As Introduced

134th General Assembly Regular Session 2021-2022

H. B. No. 652

Representatives Plummer, Young, T.

A BILL

Го	amend sections 3719.01, 4715.302, 4723.481,	1
	4723.487, 4730.42, 4730.53, 4731.052, 4731.054,	2
	and 4731.055 and to enact sections 3719.065 and	3
	3719.081 of the Revised Code to revise the law	4
	governing the review of patient information in	5
	the Ohio Automated Rx Reporting System, to	6
	establish requirements on the dispensing of	7
	opioid analgesics, to provide for a cash	8
	transfer, and to amend the version of section	9
	4723.481 of the Revised Code that is scheduled	10
	to take effect on September 30, 2024, to	11
	continue the changes to that section on and	12
	after that date.	13

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

Section 1. That sections 3719.01, 4715.302, 4723.481,	14
4723.487, 4730.42, 4730.53, 4731.052, 4731.054, and 4731.055 be	15
amended and sections 3719.065 and 3719.081 of the Revised Code	16
be enacted to read as follows:	17
Sec. 3719.01. As used in this chapter:	18
(A) "Administer" means the direct application of a drug,	19

whether by injection, inhalation, ingestion, or any other means	20
to a person or an animal.	21
(B) "Drug enforcement administration" means the drug	22
enforcement administration of the United States department of	23
justice or its successor agency.	24
(C) "Controlled substance" means a drug, compound,	25
mixture, preparation, or substance included in schedule I, II,	26
III, IV, or V.	27
(D) "Dangerous drug" has the same meaning as in section	28
4729.01 of the Revised Code.	29
(E) "Dispense" means to sell, leave with, give away,	30
dispose of, or deliver.	31
(F) "Distribute" means to deal in, ship, transport, or	32
deliver but does not include administering or dispensing a drug.	33
(G) "Drug" has the same meaning as in section 4729.01 of	34
the Revised Code.	35
(H) "Drug abuse offense" and "felony drug abuse offense"	36
have the same meanings as in section 2925.01 of the Revised	37
Code.	38
(I) "Federal drug abuse control laws" means the	39
"Comprehensive Drug Abuse Prevention and Control Act of 1970,"	40
84 Stat. 1242, 21 U.S.C. 801, as amended.	41
(J) "Hospital" means a facility registered as a hospital	42
with the department of health under section 3701.07 has the same	43
meaning as in section 3722.01 of the Revised Code.	44
(K) "Hypodermic" means a hypodermic syringe or needle, or	45
other instrument or device for the injection of medication.	46

(L) "Manufacturer" means a person who manufactures a	47
controlled substance, as "manufacture" is defined in section	48
3715.01 of the Revised Code, and includes a "manufacturer of	49
dangerous drugs" as defined in section 4729.01 of the Revised	50
Code.	51
(M) "Marihuana" means all parts of a plant of the genus	52
cannabis, whether growing or not; the seeds of a plant of that	53
type; the resin extracted from a part of a plant of that type;	54
and every compound, manufacture, salt, derivative, mixture, or	55
preparation of a plant of that type or of its seeds or resin.	56
"Marihuana" does not include the mature stalks of the plant,	57
fiber produced from the stalks, oils or cake made from the seeds	58
of the plant, or any other compound, manufacture, salt,	59
derivative, mixture, or preparation of the mature stalks, except	60
the resin extracted from the mature stalks, fiber, oil or cake,	61
	62
or the sterilized seed of the plant that is incapable of	63
germination. "Marihuana" does not include "hemp" or a "hemp	
product" as those terms are defined in section 928.01 of the	64
Revised Code.	65
(N) "Narcotic drugs" means coca leaves, opium,	66
isonipecaine, amidone, isoamidone, ketobemidone, as defined in	67
this division, and every substance not chemically distinguished	68
from them and every drug, other than cannabis, that may be	69
included in the meaning of "narcotic drug" under the federal	70
drug abuse control laws. As used in this division:	71
(1) "Coca leaves" includes cocaine and any compound,	72
manufacture, salt, derivative, mixture, or preparation of coca	73
leaves, except derivatives of coca leaves, that does not contain	74
cocaine, ecgonine, or substances from which cocaine or ecgonine	75

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may be synthesized or made.

(2) "Isonipecaine" means any substance identified	77
chemically as 1-methyl-4-phenyl-piperidine-4-carboxylic acid	78
ethyl ester, or any salt thereof, by whatever trade name	79
designated.	80
(3) "Amidone" means any substance identified chemically as	81
4-4-diphenyl-6-dimethylamino-heptanone-3, or any salt thereof,	82
by whatever trade name designated.	83
(4) "Isoamidone" means any substance identified chemically	84
as 4-4-diphenyl-5-methyl-6-dimethylaminohexanone-3, or any salt	85
thereof, by whatever trade name designated.	86
(5) "Ketobemidone" means any substance identified	87
chemically as 4-(3-hydroxyphenyl)-1-methyl-4-piperidyl ethyl	88
ketone hydrochloride, or any salt thereof, by whatever trade	89
name designated.	90
(6) "Cocaine" has the same meaning as in section 2925.01	91
of the Revised Code.	92
(O) "Official written order" means an order written on a	93
form provided for that purpose by the director of the United	94
States drug enforcement administration, under any laws of the	95
United States making provision for the order, if the order forms	96
are authorized and required by federal law.	97
(P) "Person" means any individual, corporation,	98
government, governmental subdivision or agency, business trust,	99
estate, trust, partnership, association, or other legal entity.	100
(Q) "Pharmacist" means a person licensed under Chapter	101
4729. of the Revised Code to engage in the practice of pharmacy.	102
(R) "Pharmacy" has the same meaning as in section 4729.01	103
of the Revised Code.	104

(S) "Poison" means any drug, chemical, or preparation	105
likely to be deleterious or destructive to adult human life in	106
quantities of four grams or less.	107
(T) "Licensed health professional authorized to prescribe	108
drugs," "prescriber," and "prescription" have the same meanings	109
as in section 4729.01 of the Revised Code.	110
(U) "Sale" includes delivery, barter, exchange, transfer,	111
or gift, or offer thereof, and each transaction of those natures	112
made by any person, whether as principal, proprietor, agent,	113
servant, or employee.	114
(V) "Schedule I," "schedule II," "schedule III," "schedule	115
IV," and "schedule V" mean controlled substance schedules I, II,	116
III, IV, and V, respectively, as established by rule adopted	117
under section 3719.41 of the Revised Code, as amended pursuant	118
to section 3719.43 or 3719.44 of the Revised Code, or as	119
established by emergency rule adopted under section 3719.45 of	120
the Revised Code.	121
(W) "Wholesaler" means a person who, on official written	122
orders other than prescriptions, supplies controlled substances	123
that the person has not manufactured, produced, or prepared	124
personally and includes a "wholesale distributor of dangerous	125
drugs" as defined in section 4729.01 of the Revised Code.	126
(X) "Animal shelter" means a facility operated by a humane	127
society or any society organized under Chapter 1717. of the	128
Revised Code or a dog pound operated pursuant to Chapter 955. of	129
the Revised Code.	130
(Y) "Terminal distributor of dangerous drugs" has the same	131
meaning as in section 4729.01 of the Revised Code.	132
(Z)(1) "Controlled substance analog" means, except as	133

provided in division (Z)(2) of this section, a substance to	134
which both of the following apply:	135
(a) The chemical structure of the substance is	136
substantially similar to the structure of a controlled substance	137
in schedule I or II.	138
(b) One of the following applies regarding the substance:	139
(i) The substance has a stimulant, depressant, or	140
hallucinogenic effect on the central nervous system that is	141
substantially similar to or greater than the stimulant,	142
depressant, or hallucinogenic effect on the central nervous	143
system of a controlled substance in schedule I or II.	144
(ii) With respect to a particular person, that person	145
represents or intends the substance to have a stimulant,	146
depressant, or hallucinogenic effect on the central nervous	147
system that is substantially similar to or greater than the	148
stimulant, depressant, or hallucinogenic effect on the central	149
nervous system of a controlled substance in schedule I or II.	150
(2) "Controlled substance analog" does not include any of	151
the following:	152
(a) A controlled substance;	153
(b) Any substance for which there is an approved new drug	154
application;	155
(c) With respect to a particular person, any substance if	156
an exemption is in effect for investigational use for that	157
person pursuant to federal law to the extent that conduct with	158
respect to that substance is pursuant to that exemption;	159
(d) Any substance to the extent it is not intended for	160
human consumption before the exemption described in division (Z)	161

(2) (b) of this section takes effect with respect to that	162
substance.	163
(AA) "Benzodiazepine" means a controlled substance that	164
has United States food and drug administration approved labeling	165
indicating that it is a benzodiazepine, benzodiazepine	166
derivative, triazolobenzodiazepine, or triazolobenzodiazepine	167
derivative, including the following drugs and their varying salt	168
forms or chemical congeners: alprazolam, chlordiazepoxide	169
hydrochloride, clobazam, clonazepam, clorazepate, diazepam,	170
estazolam, flurazepam hydrochloride, lorazepam, midazolam,	171
oxazepam, quazepam, temazepam, and triazolam.	172
(BB) "Opioid analgesic" means a controlled substance that	173
has analgesic pharmacologic activity at the opioid receptors of	174
the central nervous system, including the following drugs and	175
their varying salt forms or chemical congeners: buprenorphine,	176
butorphanol, codeine (including acetaminophen and other	177
combination products), dihydrocodeine, fentanyl, hydrocodone	178
(including acetaminophen combination products), hydromorphone,	179
meperidine, methadone, morphine sulfate, oxycodone (including	180
acetaminophen, aspirin, and other combination products),	181
oxymorphone, tapentadol, and tramadol.	182
(CC) "Outsourcing facility," "repackager of dangerous	183
drugs," and "third-party logistics provider" have the same	184
meanings as in section 4729.01 of the Revised Code.	185
Sec. 3719.065. (A) As used in this section:	186
(1) "Health-related licensing board" has the same meaning	187
as in section 3719.062 of the Revised Code.	188
(2) "Prescriber" has the same meaning as in section	189
3719.01 of the Revised Code, except that it does not include a	190

veterinarian licensed under Chapter 4741. of the Revised Code.	191
(B) A pharmacist who dispenses an opioid analgesic in an	192
amount indicated for a period of five or more days shall discuss	193
with the patient or the patient's representative the risks of	194
opioid addiction, including that the risk of addiction increases	195
substantially after taking such a drug for five or more days.	196
For each discussion, the pharmacist may charge the fee	197
established under section 5164.7516 of the Revised Code,	198
regardless of the payment source.	199
(C) Each health-related licensing board shall adopt	200
guidelines regarding counseling and education to be provided by	201
a prescriber to a patient who is prescribed an opioid analgesic	202
in an amount indicated for a period of five or more days.	203
Sec. 3719.081. (A) In addition to the requirements	204
described in section 3719.08 of the Revised Code, when a	205
pharmacist dispenses a controlled substance that is an opioid	206
analgesic on a prescription for use by a patient outside of a	207
hospital, the pharmacist shall affix to the container in which	208
the opioid analgesic is dispensed a warning label or sticker.	209
The warning label or sticker shall describe the risks associated	210
with opioid analgesics and shall be red in color with text	211
<pre>printed in black.</pre>	212
(B)(1) The board of pharmacy shall adopt rules	213
establishing standards and procedures for all of the following:	214
(a) The location on the container where the warning label	215
or sticker is to be affixed;	216
(b) The language to be included on the warning label or	217
sticker, which, at minimum, shall indicate that the drug inside	218
the container is an opioid analgesic and that such a drug	219

<pre>carries a risk of addiction and overdose;</pre>	220
(c) The font and format of any language to be included on	221
the warning label or sticker.	222
(2) The board may adopt any other rules as necessary to	223
implement this section.	224
(3) When adopting rules under this section, the board	225
shall do so in accordance with Chapter 119. of the Revised Code.	226
Sec. 4715.302. (A) As used in this section:	227
(1) "Drug database" means the database established and	228
maintained by the state board of pharmacy pursuant to section	229
4729.75 of the Revised Code.	230
(2) "Opioid analgesic" and "benzodiazepine" have the same	231
meanings as in section 3719.01 of the Revised Code.	232
(B) Except as provided in divisions (C) and (E) of this	233
section, a dentist shall comply with all of the following as	234
conditions of prescribing a drug that is either an opioid	235
analgesic or a benzodiazepine, or personally furnishing a	236
complete or partial supply of such a drug, as part of a	237
patient's course of treatment for a particular condition:	238
(1) Before initially prescribing or furnishing the drug,	239
the dentist or the dentist's delegate shall request from the	240
drug database a report of information related to the patient	241
that covers at least the twelve months immediately preceding the	242
date of the request. If the dentist practices primarily in a	243
county of this state that adjoins another state, the dentist or	244
delegate also shall request a report of any information	245
available in the drug database that pertains to prescriptions	246
issued or drugs furnished to the patient in the state adjoining	247

that county.	248
(2) If the patient's course of treatment for the condition	249
continues for more than ninety days after the initial report is	250
requested, the dentist or delegate shall make periodic requests	251
for reports of information from the drug database until the	252
course of treatment has ended. The requests shall be made at	253
intervals not exceeding ninety days, determined according to the	254
date the initial request was made. The request shall be made in	255
the same manner provided in division (B)(1) of this section for	256
requesting the initial report of information from the drug	257
database.	258
(3) On receipt of a report under division (B)(1) or (2) of	259
this section, the dentist shall assess the information in the	260
report. The dentist shall document in the patient's record that	261
the report was received and the information was assessed.	262
$\frac{(C)(1)(C)}{(C)}$ Division (B) of this section does not apply if a	263
drug database report regarding the patient is not available. In	264
this event, the dentist shall document in the patient's record	265
the reason that the report is not available.	266
(2) Division (B) of this section does not apply if the	267
drug is prescribed or personally furnished in an amount-	268
indicated for a period not to exceed seven days.	269
(D) The state dental board may adopt rules that establish	270
standards and procedures to be followed by a dentist regarding	271
the review of patient information available through the drug	272
database under division (A)(5) of section 4729.80 of the Revised	273
Code. The rules shall be adopted in accordance with Chapter 119.	274
of the Revised Code.	275
(E) This section and any rules adopted under it do not	276

apply if the state board of pharmacy no longer maintains the	277
drug database.	278
Sec. 4723.481. This section establishes standards and	279
conditions regarding the authority of an advanced practice	280
registered nurse who is designated as a clinical nurse	281
specialist, certified nurse-midwife, or certified nurse	282
practitioner to prescribe and personally furnish drugs and	283
therapeutic devices under a license issued under section 4723.42	284
of the Revised Code.	285
(A) Except as provided in division (F) of this section, a	286
clinical nurse specialist, certified nurse-midwife, or certified	287
nurse practitioner shall not prescribe or furnish any drug or	288
therapeutic device that is listed on the exclusionary formulary	289
established in rules adopted under section 4723.50 of the	290
Revised Code.	291
(B) The prescriptive authority of a clinical nurse	292
specialist, certified nurse-midwife, or certified nurse	293
practitioner shall not exceed the prescriptive authority of the	294
collaborating physician or podiatrist, including the	295
collaborating physician's authority to treat chronic pain with	296
controlled substances and products containing tramadol—as	297
described in section 4731.052 of the Revised Code.	298
(C)(1) Except as provided in division (C)(2) or (3) of	299
this section, a clinical nurse specialist, certified nurse-	300
midwife, or certified nurse practitioner may prescribe to a	301
patient a schedule II controlled substance only if all of the	302
following are the case:	303
(a) The patient has a terminal condition, as defined in	304
section 2133.01 of the Revised Code.	305

(b) A physician initially prescribed the substance for the	306
patient.	307
(c) The prescription is for an amount that does not exceed	308
the amount necessary for the patient's use in a single, seventy-	309
two-hour period.	310
(2) The restrictions on prescriptive authority in division	311
(C)(1) of this section do not apply if a clinical nurse	312
specialist, certified nurse-midwife, or certified nurse	313
practitioner issues the prescription to the patient from any of	314
the following locations:	315
(a) A hospital registered under section 3701.07 of the	316
Revised Code;	317
(b) An entity owned or controlled, in whole or in part, by	318
a hospital or by an entity that owns or controls, in whole or in	319
part, one or more hospitals;	320
(c) A health care facility operated by the department of	321
mental health and addiction services or the department of	322
developmental disabilities;	323
(d) A nursing home licensed under section 3721.02 of the	324
Revised Code or by a political subdivision certified under	325
section 3721.09 of the Revised Code;	326
(e) A county home or district home operated under Chapter	327
5155. of the Revised Code that is certified under the medicare	328
or medicaid program;	329
(f) A hospice care program, as defined in section 3712.01	330
of the Revised Code;	331
(g) A community mental health services provider, as	332
defined in section 5122.01 of the Revised Code;	333

(h) An ambulatory surgical facility, as defined in section	334
3702.30 of the Revised Code;	335
(i) A freestanding birthing center, as defined in section	336
3702.141 of the Revised Code;	337
(j) A federally qualified health center, as defined in	338
section 3701.047 of the Revised Code;	339
(k) A federally qualified health center look-alike, as	340
defined in section 3701.047 of the Revised Code;	341
(1) A health care office or facility operated by the board	342
of health of a city or general health district or the authority	343
having the duties of a board of health under section 3709.05 of	344
the Revised Code;	345
(m) A site where a medical practice is operated, but only	346
if the practice is comprised of one or more physicians who also	347
are owners of the practice; the practice is organized to provide	348
direct patient care; and the clinical nurse specialist,	349
certified nurse-midwife, or certified nurse practitioner	350
providing services at the site has a standard care arrangement	351
and collaborates with at least one of the physician owners who	352
practices primarily at that site;	353
(n) A residential care facility, as defined in section	354
3721.01 of the Revised Code.	355
(3) A clinical nurse specialist, certified nurse-midwife,	356
or certified nurse practitioner shall not issue to a patient a	357
prescription for a schedule II controlled substance from a	358
convenience care clinic even if the clinic is owned or operated	359
by an entity specified in division (C)(2) of this section.	360
(D) A pharmacist who acts in good faith reliance on a	361

prescription issued by a clinical nurse specialist, certified	362
nurse-midwife, or certified nurse practitioner under division	363
(C)(2) of this section is not liable for or subject to any of	364
the following for relying on the prescription: damages in any	365
civil action, prosecution in any criminal proceeding, or	366
professional disciplinary action by the state board of pharmacy	367
under Chapter 4729. of the Revised Code.	368
(E) A clinical nurse specialist, certified nurse-midwife,	369
or certified nurse practitioner shall comply with section	370
3719.061 of the Revised Code if the nurse prescribes for a	371
minor, as defined in that section, an opioid analgesic, as	372
defined in section 3719.01 of the Revised Code.	373
(F) Until the board of nursing establishes a new formulary	374
in rules adopted under section 4723.50 of the Revised Code, a	375
clinical nurse specialist, certified nurse-midwife, or certified	376
nurse practitioner who prescribes or furnishes any drug or	377
therapeutic device shall do so in accordance with the formulary	378
established by the board prior to—the effective date of this—	379
amendment_April 6, 2017.	380
Sec. 4723.487. (A) As used in this section:	381
(1) "Drug database" means the database established and	382
maintained by the state board of pharmacy pursuant to section	383
4729.75 of the Revised Code.	384
(2) "Opioid analgesic" and "benzodiazepine" have the same	385
meanings as in section 3719.01 of the Revised Code.	386
(B) Except as provided in divisions (C) and (E) of this	387
section, an advanced practice registered nurse who is designated	388
as a clinical nurse specialist, certified nurse-midwife, or	389
certified nurse practitioner shall comply with all of the	390

following as conditions of prescribing a drug that is either an	391
opioid analgesic or a benzodiazepine as part of a patient's	392
course of treatment for a particular condition:	393

- 394 (1) Before initially prescribing the drug, the advanced practice registered nurse or the advanced practice registered 395 nurse's delegate shall request from the drug database a report 396 of information related to the patient that covers at least the 397 twelve months immediately preceding the date of the request. If 398 the advanced practice registered nurse practices primarily in a 399 400 county of this state that adjoins another state, the advanced practice registered nurse or delegate also shall request a 401 report of any information available in the drug database that 402 pertains to prescriptions issued or drugs furnished to the 403 patient in the state adjoining that county. 404
- (2) If the patient's course of treatment for the condition 405 continues for more than ninety days after the initial report is 406 requested, the advanced practice registered nurse or delegate 407 shall make periodic requests for reports of information from the 408 drug database until the course of treatment has ended. The 409 requests shall be made at intervals not exceeding ninety days, 410 determined according to the date the initial request was made. 411 The request shall be made in the same manner provided in 412 division (B)(1) of this section for requesting the initial 413 report of information from the drug database. 414
- (3) On receipt of a report under division (B)(1) or (2) of this section, the advanced practice registered nurse shall 416 assess the information in the report. The advanced practice 417 registered nurse shall document in the patient's record that the 418 report was received and the information was assessed. 419
 - (C) Division (B) of this section does not apply if in any 420

of the following circumstances:	421
(1) A drug database report regarding the patient is not	422
available, in which case the advanced practice registered nurse	423
shall document in the patient's record the reason that the	424
report is not available.	425
(2) The drug is prescribed in an amount indicated for a	426
period not to exceed seven days.	427
(3)—The drug is prescribed for the treatment of cancer or	428
another condition associated with cancer.	429
$\frac{(4)-(3)}{(3)}$ The drug is prescribed to a hospice patient in a	430
hospice care program, as those terms are defined in section	431
3712.01 of the Revised Code, or any other patient diagnosed as	432
terminally ill.	433
$\frac{(5)}{(4)}$ The drug is prescribed for administration in a	434
hospital, nursing home, or residential care facility.	435
(D) The board of nursing may adopt rules, in accordance	436
with Chapter 119. of the Revised Code, that establish standards	437
and procedures to be followed by an advanced practice registered	438
nurse regarding the review of patient information available	439
through the drug database under division (A)(5) of section	440
4729.80 of the Revised Code. The rules shall be adopted in	441
accordance with Chapter 119. of the Revised Code.	442
(E) This section and any rules adopted under it do not	443
apply if the state board of pharmacy no longer maintains the	444
drug database.	445
Sec. 4730.42. (A) In granting physician-delegated	446
prescriptive authority to a particular physician assistant who	447
holds a valid prescriber number issued by the state medical	448

board, the supervising physician is subject to all of the	449
following:	450
(1) The supervising physician shall not grant physician-	451
delegated prescriptive authority for any drug or device that may	452
be used to perform or induce an abortion.	453
(2) The supervising physician shall not grant physician-	454
delegated prescriptive authority in a manner that exceeds the	455
supervising physician's prescriptive authority, including the	456
physician's authority to treat chronic pain with controlled	457
substances and products containing tramadol—as described in	458
section 4731.052 of the Revised Code.	459
(3) The supervising physician shall supervise the	460
physician assistant in accordance with both of the following:	461
(a) The supervision requirements specified in section	462
4730.21 of the Revised Code;	463
(b) The supervision agreement entered into with the	464
physician assistant under section 4730.19 of the Revised Code,	465
including, if applicable, the policies of the health care	466
facility in which the physician and physician assistant are	467
practicing.	468
(B)(1) The supervising physician of a physician assistant	469
may place conditions on the physician-delegated prescriptive	470
authority granted to the physician assistant. If conditions are	471
placed on that authority, the supervising physician shall	472
maintain a written record of the conditions and make the record	473
available to the state medical board on request.	474
(2) The conditions that a supervising physician may place	475
on the physician-delegated prescriptive authority granted to a	476
physician assistant include the following:	477

(a) Identification by class and specific generic	478
nomenclature of drugs and therapeutic devices that the physician	479
chooses not to permit the physician assistant to prescribe;	480
(b) Limitations on the dosage units or refills that the	481
physician assistant is authorized to prescribe;	482
(c) Specification of circumstances under which the	483
physician assistant is required to refer patients to the	484
supervising physician or another physician when exercising	485
physician-delegated prescriptive authority;	486
(d) Responsibilities to be fulfilled by the physician in	487
supervising the physician assistant that are not otherwise	488
specified in the supervision agreement or otherwise required by	489
this chapter.	490
Sec. 4730.53. (A) As used in this section:	491
(1) "Drug database" means the database established and	492
maintained by the state board of pharmacy pursuant to section	493
4729.75 of the Revised Code.	494
(2) "Opioid analgesic" and "benzodiazepine" have the same	495
meanings as in section 3719.01 of the Revised Code.	496
(B) Except as provided in divisions (C) and (E) of this	497
(B) Except as provided in divisions (C) and (E) of this section, a physician assistant licensed under this chapter who	497 498
section, a physician assistant licensed under this chapter who	498
section, a physician assistant licensed under this chapter who has been granted physician-delegated prescriptive authority	498 499
section, a physician assistant licensed under this chapter who has been granted physician-delegated prescriptive authority shall comply with all of the following as conditions of	498 499 500
section, a physician assistant licensed under this chapter who has been granted physician-delegated prescriptive authority shall comply with all of the following as conditions of prescribing a drug that is either an opioid analgesic or a	498 499 500 501
section, a physician assistant licensed under this chapter who has been granted physician-delegated prescriptive authority 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	498 499 500 501 502

from the drug database a report of information related to the	506
patient that covers at least the twelve months immediately	507
preceding the date of the request. If the physician assistant	508
practices primarily in a county of this state that adjoins	509
another state, the physician assistant or delegate also shall	510
request a report of any information available in the drug	511
database that pertains to prescriptions issued or drugs	512
furnished to the patient in the state adjoining that county.	513
(2) If the patient's course of treatment for the condition	514
continues for more than ninety days after the initial report is	515
requested, the physician assistant or delegate shall make	516
periodic requests for reports of information from the drug	517
database until the course of treatment has ended. The requests	518
shall be made at intervals not exceeding ninety days, determined	519
according to the date the initial request was made. The request	520
shall be made in the same manner provided in division (B)(1) of	521
this section for requesting the initial report of information	522
from the drug database.	523
(3) On receipt of a report under division (B)(1) or (2) of	524
this section, the physician assistant shall assess the	525
information in the report. The physician assistant shall	526
document in the patient's record that the report was received	527
and the information was assessed.	528
(C) Division (B) of this section does not apply in any of	529
the following circumstances:	530
(1) A drug database report regarding the patient is not	531
available, in which case the physician assistant shall document	532
in the patient's record the reason that the report is not	533

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available.

(2) The drug is prescribed in an amount indicated for a	535
period not to exceed seven days.	536
(3)—The drug is prescribed for the treatment of cancer or	537
another condition associated with cancer.	538
andener condition apportated with cancer.	000
$\frac{(4)-(3)}{(3)}$ The drug is prescribed to a hospice patient in a	539
hospice care program, as those terms are defined in section	540
3712.01 of the Revised Code, or any other patient diagnosed as	541
terminally ill.	542
$\frac{(5)}{(4)}$ The drug is prescribed for administration in a	543
hospital, nursing home, or residential care facility.	544
(D) The state medical board may adopt rules that establish	545
standards and procedures to be followed by a physician assistant	546
licensed under this chapter who has been granted physician-	547
delegated prescriptive authority regarding the review of patient	548
information available through the drug database under division	549
(A)(5) of section 4729.80 of the Revised Code. The rules shall	550
be adopted in accordance with Chapter 119. of the Revised Code.	551
(E) This section and any rules adopted under it do not	552
apply if the state board of pharmacy no longer maintains the	553
drug database.	554
Sec. 4731.052. (A) As used in this section:	555
(1) "Chronic pain" means pain that has persisted after	556
reasonable medical efforts have been made to relieve the pain or	557
cure its cause and that has continued, either continuously or	558
episodically, for longer than three continuous months. "Chronic	559
pain" does not include pain associated with a terminal condition	560
or with a progressive disease that, in the normal course of	561
progression, may reasonably be expected to result in a terminal	562
condition.	563

(2) "Controlled substance" has the same meaning as in	564
section 3719.01 of the Revised Code.	565
(3) "Physician" means an individual authorized under this	566
chapter to practice medicine and surgery or osteopathic medicine	567
and surgery.	568
(B) The state medical board shall adopt rules in	569
accordance with Chapter 119. of the Revised Code that establish	570
standards and procedures to be followed by physicians in the	571
diagnosis and treatment of chronic pain, including standards for	572
a physician's consultation with one or more other physicians who	573
specialize in the treatment of the area, system, or organ of the	574
body perceived as the source of pain and managing chronic pain	575
by prescribing, personally furnishing, or administering	576
controlled substances or products containing tramadol.	577
(C) When a physician diagnoses a patient as having chronic	578
pain, the physician may, subject to division (D) of this	579
section, treat the pain by managing it with controlled	580
substances—and products containing tramadol. The physician's	581
diagnosis and treatment decisions shall be made according to	582
accepted and prevailing standards for medical care. For the	583
purpose of assisting with the diagnosis of chronic pain, the	584
physician shall obtain and review all available medical records	585
or detailed written summaries of the patient's treatment for	586
chronic pain or the condition causing the chronic pain. It is	587
recommended that the physician also consider having the patient	588
evaluated by one or more other physicians who specialize in the	589
treatment of the area, system, or organ of the body perceived as	590
the source of the pain.	591
(D) For each patient a physician diagnoses as having	592

chronic pain, the physician shall maintain a written record of

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all of the following:	594
(1) Medical history and physical examination of the	595
patient;	596
(2) The diagnosis of chronic pain, including signs,	597
symptoms, and causes;	598
(3) The plan of treatment proposed, the patient's response	599
to treatment, and any modification to the plan of treatment,	600
including all of the following:	601
(a) Documentation that other medically reasonable	602
treatments for relief of the patient's chronic pain have been	603
offered or attempted without adequate or reasonable success;	604
(b) Periodic assessment and documentation of the patient's	605
functional status, including the ability to engage in work or	606
other purposeful activities, the pain intensity and its	607
interference with activities of daily living, quality of family	608
life and social activities, and physical activity of the	609
<pre>patient;</pre>	610
(c) Periodic assessment and documentation of the patient's	611
progress toward treatment objectives, including the intended	612
role of controlled substances or products containing tramadol	613
within the overall plan of treatment;	614
(d) Periodic assessment and documentation for indicators	615
of possible addiction, drug abuse, or drug diversion;	616
(e) Notation of any adverse drug effects.	617
(4) The dates on which controlled substances or products	618
containing tramadol were prescribed, furnished, or administered,	619
the name and address of the patient to or for whom the	620
controlled substances or products containing tramadol were	621

prescribed, furnished, or administered, and the amounts and	622
dosage forms for the controlled substances or products	623
<pre>containing tramadol prescribed, furnished, or administered;</pre>	624
(5) A copy of any record or report made by another	625
physician that was used or consulted for the purpose of	626
diagnosing the patient's chronic pain or treating the patient	627
for chronic pain.	628
(E) A physician shall not prescribe, personally furnish,	629
or administer to a patient a controlled substance or product	630
containing tramadol without taking into account the potential	631
for abuse of the controlled substance or product, the	632
possibility the controlled substance or product may lead to	633
dependence, the possibility the patient will obtain the	634
controlled substance or product for a nontherapeutic use or	635
distribute it to other persons, and the potential existence of	636
an illicit market for the controlled substance or product. In	637
addition, the physician shall address with the patient the risks	638
associated with protracted treatment with controlled substances	639
or products containing tramadol, including informing the patient	640
of the potential for dependence, tolerance, and addiction and	641
the clinical or monitoring tools the physician may use if signs	642
of addiction, drug abuse, or drug diversion are present.	643
(F) A physician who treats chronic pain by managing it	644
with controlled substances or products containing tramadol—is	645
not subject to disciplinary action by the board under section	646
4731.22 of the Revised Code solely because the physician treated	647
the chronic pain with controlled substances or products	648
containing tramadol.	649
Sec. 4731.054. (A) As used in this section:	650

(1) "Chronic pain" has the same meaning as in section	651
4731.052 of the Revised Code.	652
(2) "Controlled substance" has the same meaning as in	653
section 3719.01 of the Revised Code.	654
(3) "Hospice care program" means a program licensed under	655
Chapter 3712. of the Revised Code.	656
(4) "Hospital" means a hospital registered with the	657
department of health under section 3701.07 of the Revised Code.	658
(5) "Owner" means each person included on the list	659
maintained under division (B)(6) of section 4729.552 of the	660
Revised Code.	661
(6)(a) "Pain management clinic" means a facility to which	662
both of the following apply:	663
(i) The majority of patients of the prescribers at the	664
facility are provided treatment for chronic pain through the use	665
of controlled substances, tramadol, or other drugs specified in	666
rules adopted under this section;	667
(ii) The facility meets any other identifying criteria	668
established in rules adopted under this section.	669
(b) "Pain management clinic" does not include any of the	670
following:	671
(i) A hospital;	672
(ii) A facility operated by a hospital for the treatment	673
of chronic pain;	674
(iii) A physician practice owned or controlled, in whole	675
or in part, by a hospital or by an entity that owns or controls,	676
in whole or in part, one or more hospitals;	677

(iv) A school, college, university, or other educational	678
institution or program to the extent that it provides	679
instruction to individuals preparing to practice as physicians,	680
podiatrists, dentists, nurses, physician assistants,	681
optometrists, or veterinarians or any affiliated facility to the	682
extent that it participates in the provision of that	683
instruction;	684
(v) A hospice care program with respect to its hospice	685
patients;	686
(vi) A hospice care program with respect to its provision	687
of palliative care in an inpatient facility or unit to patients	688
who are not hospice patients, as authorized by section 3712.10	689
of the Revised Code, but only in the case of those palliative	690
care patients who have a life-threatening illness;	691
(vii) A palliative care inpatient facility or unit that	692
does not admit hospice patients and is not otherwise excluded as	693
a pain management clinic under division (A)(6)(b) of this	694
section, but only in the case of those palliative care patients	695
who have a life-threatening illness;	696
(viii) An ambulatory surgical facility licensed under	697
section 3702.30 of the Revised Code;	698
(ix) An interdisciplinary pain rehabilitation program with	699
three-year accreditation from the commission on accreditation of	700
rehabilitation facilities;	701
(x) A nursing home licensed under section 3721.02 of the	702
Revised Code or by a political subdivision certified under	703
section 3721.09 of the Revised Code;	704
(xi) A facility conducting only clinical research that may	705
use controlled substances in studies approved by a hospital-	706

based institutional review board or an institutional review	707
board accredited by the association for the accreditation of	708
human research protection programs.	709
(7) "Physician" means an individual authorized under this	710
chapter to practice medicine and surgery or osteopathic medicine	711
and surgery.	712
(8) "Prescriber" has the same meaning as in section	713
4729.01 of the Revised Code.	714
(B) Each owner shall supervise, control, and direct the	715
activities of each individual, including an employee, volunteer,	716
or individual under contract, who provides treatment of chronic	717
pain at the pain management clinic or is associated with the	718
provision of that treatment. The supervision, control, and	719
direction shall be provided in accordance with rules adopted	720
under this section.	721
(C) The state medical board shall adopt rules in	722
accordance with Chapter 119. of the Revised Code that establish	723
all of the following:	724
(1) Standards and procedures for the operation of a pain	725
management clinic;	726
(2) Standards and procedures to be followed by a physician	727
who provides care at a pain management clinic;	728
(3) For purposes of division (A)(5)(a)(i) of this section,	729
the other drugs used to treat chronic pain that identify a	730
facility as a pain management clinic;	731
(4) For purposes of division (A)(5)(a)(ii) of this	732
section, the other criteria that identify a facility as a pain	733
management clinic;	734

(5) For purposes of division (B) of this section,	735
standards and procedures to be followed by an owner in providing	736
supervision, direction, and control of individuals at a pain	737
management clinic.	738
(D) The board may impose a fine of not more than twenty	739
thousand dollars on a physician who fails to comply with rules	740
adopted under this section. The fine may be in addition to or in	741
lieu of any other action that may be taken under section 4731.22	742
of the Revised Code. The board shall deposit any amounts	743
received under this division in accordance with section 4731.24	744
of the Revised Code.	745
(E)(1) The board may inspect either of the following as	746
the board determines necessary to ensure compliance with this	747
chapter and any rules adopted under it regarding pain management	748
clinics:	749
(a) A pain management clinic;	750
(b) A facility or physician practice that the board	751
suspects is operating as a pain management clinic in violation	752
of this chapter.	753
(2) The board's inspection shall be conducted in	754
accordance with division (F) of section 4731.22 of the Revised	755
Code.	756
(3) Before conducting an on-site inspection, the board	757
shall provide notice to the owner or other person in charge of	758
the facility or physician practice, except that the board is not	759
required to provide the notice if, in the judgment of the board,	760
the notice would jeopardize an investigation being conducted by	761
the board.	762
Sec. 4731.055. (A) As used in this section:	763

(1) "Drug database" means the database established and	764
maintained by the state board of pharmacy pursuant to section	765
4729.75 of the Revised Code.	766
(2) "Physician" means an individual authorized under this	767
chapter to practice medicine and surgery, osteopathic medicine	768
and surgery, or podiatric medicine and surgery.	769
(3) "Opioid analgesic" and "benzodiazepine" have the same	770
meanings as in section 3719.01 of the Revised Code.	771
(B) Except as provided in divisions (C) and (E) of this	772
section, a physician shall comply with all of the following as	773
conditions of prescribing a drug that is either an opioid	774
analgesic or a benzodiazepine, or personally furnishing a	775
complete or partial supply of such a drug, as part of a	776
patient's course of treatment for a particular condition:	777
(1) Before initially prescribing or furnishing the drug,	778
the physician or the physician's delegate shall request from the	779
drug database a report of information related to the patient	780
that covers at least the twelve months immediately preceding the	781
date of the request. If the physician practices primarily in a	782
county of this state that adjoins another state, the physician	783
or delegate also shall request a report of any information	784
available in the drug database that pertains to prescriptions	785
issued or drugs furnished to the patient in the state adjoining	786
that county.	787
(2) If the patient's course of treatment for the condition	788
continues for more than ninety days after the initial report is	789
requested, the physician or delegate shall make periodic	790
requests for reports of information from the drug database until	791

the course of treatment has ended. The requests shall be made at

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date the initial request was made. The request shall be made in the same manner provided in division (B)(1) of this section for	794 795 796
-	796
requesting the initial report of information from the drug	705
database.	797
(3) On receipt of a report under division (B)(1) or (2) of	798
this section, the physician shall assess the information in the	799
report. The physician shall document in the patient's record	800
that the report was received and the information was assessed.	801
(C) Division (B) of this section does not apply in any of	802
the following circumstances:	803
(1) A drug database report regarding the patient is not	804
available, in which case the physician shall document in the	805
patient's record the reason that the report is not available.	806
(2) The drug is prescribed or personally furnished in an-	807
amount indicated for a period not to exceed seven days.	808
(3)—The drug is prescribed or personally furnished for the	809
treatment of cancer or another condition associated with cancer.	810
$\frac{(4)-(3)}{(3)}$ The drug is prescribed or personally furnished to	811
a hospice patient in a hospice care program, as those terms are	812
defined in section 3712.01 of the Revised Code, or any other	813
patient diagnosed as terminally ill.	814
$\frac{(5)-(4)}{(4)}$ The drug is prescribed or personally furnished for	815
administration in a hospital, nursing home, or residential care	816
facility.	817
$\frac{(6)-(5)}{(5)}$ The drug is prescribed or personally furnished to	818
treat acute pain resulting from a surgical or other invasive	819
procedure or a delivery.	820

(D) The state medical board may adopt rules that establish	821
standards and procedures to be followed by a physician regarding	822
the review of patient information available through the drug	823
database under division (A)(5) of section 4729.80 of the Revised	824
Code. The rules shall be adopted in accordance with Chapter 119.	825
of the Revised Code.	826
(E) This section and any rules adopted under it do not	827
apply if the state board of pharmacy no longer maintains the	828
drug database.	829
Section 2. That existing sections 3719.01, 4715.302,	830
4723.481, 4723.487, 4730.42, 4730.53, 4731.052, 4731.054, and	831
4731.055 of the Revised Code are hereby repealed.	832
Section 3. That the version of section 4723.431 of the	833
Revised Code that is scheduled to take effect September 30,	834
2024, be amended to read as follows:	835
Sec. 4723.481. This section establishes standards and	836
conditions regarding the authority of an advanced practice	837
registered nurse who is designated as a clinical nurse	838
specialist, certified nurse-midwife, or certified nurse	839
practitioner to prescribe and personally furnish drugs and	840
therapeutic devices under a license issued under section 4723.42	841
of the Revised Code.	842
(A) Except as provided in division (F) of this section, a	843
clinical nurse specialist, certified nurse-midwife, or certified	844
nurse practitioner shall not prescribe or furnish any drug or	845
therapeutic device that is listed on the exclusionary formulary	846
established in rules adopted under section 4723.50 of the	847
Revised Code.	848
(B) The prescriptive authority of a clinical nurse	849

specialist, certified nurse-midwife, or certified nurse	850
practitioner shall not exceed the prescriptive authority of the	851
collaborating physician or podiatrist, including the	852
collaborating physician's authority to treat chronic pain with	853
controlled substances and products containing tramadol—as	854
described in section 4731.052 of the Revised Code.	855
(C)(1) Except as provided in division (C)(2) or (3) of	856
this section, a clinical nurse specialist, certified nurse-	857
midwife, or certified nurse practitioner may prescribe to a	858
patient a schedule II controlled substance only if all of the	859
following are the case:	860
(a) The patient has a terminal condition, as defined in	861
section 2133.01 of the Revised Code.	862
(b) A physician initially prescribed the substance for the	863
patient.	864
(c) The prescription is for an amount that does not exceed	865
the amount necessary for the patient's use in a single, seventy-	866
two-hour period.	867
(2) The restrictions on prescriptive authority in division	868
(C)(1) of this section do not apply if a clinical nurse	869
specialist, certified nurse-midwife, or certified nurse	870
practitioner issues the prescription to the patient from any of	871
the following locations:	872
(a) A hospital as defined in section 3722.01 of the	873
Revised Code;	874
(b) An entity owned or controlled, in whole or in part, by	875
a hospital or by an entity that owns or controls, in whole or in	876
part, one or more hospitals:	877

(c) A health care facility operated by the department of	878
mental health and addiction services or the department of	879
developmental disabilities;	880
(d) A nursing home licensed under section 3721.02 of the	881
Revised Code or by a political subdivision certified under	882
section 3721.09 of the Revised Code;	883
decisin dizi. da die nevisea deae,	000
(e) A county home or district home operated under Chapter	884
5155. of the Revised Code that is certified under the medicare	885
or medicaid program;	886
(f) A hospice care program, as defined in section 3712.01	887
of the Revised Code;	888
	0.00
(g) A community mental health services provider, as	889
defined in section 5122.01 of the Revised Code;	890
(h) An ambulatory surgical facility, as defined in section	891
3702.30 of the Revised Code;	892
(i) A freestanding birthing center, as defined in section	893
3701.503 of the Revised Code;	894
	0.05
(j) A federally qualified health center, as defined in	895
section 3701.047 of the Revised Code;	896
(k) A federally qualified health center look-alike, as	897
defined in section 3701.047 of the Revised Code;	898
(1) A health care office or facility operated by the board	899
of health of a city or general health district or the authority	900
having the duties of a board of health under section 3709.05 of	901
the Revised Code;	902
(m) A site where a medical practice is operated, but only	903
if the practice is comprised of one or more physicians who also	904
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are owners of the practice; the practice is organized to provide	905
direct patient care; and the clinical nurse specialist,	906
certified nurse-midwife, or certified nurse practitioner	907
providing services at the site has a standard care arrangement	
and collaborates with at least one of the physician owners who	909
practices primarily at that site;	910
(n) A residential care facility, as defined in section	911
3721.01 of the Revised Code.	912
(3) A clinical nurse specialist, certified nurse-midwife,	913
or certified nurse practitioner shall not issue to a patient a	914
prescription for a schedule II controlled substance from a	915
convenience care clinic even if the clinic is owned or operated	916
by an entity specified in division (C)(2) of this section.	917
(D) A pharmacist who acts in good faith reliance on a	918
prescription issued by a clinical nurse specialist, certified	919
nurse-midwife, or certified nurse practitioner under division	920
(C)(2) of this section is not liable for or subject to any of	921
the following for relying on the prescription: damages in any	922
civil action, prosecution in any criminal proceeding, or	923
professional disciplinary action by the state board of pharmacy	924
under Chapter 4729. of the Revised Code.	925
(E) A clinical nurse specialist, certified nurse-midwife,	926
or certified nurse practitioner shall comply with section	927
3719.061 of the Revised Code if the nurse prescribes for a	928
minor, as defined in that section, an opioid analgesic, as	929
defined in section 3719.01 of the Revised Code.	930
(F) Until the board of nursing establishes a new formulary	931
in rules adopted under section 4723.50 of the Revised Code, a	932

clinical nurse specialist, certified nurse-midwife, or certified

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nurse practitioner who prescribes or furnishes any drug or	934
therapeutic device shall do so in accordance with the formulary	935
established by the board prior to April 6, 2017.	936
Section 4. That the existing version of section 4723.431	937
of the Revised Code that is scheduled to take effect September	938
30, 2024, is hereby repealed.	939
Section 5. Sections 3 and 4 of this act take effect	940
September 30, 2024.	941
Section 6. TRANSFER FROM MEDICAL MARIJUANA CONTROL PROGRAM	942
FUND TO DRUG DATABASE FUND	943
On July 1, 2022, or as soon as possible thereafter, the	944
Director of Commerce and the Executive Director of the Board of	945
Pharmacy shall consult with the Director of Budget and	946
Management to determine the amount of money sufficient for	
maintaining and administering drug database operations and	
initiatives aimed at reducing the diversion of dangerous drugs.	949
After that determination, the Director of Budget and Management	950
shall transfer the determined amount in cash from the Medical	951
Marijuana Control Program Fund (Fund 5YS0) to the Drug Database	952
Fund (Fund 5SG0).	953
Section 7. Section 4730.53 of the Revised Code is	954
presented in this act as a composite of the section as amended	955
by S.B. 110 of the 131st General Assembly and H.B. 394 and S.B.	956
276, both of the 130th General Assembly. The General Assembly,	957
applying the principle stated in division (B) of section 1.52 of	958
the Revised Code that amendments are to be harmonized if	959
reasonably capable of simultaneous operation, finds that the	960
composite is the resulting version of the section in effect	961
prior to the effective date of the section as presented in this	962

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