmacist who is authorized
to use the database pursuant to this chapter.
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(21) (a) On receipt of a request from a prescriber or
pharmacist, or the prescriber's or pharmacist's delegate, who is
a designated representative of a peer review committee, the
board shall provide to the committee information from the
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database relating to a prescriber who is subject to the443committee's evaluation, supervision, or discipline if the444information is to be used for one of those purposes. The board445shall provide only information that it determines, in accordance446with rules adopted under section 4729.84 of the Revised Code, is447appropriate to be provided to the committee.448

(b) As used in division (A) (21) (a) of this section, "peer 449
review committee" has the same meaning as in section 2305.25 of 450
the Revised Code, except that it includes only a peer review 451
committee of a hospital or a peer review committee of a 452
nonprofit health care corporation that is a member of the 453
hospital or of which the hospital is a member. 454

(22) <u>On receipt of a request from a requestor described in</u> 455 division (A)(5) or (6) of this section who is from or 456 participating with a prescription monitoring program that is 457 operated by a federal agency and approved by the board, the 458 board may provide to the requestor information from the 459 database, but only if there is a written agreement under which 460 the information is to be used and disseminated according to the 461 462 laws of this state.

(23) Any personal health information submitted to the463board pursuant to section 4729.772 of the Revised Code may be464provided by the board only as authorized by the submitter of the465information and in accordance with rules adopted under section4664729.84 of the Revised Code.467

(B) The state board of pharmacy shall maintain a record of
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enforcement outcomes.

The board may provide records of an individual's requests	474
for database information only to the following:	475

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

(2) A federal officer, or a state or local officer of this
or any other state, whose duties include enforcing laws relating
to drugs and who is involved in an active investigation being
conducted by the officer's employing government entity of the
individual who submitted the requests for database information;
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(3) A designated representative of the department of
medicaid regarding a prescriber who is treating or has treated a
recipient of a program administered by the department and who
submitted the requests for database information.

(C) Information contained in the database and any 492 information obtained from it is confidential and is not a public 493 record. Information contained in the records of requests for 494 information from the database is confidential and is not a 495 public record. Information contained in the database that does 496 not identify a person, including any licensee or registrant of 497 the board or other entity, may be released in summary, 498 statistical, or aggregate form. 499

(D) A pharmacist or prescriber shall not be held liable in 500 damages to any person in any civil action for injury, death, or 501

loss to person or property on the basis that the pharmacist or 502 prescriber did or did not seek or obtain information from the 503 database. 504 Sec. 4730.56. (A) As used in this section: 505 (1) "Community addiction services provider" has the same 506 meaning as in section 5119.01 of the Revised Code. 507 (2) "Medication-assisted treatment" has the same meaning 508 as in section 340.01 of the Revised Code. 509 (B) A physician assistant shall comply with section 510 3719.064 of the Revised Code and rules adopted under section 511 4730.55 of the Revised Code when treating a patient with 512 medication-assisted treatment or proposing to initiate such 513 treatment. 514 (C) A physician assistant who fails to comply with this 515 section shall treat not more than thirty patients at any one 516 time with medication-assisted treatment even if the facility or 517 518 location at which the treatment is provided is either of the following: 519 (1) Exempted by divisions (B)(2)(a) to (d) or (i) of 520 section 4729.553 of the Revised Code from being required to 521 possess a category III terminal distributor of dangerous drugs 522

license with an office-based opioid treatment classification; 523(2) A community addiction services provider that provides 524

alcohol and drug addiction services that are certified by the 525 department of mental health and addiction services under section 526 5119.36 of the Revised Code. 527

Sec. 4731.83. (A) As used in this section: 528

(1) "Medication-assisted treatment" has the same meaning 529

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as in section 340.01 of the Revised Code. 530 (2) "Physician" means an individual authorized by this 531 chapter to practice medicine and surgery or osteopathic medicine 532 and surgery. 533 (B) A physician shall comply with section 3719.064 of the 534 Revised Code and rules adopted under section 4731.056 of the 535 Revised Code when treating a patient with medication-assisted 536 treatment or proposing to initiate such treatment. 537 (C) A physician who fails to comply with this section 538 shall treat not more than thirty patients at any one time with 539 medication-assisted treatment even if the facility or location 540 at which the treatment is provided is either of the following: 541 (1) Exempted by divisions (B)(2)(a) to (d) or (i) of 542 section 4729.553 of the Revised Code from being required to 543 possess a category III terminal distributor of dangerous drugs 544 license with an office-based opioid treatment classification; 545 (2) A community addiction services provider that provides 546 alcohol and drug addiction services that are certified by the 547 department of mental health and addiction services under section 548 5119.36 of the Revised Code. 549 550 Section 2. That existing sections 4723.52, 4729.45, 4729.553, 4729.80, 4730.56, and 4731.83 of the Revised Code are 551 hereby repealed. 552 Section 3. Section 4729.553 of the Revised Code is 553 presented in this act as a composite of the section as amended 554

by both Sub. H.B. 101 and Sub. S.B. 229 of the 132nd General555Assembly. The General Assembly, applying the principle stated in556division (B) of section 1.52 of the Revised Code that amendments557are to be harmonized if reasonably capable of simultaneous558

operation,	find	ds that	the c	ompo	osite	is the	res	sulti	ng	vers	sion of	f	559
the section	n in	effect	prior	to	the	effecti	ve c	date	of	the	sectio	on	560
as presente	ed in	n this a	act.										561