As Introduced

135th General Assembly Regular Session 2023-2024

S. B. No. 105

Senators Johnson, Sykes Cosponsors: Senators Hoagland, Craig, Ingram

A BILL

То	amend sections 340.01, 340.02, 340.022, 340.03,	1
	340.032, 340.033, 340.034, 340.035, 340.036,	2
	340.04, 340.30, 5119.01, 5119.36, 5119.363,	3
	5119.48, 5119.61, 5119.90, 5119.99, and 5160.45;	4
	to enact sections 5119.39, 5119.391, 5119.392,	5
	5119.393, 5119.394, 5119.395, 5119.396, and	6
	5119.397; and to repeal sections 340.20 and	7
	3720.041 of the Revised Code regarding the	8
	composition of boards of alcohol, drug	9
	addiction, and mental health services; the	10
	authority of the boards; and the requirements	11
	for operation of recovery housing residences	12

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

Section 1. That sections 340.01, 340.02, 340.022, 340.03,	13
340.032, 340.033, 340.034, 340.035, 340.036, 340.04, 340.30,	14
5119.01, 5119.36, 5119.363, 5119.48, 5119.61, 5119.90, 5119.99,	15
and 5160.45 be amended and sections 5119.39, 5119.391, 5119.392,	16
5119.393, 5119.394, 5119.395, 5119.396, and 5119.397 of the	17
Revised Code be enacted to read as follows:	18

Sec. 340.01. (A) As used in this chapter:	19
(1) "Addiction," "addiction services," "alcohol and drug	20
addiction services," "alcoholism," "alcohol use disorder,"	21
"certifiable services and supports," "community addiction	22
services provider," "community mental health services provider,"	23
"drug addiction," "gambling addiction services," "included	24
opioid and co-occurring drug addiction services and recovery	25
supports," "mental health services," "mental illness," "recovery	26
<pre>housing residence," and "recovery supports" have the same</pre>	27
meanings as in section 5119.01 of the Revised Code.	28
(2) "Medication-assisted treatment" means alcohol and drug	29
addiction services that are accompanied by medication approved	30
by the United States food and drug administration for the	31
treatment of alcoholism alcohol use disorder or drug addiction,	32
prevention of relapse-of alcoholism or drug addiction, or both.	33
(3) "Recovery housing" means housing for individuals	34
recovering from alcoholism or drug addiction that provides an-	35
alcohol and drug-free living environment, peer support,	36
assistance with obtaining alcohol and drug addiction services,	37
and other alcoholism and drug addiction recovery assistance.	38
(B) An alcohol, drug addiction, and mental health service	39
district shall be established in any county or combination of	40
counties having a population of at least fifty thousand. With	41
the approval of the director of mental health and addiction	42
services, any county or combination of counties having a	43
population of less than fifty thousand may establish such a	44
district. Districts comprising more than one county shall be	45
known as joint-county districts.	46
The board of county commissioners of any county	47

participating in a joint-county district may submit a resolution	48
requesting withdrawal from the district together with a	49
comprehensive plan or plans that are in compliance with rules	50
adopted by the director of mental health and addiction services	51
under section 5119.22 of the Revised Code , and that provide for	52
the equitable adjustment and division of all services, assets,	53
property, debts, and obligations, if any, of the joint county	54
district to the board of alcohol, drug addiction, and mental	55
health services, to the boards of county commissioners of each	56
county in the district, and to the director. The plan or plans	57
shall include all of the following: proposed bylaws for the	58
operation of the newly established district; a list of potential	59
board members; a list of the behavioral health services	60
available in the newly established district, including	61
inpatient, outpatient, prevention, and housing services;	62
equitable adjustment and division of all services, assets,	63
property, debts, and obligations of the former joint-county	64
district; a plan ensuring no disruption in behavioral health	65
services in the newly established district; and provision for	66
the employment of an executive director of the newly established	67
district.	68
The director shall approve the plan not later than one	69
year after the date the resolution was adopted by the board of	70
county commissioners. No county participating in a joint-county	71
service—district may withdraw from the district without the	72
consent of the director of mental health and addiction services	73
nor earlier than one year after the submission of such	74
resolution unless all of the participating counties agree to an	75
earlier withdrawal. Any	76
Any county withdrawing from a joint-county district chall	77
Any county withdrawing from a joint-county district shall	77

continue to have levied against its tax list and duplicate any

tax levied by the district during the period in which the county	79
was a member of the district until such time as the levy expires	80
or is renewed or replaced.	81
(C) For any too look of the	0.0
(C) For any tax levied under section 5705.19 of the	82
Revised Code by a board of a joint-county district formed on or	83
after the effective date of this amendment April 3, 2023,	84
revenue from the tax shall only be expended for the benefit of	85
the residents of the county from which the revenue is derived.	86
For the purpose of this division, a joint-county district is not	87
formed by virtue of a county joining or withdrawing from a	88
district or if a joint-county service district merges with	89
another joint-county district.	90
Sec. 340.02. (A) For each alcohol, drug addiction, and	91
mental health service district, there shall be appointed a board	92
of alcohol, drug addiction, and mental health services	93
consisting. As provided in this section, the board shall consist	94
of eighteen members—or, fifteen members, fourteenmembers,	95
twelve members, or nine members. Should the board of alcohol,	96
drug addiction, and mental health services elect to remain at	97
eighteen members, as provided under section 340.02 of the-	98
Revised Code as it existed immediately prior to the date of this-	99
amendment, the board of alcohol, drug addiction, and mental	100
health services and the board of county commissioners shall not-	101
be required to take any action. Should the board of alcohol,	102
drug addiction, and mental health services elect a-	103
recommendation to become a fourteen-member board, that-	104
recommendation must be approved by the board of county-	105
commissioners of the county in which the alcohol, drug	106
addiction, and mental health district is located in order for	107
the transition to a fourteen-member board to occur. Not later-	108

than September 30, 2013, each board of alcohol, drug addiction,

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and mental health services wishing to become a fourteen member	110
board shall notify the board of county commissioners of that	111
recommendation. Failure of the board of county commissioners to	112
take action within thirty days after receipt of the	113
recommendation shall be deemed agreement by the board of county	114
commissioners to transition to a fourteen member board of	115
alcohol, drug addiction, and mental health services. Should the	116
board of county commissioners reject the recommendation, the	117
board of county commissioners shall adopt a resolution stating	118
that rejection within thirty days after receipt of the	119
recommendation. Upon adoption of the resolution, the board of	120
county commissioners shall meet with the board of alcohol, drug-	121
addiction, and mental health services to discuss the matter.	122
After the meeting, the board of county commissioners shall-	123
notify the department of mental health and addiction services of	124
its election not later than January 1, 2014. In a joint county-	125
district, a majority of the boards of county commissioners must-	126
not reject the recommendation of a joint-county board to become	127
a fourteen-member board in order for the transition to a-	128
fourteen-member board to occur. Should the joint-county district	129
have an even number of counties, and the boards of county-	130
commissioners of these counties tie in terms of whether or not-	131
to accept the recommendation of the alcohol, drug addiction, and	132
mental health services board, the recommendation of the alcohol,	133
drug addiction, and mental health service board to become a	134
fourteen-member board shall prevail. The election shall be	135
final. Failure to provide notice of its election to the	136
department on or before January 1, 2014, shall constitute an	137
election to continue to operate as an eighteen-member board,	138
which election shall also be final. If an existing board	139
provides timely notice of its election to transition to operate	140
as a fourteen-member board, the number of board members may	141

decline from eighteen to fourteen by attrition as current-	142
members' terms expire. However, the composition of the board	143
must reflect the requirements set forth in this section for-	144
fourteen-member boards. For all boards, half of the members-	145
shall be interested in mental health services and half of the	146
members shall be interested in alcohol, drug, or gambling-	147
addiction services.	148
In a single-county district, the size of the board shall	149
be determined by the board of county commissioners representing	150
the county that constitutes the district. In a joint-county	151
district, the size of the board shall be determined jointly by	152
all of the boards of county commissioners representing the	153
counties that constitute the district.	154
The determination of board size shall be made by selecting	155
one of the options described in division (B) of this section.	156
After an option is selected and implemented, a subsequent	157
determination of board size may be made, except that subsequent	158
determinations shall not occur more frequently than once every	159
four calendar years.	160
If a selected option would result in a change in board	161
size, before the option may be implemented the board of county	162
commissioners or boards of county commissioners, as the case may	163
be, shall send a representative to a meeting of the board of	164
alcohol, drug addiction, and mental health services to solicit	165
feedback about the matter. After considering any feedback	166
received, the board or boards of county commissioners may	167
proceed with implementing the change in board size. If the	168
change results in a reduction of board members, the reduction	169
shall be implemented by not filling vacancies as they occur.	170
To implement a selected option that would result in the	171

establishment of a new board of alcohol, drug addiction, and	172
mental health services or in a change in size of an existing	173
board, the board or boards of county commissioners, as the case	174
may be, shall adopt a resolution specifying the board size that	175
has been selected. The board or boards of county commissioners	176
also shall notify the department of mental health and addiction	177
services of the board size that has been selected.	178
(B) (1) In the case of a board of alcohol, drug addiction,	179
and mental health services that is established on or after the	180
effective date of this amendment, any of the following options	181
may be selected for purposes of division (A) of this section:	182
(a) To establish the board as an eighteen-member board;	183
(b) To establish the board as a fifteen-member board;	184
(c) To establish the board as a fourteen-member board;	185
(d) To establish the board as a twelve-member board;	186
(e) To establish the board as a nine-member board;	187
(f) To change the board's size after it has been	188
established by selecting a number of members that is eighteen,	189
fifteen, fourteen, twelve, or nine, as the case may be.	190
(2) In the case of a board of alcohol, drug addiction, and	191
mental health services that existed immediately prior to the	192
effective date of this amendment, either of the following	193
options may be selected for purposes of division (A) of this	194
section:	195
(a) To continue the board's operation as an eighteen-	196
member or fourteen-member board, as a board of that size was	197
authorized prior to the effective date of this amendment, in	198
which case no further action is required;	199

(b) To change the board's size by selecting a number of	200
members that is eighteen, fifteen, fourteen, twelve, or nine as	201
the case may be.	202
(C) All members shall be residents of the service	203
district. The membership shall, as nearly as possible, reflect	204
the composition of the population of the service district as to	205
race and sex.	206
(B) For boards operating as eighteen member boards, the	207
The director of mental health and addiction services shall	208
appoint <u>eight</u> <u>one-third of the</u> members of the board and the	209
board of county commissioners shall appoint ten-two-thirds of	210
the members. For boards operating as fourteen-member boards, the	211
director of mental health and addiction services shall appoint	212
six members of the board and the board of county commissioners	213
shall appoint eight members. In a joint-county district, the	214
board of county commissioners of each participating county shall	215
appoint members in as nearly as possible the same proportion as	216
that county's population bears to the total population of the	217
district, except that at least one member shall be appointed	218
from each participating county.	219
(C) The director of mental health and addiction services	220
shall ensure that at least one member of the board is a	221
clinician with experience in the delivery of mental health	222
services, at least one member of the board is <u>In making</u>	223
appointments to the board, the appointing authorities shall	224
ensure that at least one-half of the board's membership, at all	225
times, consists of persons who are qualified to serve by virtue	226
of being any of the following: a person who has received or is	227
receiving mental health services, at least one member of the	228
board or who is a parent or other relative of such a person, at-	229

least one member of the board is a clinician with experience in	230
the delivery of addiction services, at least one member of the-	231
board is <u>or</u> a person who has received or is receiving addiction	232
services , and at least one member of the board <u>or who</u> is a	233
parent or other relative of such a person.—A single member who	234
meets both qualifications may fulfill the requirement fora-	235
clinician with experience in the delivery of mental health	236
services anda clinician with experience in the delivery of	237
addiction services.	238

(D) No member or employee of a board of alcohol, drug 239 addiction, and mental health services shall serve as a member of 240 the board of any provider with which the board of alcohol, drug 241 addiction, and mental health services has entered into a 242 contract for the provision of services or facilities. No member 243 of a board of alcohol, drug addiction, and mental health 244 services shall be an employee of any provider with which the 245 board has entered into a contract for the provision of services 246 or facilities. No person shall be an employee of a board and 247 such a provider unless the board and provider both agree in 248 writing. 249

(E) No person shall serve as a member of the board of 250 alcohol, drug addiction, and mental health services whose 251 spouse, child, parent, brother, sister, grandchild, stepparent, 252 stepchild, stepbrother, stepsister, father-in-law, mother-in-253 law, son-in-law, daughter-in-law, brother-in-law, or sister-in-254 law serves as a member of the board of any provider with which 255 the board of alcohol, drug addiction, and mental health services 256 has entered into a contract for the provision of services or 257 facilities. No person shall serve as a member or employee of the 258 board whose spouse, child, parent, brother, sister, stepparent, 259 stepchild, stepbrother, stepsister, father-in-law, mother-in-260

law, son-in-law, daughter-in-law, brother-in-law, or sister-in-	261
law serves as a county commissioner of a county or counties in	262
the alcohol, drug addiction, and mental health service district.	263
(F) Each year each board member shall attend at least one	264
inservice training session provided or approved by the	265
department of mental health and addiction services.	266
(G) For boards operating as eighteen-member boards, each-	267
Each_member shall be appointed for a term of four years,	268
commencing the first day of July, except that one third of	269
initial appointments to a newly established board, and to the	270
extent possible to expanded boards, shall be for terms of two-	271
years, one-third of initial appointments shall be for terms of-	272
three years, and one-third of initial appointments shall be for-	273
terms of four years. For boards operating as fourteen-member	274
boards, each member shall be appointed for a term of four years,	275
commencing the first day of July, except that four of the	276
initial appointments to a newly established board, and to the	277
extent possible to expanded boards, shall be for terms of two-	278
years, five initial appointments shall be for terms of three-	279
years, and five initial appointments shall be for terms of four-	280
years. No when a board is established on or after the effective	281
date of this amendment, the initial appointments shall be	282
staggered among the members as equally as possible with terms of	283
two years, three years, and four years.	284
No member shall serve more than two consecutive four-year	285
terms under the same appointing authority. A member may serve	286
for three consecutive terms under the same appointing authority	287
only if one of the terms is for less than two years. A member	288
who has served two consecutive four-year terms or three	289
consecutive terms totaling less than ten years is eligible for	290

reappointment by the same appointing authority one year	291
following the end of the second or third term, respectively.	292
When a vacancy occurs, appointment for the expired or	293
unexpired term shall be made in the same manner as an original	294
appointment. The board shall notify the appointing authority	295
either by certified mail or, if the board has record of an	296
internet identifier of record associated with the authority, by	297
ordinary mail and by that internet identifier of record of any	298
vacancy and shall fill the vacancy within sixty days following	299
that notice. As used in this paragraph, "internet identifier of	300
record" has the same meaning as in section 9.312 of the Revised	301
Code.	302
Any member of the board may be removed from office by the	303
appointing authority for neglect of duty, misconduct, or	304
malfeasance in office, and shall be removed by the appointing	305
authority if the member is barred by this section from serving-	306
as a board member at will. The Before a member may be removed at	307
will, the member shall be informed in writing of the charges	308
proposed removal and afforded an opportunity for a public	309
hearing. Upon the absence of a member within one year from	310
either four board meetings or from two board meetings without	311
prior notice, the board shall notify the appointing authority,	312
which may vacate the appointment and appoint another person to	313
complete the member's term.	314
Members of the board shall serve without compensation, but	315
shall be reimbursed for actual and necessary expenses incurred	316
in the performance of their official duties, as defined by rules	317
of the department of mental health and addiction services.	318
(H) As used in this section, "internet identifier of	319
record" has the same meaning as in section 9.312 of the Revised	320

Code.	321
Sec. 340.022. (A) if Notwithstanding the procedures	322
established by section 340.02 of the Revised Code for	323
determining the size of a board of alcohol, drug addiction, and	324
mental health services, the size of a board shall be determined	325
in accordance with this section in both of the following	326
<pre>circumstances:</pre>	327
(A)(1) If the director of mental health and addiction	328
services during the period beginning January 1, 2021, and ending	329
December 31, 2022, grants approval to a board of county	330
commissioners of a county with a population of at least seventy	331
thousand but not more than eighty thousand, according to data	332
from the 2010 federal census, to withdraw from a joint-county	333
alcohol, drug addiction, and mental health service district	334
pursuant to section 340.01 of the Revised Code, The the size of	335
the board shall be determined by the board of county	336
commissioners representing the county that constitutes the	337
<pre>single-county_alcohol, drug addiction, and mental health service</pre>	338
district created as a result of the withdrawal. The	339
determination shall be made from among the options that may be	340
selected under division $\frac{(B)-(A)(2)}{(B)}$ of this section. Once an	341
option is selected, the board of county commissioners shall	342
adopt a resolution specifying the selection that has been made	343
and shall notify the department of mental health and addiction	344
services. After the resolution is adopted and the department is	345
notified, the determination of size is final.	346
$\frac{(B)(1)}{(2)}$ In the case of a board of alcohol, drug	347
addiction, and mental health services that is established on or	348
after the date the director grants the approval to withdraw	349
described in division (A) (A) (1) of this section, any either of	350

the following options may be selected by the board of county	351
commissioners when making the determination required under that	352
division:	353
(a) To establish the board as an eighteen-member board;	354
(b) To establish the board as a fourteen-member board.	355
(C) (3) When a board is established on or after the	356
effective date of this section—September 30, 2021, the initial	357
appointments shall be staggered among the members as equally as	358
possible with terms of two years, three years, and four years.	359
(D) (1) Notwithstanding the membership requirements of	360
section 340.02 of the Revised Code, if (B)(1) If a county with a	361
population of at least thirty-five thousand but not more than	362
forty-five thousand, according to data from the 2010 federal	363
census, joins an existing alcohol, drug addiction, and mental	364
health service district during the period beginning on June 30,	365
2021, and ending June 30, 2023, the existing board of alcohol,	366
drug addiction, and mental health services serving that district	367
may elect to expand its membership to eighteen members if the	368
existing board has fourteen members.	369
(2) The option to expand the board, as provided in	370
division $\frac{(D)(1)}{(B)(1)}$ of this section, is available only during	371
the twelve-month period beginning on the date the county with a	372
population of at least thirty-five thousand but not more than	373
forty-five thousand joins the alcohol, drug addiction, and	374
mental health service district served by the board. The	375
additional members shall be appointed in the manner specified in	376
section 340.02 of the Revised Code.	377
Sec. 340.03. (A) Subject to rules issued by the director	378
of montal hoalth and addiction convices after consultation with	370

relevant constituencies as required by division (A)(10) of	380
section 5119.21 of the Revised Code, each board of alcohol, drug	381
addiction, and mental health services shall:	382
(1) Serve as the community addiction and mental health	383
planning agency for the county or counties under its	384
jurisdiction, and in so doing it shall:	385
(a) Evaluate the need for facility services, addiction	386
services, mental health services, and recovery supports;	387
(b) In cooperation with other local and regional planning	388
and funding bodies and with relevant ethnic organizations,	389
evaluate strengths and challenges and set priorities for	390
addiction services, mental health services, and recovery	391
supports. A board shall include treatment and prevention	392
services when setting priorities for addiction services and	393
mental health services. When a board sets priorities for	394
addiction services, the board shall consult with the county	395
commissioners of the counties in the board's service district	396
regarding the services described in section 340.15 of the	397
Revised Code and shall give priority to those services, except	398
that those services shall not have a priority over services	399
provided to pregnant women under programs developed in relation	400
to the mandate established in section 5119.17 of the Revised	401
Code.	402
(c) In accordance with guidelines issued by the director	403
of mental health and addiction services under division (F) of	404
section 5119.22 of the Revised Code, annually develop and submit	405
to the department of mental health and addiction services a	406
community addiction and mental health plan that addresses both	407
of the following:	408

(i) The needs of all residents of the <u>service</u> district	409
currently receiving inpatient services in state-operated	410
hospitals, the needs of other populations as required by state	411
or federal law or programs, and the needs of all children	412
subject to a determination made pursuant to section 121.38 of	413
the Revised Code;	414
(ii) The department's priorities for facility services,	415
addiction services, mental health services, and recovery	416
supports during the period for which the plan will be in effect.	417
The department shall inform all of the boards of the	418
department's priorities in a timely manner that enables the	419
boards to know the department's priorities before the boards	420
develop and submit the plans.	421
In alcohol, drug addiction, and mental health service	422
districts that have separate alcohol and drug addiction services	423
and community mental health boards, the alcohol and drug	424
addiction services board shall submit a community addiction plan	425
and the community mental health board shall submit a community	426
mental health plan. Each board shall consult with its	427
counterpart in developing its plan and address the interaction	428
between the local addiction and mental health systems and	429
populations with regard to needs and priorities in developing	430
its plan.	431
The department shall approve or disapprove the plan, in	432
whole or in part, in accordance with division (G) of section	433
5119.22 of the Revised Code. Eligibility for state and federal	434
funding shall be contingent upon an approved plan or relevant	435
part of a plan.	436
If a board determines that it is necessary to amend an	437

approved plan, the board shall submit a proposed amendment to

the director. The director shall approve or disapprove all or	439
part of the amendment in accordance with division (H) of section	440
5119.22 of the Revised Code.	441
The board shall operate in accordance with the plan	442
approved by the department.	443
(d) Promote, arrange, and implement working agreements	444
with social <u>service</u> agencies, both public and private, and	445
including other government programs that provide public	446
benefits, in which case the agreements shall be for the	447
following purposes: to coordinate public benefits and to improve	448
the management and administration of the government programs;	449
(e) Promote, arrange, and implement working agreements	450
with judicial agencies.	451
(2) Investigate, or request another agency to investigate,	452
any complaint alleging abuse or neglect of any person receiving	453
addiction services, mental health services, or recovery supports	454
from a community addiction services provider or community mental	455
health services provider or alleging abuse or neglect of a	456
resident receiving addiction services or with mental illness or	457
severe mental disability residing in a residential facility	458
licensed under section 5119.34 of the Revised Code. If the	459
investigation substantiates the charge of abuse or neglect, the	460
board shall take whatever action it determines is necessary to	461
correct the situation, including notification of the appropriate	462
authorities. Upon request, the board shall provide information	463
about such investigations to the department.	464
(3) For the purpose of section 5119.36 of the Revised	465
Code, cooperate with the director of mental health and addiction	466
services in visiting and evaluating whether the certifiable	467

services and supports of a community addiction services provider	468
or community mental health services provider satisfy the	469
certification standards established by rules adopted under that	470
section+. In addition, a board shall provide input and	471
recommendations to the department when an application for	472
certification or the renewal of a certification has been	473
submitted by a provider or when a provider is being investigated	474
by the department, if the board, in either of those	475
circumstances, is aware of information that would be beneficial_	476
to the department's consideration of the matter.	477
(4) In accordance with criteria established under division	478
(D) of section 5119.22 of the Revised Code, conduct program	479
audits that review and evaluate the quality, effectiveness, and	480
efficiency of addiction services, mental health services, and	481
recovery supports provided by community addiction services	482
providers and community mental health services providers under	483
contract with the board and submit the board's findings and	484
recommendations to the department of mental health and addiction	485
services;	486
(5) In accordance with section 5119.34 of the Revised	487
Code, review an application for a residential facility license	488
and provide to the department of mental health and addiction	489
services any information about the applicant or facility that	490
the board would like the department to consider in reviewing the	491
application;	492
(6) Audit, in accordance with rules adopted by the auditor	493
of state pursuant to section 117.20 of the Revised Code, at	494
least annually all programs, addiction services, mental health	495
services, and recovery supports provided under contract with the	496
board. In so doing, the board may contract for or employ the	497

services of private auditors. A copy of the fiscal audit report	498
shall be provided to the director of mental health and addiction	499
services, the auditor of state, and the county auditor of each	500
county in the board's district.	501
(7) Recruit and promote local financial support for	502
addiction services, mental health services, and recovery	503
supports from private and public sources;	504
(8) In accordance with guidelines issued by the department	505
as necessary to comply with state and federal laws pertaining to	506
financial assistance, approve fee schedules and related charges	507
or adopt a unit cost schedule or other methods of payment for	508
addiction services, mental health services, and recovery	509
supports provided by community addiction services providers and	510
community mental health services providers that have contracted	511
with the board under section 340.036 of the Revised Code;	512
(9) Submit to the director and the county commissioners of	513
the county or counties served by the board, and make available	514
to the public, an annual report of the addiction services,	515
mental health services, and recovery supports under the	516
jurisdiction of the board, including a fiscal accounting;	517
(10) Establish a method for evaluating referrals for	518
court-ordered treatment and affidavits filed pursuant to section	519
5122.11 of the Revised Code in order to assist the probate	520
division of the court of common pleas in determining whether	521
there is probable cause that a respondent is subject to court-	522
ordered treatment and whether alternatives to hospitalization	523
are available and appropriate;	524
(11) Designate the treatment services, provider, facility,	525
or other placement for each person involuntarily committed to	526

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the board pursuant to Chapter 5122. of the Revised Code. The	527
board shall provide the least restrictive and most appropriate	528
alternative that is available for any person involuntarily	529
committed to it and shall assure that the list of addiction	530
services, mental health services, and recovery supports	531
submitted and approved in accordance with division (B) of	532
section 340.08 of the Revised Code are available to persons with	533
severe mental disabilities residing within its service district.	534
The board shall establish the procedure for authorizing payment	535
for the services and supports, which may include prior	536
authorization in appropriate circumstances. In accordance with	537
section 340.037 of the Revised Code, the board may provide	538
addiction services and mental health services directly to a	539
person with a severe mental disability when life or safety is	540
endangered and when no community addiction services provider or	541
community mental health services provider is available to	542
provide the service.	543

- (12) Ensure that housing built, subsidized, renovated, 544 rented, owned, or leased by the board or a community addiction 545 services provider or community mental health services provider 546 has been approved as meeting minimum fire safety standards and 547 that persons residing in the housing have access to appropriate 548 and necessary services, including culturally relevant services, 549 from a community addiction services provider or community mental 550 health services provider. This division does not apply to 551 residential facilities licensed pursuant to section 5119.34 of 552 the Revised Code. 553
- (13) Establish a mechanism for obtaining advice and 554 involvement of persons receiving addiction services, mental 555 health services, or recovery supports on matters pertaining to 556 services and supports in the alcohol, drug addiction, and mental 557

health service district; 558 (14) Perform the duties required by rules adopted under 559 section 5119.22 of the Revised Code regarding referrals by the 560 board or community mental health services providers under 561 contract with the board of individuals with mental illness or 562 severe mental disability to class two residential facilities 563 licensed under section 5119.34 of the Revised Code and effective 564 arrangements for ongoing mental health services for the 565 individuals. The board is accountable in the manner specified in 566 the rules for ensuring that the ongoing mental health services 567 are effectively arranged for the individuals. 568 (B) Each board of alcohol, drug addiction, and mental 569 health services shall establish such rules, operating 570 procedures, standards, and bylaws, and perform such other duties 571 as may be necessary or proper to carry out the purposes of this 572 chapter. 573 (C) A board of alcohol, drug addiction, and mental health 574 services may receive by gift, grant, devise, or bequest any 575 moneys, lands, or property for the benefit of the purposes for 576 which the board is established, and may hold and apply it 577 according to the terms of the gift, grant, or beguest. All money 578 received, including accrued interest, by gift, grant, or bequest 579 shall be deposited in the treasury of the county, the treasurer 580 of which is custodian of the alcohol, drug addiction, and mental 581 health services funds to the credit of the board and shall be 582 available for use by the board for purposes stated by the donor 583 or grantor. 584 (D) No member or employee of a board of alcohol, drug 585 addiction, and mental health services shall be liable for injury 586

or damages caused by any action or inaction taken within the

scope of the member's official duties or the employee's	588
employment, whether or not such action or inaction is expressly	589
authorized by this section or any other section of the Revised	590
Code, unless such action or inaction constitutes willful or	591
wanton misconduct. Chapter 2744. of the Revised Code applies to	592
any action or inaction by a member or employee of a board taken	593
within the scope of the member's official duties or employee's	594
employment. For the purposes of this division, the conduct of a	595
member or employee shall not be considered willful or wanton	596
misconduct if the member or employee acted in good faith and in	597
a manner that the member or employee reasonably believed was in	598
or was not opposed to the best interests of the board and, with	599
respect to any criminal action or proceeding, had no reasonable	600
cause to believe the conduct was unlawful.	601
(E) The meetings held by any committee established by a	602
board of alcohol, drug addiction, and mental health services	603
shall be considered to be meetings of a public body subject to	604
section 121.22 of the Revised Code.	605
(F)(1) A board of alcohol, drug addiction, and mental	606
health services may establish a rule, operating procedure,	607
standard, or bylaw to allow the executive director of the board	608
to execute both of the following types of contracts valued at	609
twenty-five thousand dollars or less, as determined by the	610
board, on behalf of the board without the board's prior	611
approval:	612
(a) Emergency contracts for clinical services or recovery	613
support services;	614

(b) Standard service contracts pertaining to the board's

operations.

615

(2) If a board establishes a rule, operating procedure,	617
standard, or bylaw under division (F)(1) of this section, both	618
of the following shall be the case:	619
(a) The board shall define the scope of contracts	620
described in divisions (F)(1)(a) and (b) of this section in that	621
rule, operating procedure, standard, or bylaw.	622
(b) The board shall disclose the existence of a contract	623
executed pursuant to the rule, operating procedure, standard, or	624
bylaw at the first board meeting that occurs after the contract	625
was executed and ensure that a record of that disclosure is	626
included in the written minutes of that meeting.	627
Sec. 340.032. Subject to rules adopted by the director of	628
mental health and addiction services after consultation with	629
relevant constituencies as required by division (A)(10) of	630
section 5119.21 of the Revised Code, each board of alcohol, drug	631
addiction, and mental health services shall do all of the	632
following:	633
(A) Establish, to the extent resources are available, a	634
community-based continuum of care that includes all of the	635
following as essential elements:	636
(1) Prevention and wellness management services;	637
(2) At least both of the following outreach and engagement	638
activities:	639
(a) Locating persons in need of addiction services and	640
persons in need of mental health services to inform them of	641
available addiction services, mental health services, and	642
recovery supports;	643
(b) Helping persons who receive addiction services and	644

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persons who receive mental health services obtain services	645
necessary to meet basic human needs for food, clothing, shelter,	646
medical care, personal safety, and income.	647
(3) Assessment services;	648
(4) Care coordination;	649
(5) Residential services;	650
(6) At least the following outpatient services:	651
(a) Nonintensive;	652
(b) Intensive, such as partial hospitalization and	653
assertive community treatment;	654
(c) Withdrawal management;	655
(d) Emergency and crisis.	656
(7) Where appropriate, at least the following inpatient	657
services:	658
(a) Psychiatric care;	659
(b) Medically managed alcohol or drug treatment.	660
(8) At least all of the following recovery supports:	661
(a) Peer support;	662
(b) A wide range of housing and support services,	663
including recovery housing residences;	664
(c) Employment, vocational, and educational opportunities;	665
(d) Assistance with social, personal, and living skills;	666
(e) Multiple paths to recovery such as twelve-step	667
approaches and parent advocacy connection;	668

(f) Support, assistance, consultation, and education for	669
families, friends, and persons receiving addiction services,	670
mental health services, and recovery supports.	671
(9) In accordance with section 340.033 of the Revised	672
Code, an array of addiction services and recovery supports for	673
all levels of opioid and co-occurring drug addiction;	674
(10) Any additional elements the department of mental	675
health and addiction services, pursuant to section 5119.21 of	676
the Revised Code, determines are necessary to establish the	677
community-based continuum of care.	678
(B) Ensure that the rights of persons receiving any	679
elements of the community-based continuum of care are protected;	680
(C) Ensure that persons receiving any elements of the	681
community-based continuum of care are able to utilize grievance	682
procedures applicable to the elements.	683
sec. 340.033. The array of addiction services and recovery	683
Sec. 340.033. The array of addiction services and recovery	684
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug	684 685
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be	684 685 686
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established	684 685 686 687
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and sub-	684 685 686 687 688
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient	684 685 686 687 688
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support,	684 685 686 687 688 689
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support, residential services, recovery housing residences pursuant to	684 685 686 687 688 689 690
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support, residential services, recovery housing residences pursuant to section 340.034 of the Revised Code, and multiple paths to	684 685 686 687 688 689 690 691
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support, residential services, recovery housing residences pursuant to section 340.034 of the Revised Code, and multiple paths to recovery such as twelve-step approaches. The services and	684 685 686 687 688 689 690 691 692 693
Sec. 340.033. The array of addiction services and recovery supports for all levels of opioid and co-occurring drug addiction required by section 340.032 of the Revised Code to be included in a community-based continuum of care established under that section shall include at least ambulatory and subacute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support, residential services, recovery housing residences pursuant to section 340.034 of the Revised Code, and multiple paths to recovery such as twelve-step approaches. The services and supports shall be made available in the service district of each	684 685 686 687 688 689 690 691 692 693 694

be made available through a contract with one or more providers	698
of sub-acute detoxification or residential services located in	699
other service districts.	700
(B) To the extent authorized by a time-limited waiver	701
issued under section 5119.221 of the Revised Code, ambulatory	702
detoxification and medication-assisted treatment may be made	703
available through a contract with one or more community	704
addiction services providers located not more than thirty miles	705
beyond the borders of the board's service district.	706
The services and supports shall be made available in a	707
manner that ensures that recipients are able to access the	708
services and supports they need for opioid and co-occurring drug	709
addiction in an integrated manner and in accordance with their	710
assessed needs when changing or obtaining additional addiction	711
services or recovery supports for such addiction. An individual	712
seeking a service or support for opioid and co-occurring drug	713
addiction included in a community-based continuum of care shall	714
not be denied the service or support on the basis of the	715
individual's prior experience with the service or support.	716
Sec. 340.034. All of the following apply to the recovery	717
housing <u>residences</u> required by section 340.033 of the Revised	718
Code to be part of included opioid and co-occurring drug	719
addiction services and recovery supports:	720
(A) The A recovery housing residence shall comply with the	721
requirements of being monitored by the department of mental	722
health and addiction services under sections 5119.39 to 5119.396	723
of the Revised Code and any rules adopted under section 5119.397	724
of the Revised Code, but the residence is not be—subject to	725

residential facility licensure by the department of mental-

health and addiction services under section 5119.34 of the

726

Revised Code.	728
(B) The recovery housing shall not be subject to	729
certification as a recovery support under section 5119.36 of the	730
Revised Code.	731
(C) The A recovery housing residence shall not be owned	732
and operated by a board of alcohol, drug addiction, and mental	733
health services unless any of the following applies:	734
(1) The board owns and operates operated the recovery	735
housing <u>residence</u> on July 1, 2017.	736
(2) The board utilizes local funds in the development $_{m{ au}}$	737
purchase, or operation of the recovery housing residence.	738
(3) The board determines that there is a need for the	739
board to assume the ownership and operation of the recovery	740
housing <u>residence</u> , such as when an existing owner and operator	741
of the $rac{ ext{recovery housing-residence}}{ ext{goes}}$ out of business $_{ extcoloredge}$ and the	742
board considers the assumption of ownership and operation of the	743
recovery housing residence to be in the best interest of the	744
community.	745
(D) The (C) A recovery housing residence shall have	746
protocols for all of the following:	747
(1) Administrative oversight;	748
(2) Quality standards;	749
(3) Policies and procedures, including house rules, for	750
its residents to which the residents must agree to adhere.	751
(E) (D) Family members of the a resident of a recovery	752
housing's residents housing residence may reside in the recovery	753
housing residence to the extent permitted by protocols of the	754

recovery housing's protocols permitresidence.	755
(F) The (E) A recovery housing residence shall not limit a	756
resident's duration of stay to an arbitrary or fixed amount of	757
time. Instead, each resident's duration of stay shall be	758
determined by the resident's needs, progress, and willingness to	759
abide by the recovery housing's <u>residence's</u> protocols, in	760
collaboration with the recovery housing's owner and residence's	761
operator, and, if appropriate, in consultation and integration	762
with a community addiction services provider.	763
(G) The (F) A recovery housing residence may permit its	764
residents to receive medication-assisted treatment.	765
(H) (G) A resident of a recovery housing resident	766
<u>residence</u> may receive addiction services that are certified by	767
the department of mental health and addiction services under	768
section 5119.36 of the Revised Code.	769
Sec. 340.035. (A) A board of alcohol, drug addiction, and	770
mental health services may advocate on behalf of medicaid	771
recipients enrolled in medicaid managed care organizations and	772
medicaid-eligible individuals, any of whom have been identified	773
as needing addiction or mental health services.	774
(B) The department of mental health and addiction services	775
and the department of medicaid shall, not later than December	776
31, 2024, develop and implement standards and procedures for the	777
exchange of medicaid recipient information, as defined in	778
section 5160.45 of the Revised Code, between boards of alcohol,	779
drug addiction, and mental health services and the department of	780
medicaid. The information shall be exchanged for the following	781
purposes: to coordinate public benefits; to improve the	782
management and administration of medicaid and other publicly	783

<u>funded programs offering addiction or mental health services;</u>	784
and to ensure that the essential elements of a board's continuum	785
of care are available, as appropriate, to persons seeking or	786
receiving addiction or mental health services.	787
Sec. 340.036. (A) Subject to division (B) of this section	788
and rules adopted by the director of mental health and addiction	789
services after consultation with relevant constituencies as	790
required by division (A)(10) of section 5119.21 of the Revised	791
Code, each board of alcohol, drug addiction, and mental health	792
services shall enter into contracts with all of the following:	793
(1) Public and private facilities for the operation of	794
facility services;	795
(2) Community addiction services providers for addiction	796
services and recovery supports;	797
(3) Community mental health services providers for mental	798
health services and recovery supports.	799
(B) No board shall do any of the following:	800
(1) Contract with a residential facility required to be	801
licensed under section 5119.34 of the Revised Code unless the	802
facility is so licensed;	803
(2) Contract with a community addiction services provider	804
or community mental health services provider for certifiable	805
services and supports unless the certifiable services and	806
supports are certified under section 5119.36 of the Revised	807
Code;	808
(3) Contract with a community addiction services provider	809
or community mental health services provider for recovery	810
supports that are required by the director to meet quality	811

criteria or core competencies unless the recovery supports meet	812
the criteria or competencies.	813
(C) When a board contracts with a community addiction	814
services provider or community mental health services provider	815
for addiction services, mental health services, or recovery	816
supports, all of the following apply:	817
supports, arr or the rorrowing appry.	017
(1) The board shall consider both of the following:	818
(a) The cost effectiveness and quality of the provider's	819
services and supports;	820
(b) Continuity of care.	821
(2) The board may review cost elements, including salary	822
costs, of the services and supports.	823
	0.0.4
(3) The board may establish, in a way that is most	824
effective and efficient in meeting local needs, a utilization	825
review process as part of the contract.	826
(D) If a party to a contract entered into under this-	827
section proposes not to renew the contract or proposes-	828
substantial changes in contract terms, the other party shall be-	829
given written notice at least one hundred twenty days before the	830
expiration date of the contract. During the first sixty days of	831
this one-hundred-twenty-day period, both parties shall attempt	832
to resolve any dispute through good faith collaboration and	833
negotiation in order to continue to provide services and	834
supports to persons in need. If the dispute has not been	835
resolved sixty days before the expiration date of the contract,	836
either party may notify the director of the unresolved dispute.	837
The director may require both parties to submit the dispute to	838
another entity with the cost to be shared by the parties. Not	839
later than twenty days before the expiration date of the	840

contract or a later date to which both parties agree, the other	841
entity shall issue to the parties and director recommendations	842
on how the dispute may be resolved. The director shall adopt	843
rules establishing the procedures of this dispute resolution-	844
process (4) The terms of the contract shall include a process by	845
which the board may terminate the contract before it is	846
scheduled to expire, for any cause the board considers necessary	847
for the early termination of the contract, and a process by	848
which a provider may appeal the board's decision regarding the	849
early termination.	850
(E) (D) Section 307.86 of the Revised Code does not apply	851
to contracts entered into under this section, but a board of	852
alcohol, drug addiction, and mental health services may elect to	853
establish and use a process for selecting and entering into	854
contracts on a competitive basis or any other basis the board	855
considers appropriate.	856
Sec. 340.04. Each board of alcohol, drug addiction, and	857
mental health services shall employ a qualified mental health or	858
addiction services professional with experience in	859
administration or a professional administrator with experience	860
in mental health services or addiction services to serve as	861
executive director of the board and shall prescribe the	862
director's duties.	863
The board shall fix the compensation of the executive	864
director. In addition to such compensation, the director shall	865
be reimbursed for actual and necessary expenses incurred in the	866
performance of the director's official duties. The board, by	867
majority vote of the full membership, may remove the director	868
for cause at any time, contingent upon any written contract	869
between the board and the executive director, upon written	870

charges, after an opportunity has been afforded the director for	871
a hearing before the board on request.	872
The board may delegate to its executive director the	873
authority to act in its behalf in the performance of its	874
administrative duties.	875
As used in this section, "mental health professional" and	876
"addiction services professional" mean an individual who is	877
qualified to work with persons with mental illnesses or persons	878
receiving addiction services, pursuant to standards established	879
by the director of mental health and addiction services under	880
Chapter 5119. of the Revised Code.	881
Sec. 340.30. (A) There is hereby created the county hub	882
program to combat opioid addiction. The purposes of the program	883
are as follows:	884
(1) To strengthen county and community efforts to prevent	885
and treat opioid addiction;	886
(2) To educate youth and adults about the dangers of	887
opioid addiction and the negative effects it has on society;	888
(3) To promote family building and workforce development	889
as ways of <u>combatting</u> combating opioid addiction in communities;	890
(4) To encourage community engagement in efforts to	891
address the purposes specified in divisions (A)(1) to (3) of	892
this section.	893
(B) The program shall be administered by each board of	894
alcohol, drug addiction, and mental health services. If the	895
service district a board represents consists of more than one	896
county, the board shall administer the program in each county.	897
(C) Not later than January 1, 2020, each board shall	898

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submit a report to the department of mental health and addiction	899
services summarizing the board's work on, and progress toward,	900
addressing each of the program's purposes. The department shall	901
aggregate the reports received from the boards and submit a	902
statewide report to the governor and general assembly. The copy	903
submitted to the general assembly shall be submitted in	904
accordance with section 101.68 of the Revised Code.	905
Sec. 5119.01. (A) As used in this chapter:	906
(1) "Addiction" means the chronic and habitual use of	907
alcoholic beverages, the use of a drug of abuse as defined in	908
section 3719.011 of the Revised Code, or the use of gambling by	909
an individual to the extent that the individual no longer can	910
control the individual's use of alcohol, the individual becomes	911
physically or psychologically dependent on the drug, the	912
individual's use of alcohol or drugs endangers the health,	913
safety, or welfare of the individual or others, or the	914
individual's gambling causes psychological, financial,	915
emotional, marital, legal, or other difficulties endangering the	916
health, safety, or welfare of the individual or others.	917
(2) "Addiction services" means services, including	918
intervention, for the treatment of persons with alcohol, drug,	919
or gambling addictions, and for the prevention of such	920
addictions.	921
(3) "Alcohol and drug addiction services" means services,	922
including intervention, for the treatment of persons with	923
alcoholism alcohol use disorder or persons who abuse drugs of	924
abuse and for the prevention of alcoholism <u>alcohol use disorder</u>	925
and drug addiction.	926

(4) "Alcoholism" "Alcohol use disorder" means the chronic

and habitual use of alcoholic beverages by an individual to the	928
extent that the individual no longer can a medical condition	929
characterized by an individual's impaired ability to stop or	930
control the individual's use of alcohol or endangers the use	931
despite adverse social, occupational, or health, safety, or	932
welfare of the individual or others consequences. An alcohol use	933
disorder may be classified as mild, moderate, or severe.	934
(5) "Certifiable services and supports" means all of the	935
following:	936
(a) Alcohol and drug addiction services;	937
(b) Mental health services;	938
(c) The types of recovery supports that are specified in	939
rules adopted under section 5119.36 of the Revised Code as	940
requiring certification under that section.	941
(6) "Community addiction services provider" means an	942
agency, association, corporation or other legal entity,	943
individual, or program that provides one or more of the	944
following:	945
(a) Alcohol and drug addiction services that are certified	946
by the director of mental health and addiction services under	947
section 5119.36 of the Revised Code;	948
(b) Gambling addiction services;	949
(c) Recovery supports that are related to alcohol and drug	950
addiction services or gambling addiction services and paid for	951
with federal, state, or local funds administered by the	952
department of mental health and addiction services or a board of	953
alcohol, drug addiction, and mental health services.	954
(7) "Community mental health services provider" means an	955

agency, association, corporation, individual, or program that	956
provides either of the following:	957
(a) Mental health services that are certified by the	958
director of mental health and addiction services under section	959
5119.36 of the Revised Code;	960
(b) Recovery supports that are related to mental health	961
services and paid for with federal, state, or local funds	962
administered by the department of mental health and addiction	963
services or a board of alcohol, drug addiction, and mental	964
health services.	965
(8) "Drug addiction" means the use of a drug of abuse, as	966
defined in section 3719.011 of the Revised Code, by an	967
individual to the extent that the individual becomes physically	968
or psychologically dependent on the drug or endangers the	969
health, safety, or welfare of the individual or others.	970
(9) "Gambling addiction" means the use of gambling by an	971
individual to the extent that it causes psychological,	972
financial, emotional, marital, legal, or other difficulties	973
endangering the health, safety, or welfare of the individual or	974
others.	975
(10) "Gambling addiction services" means services for the	976
treatment of persons who have a gambling addiction and for the	977
prevention of gambling addiction.	978
(11) "Hospital" means a hospital or inpatient unit	979
licensed by the department of mental health and addiction	980
services under section 5119.33 of the Revised Code, and any	981
institution, hospital, or other place established, controlled,	982
or supervised by the department under-Chapter 5119. of the-	983
Revised Code this chapter.	984

(12) "Included opioid and co-occurring drug addiction	985
services and recovery supports" means the addiction services and	986
recovery supports that, pursuant to section 340.033 of the	987
Revised Code, are included in the array of services and recovery	988
supports for all levels of opioid and co-occurring drug	989
addiction required to be included in the community-based	990
continuum of care established under section 340.032 of the	991
Revised Code.	992
(13) "Medication-assisted treatment" has the same meaning	993
as in section 340.01 of the Revised Code.	994
(14) "Mental illness" means a substantial disorder of	995
thought, mood, perception, orientation, or memory that grossly	996
impairs judgment, behavior, capacity to recognize reality, or	997
ability to meet the ordinary demands of life.	998
(15) "Mental health services" means services for the	999
assessment, care, or treatment of persons who have a mental	1000
illness and for the prevention of mental illness.	1001
(16) "Opioid treatment program" has the same meaning as in	1002
42 C.F.R. 8.2.	1003
(17) "Recovery housing residence" means a residence for	1004
individuals recovering from alcohol use disorder or drug	1005
addiction that provides an alcohol and drug-free living	1006
environment, peer support, assistance with obtaining alcohol and	1007
drug addiction services, and other recovery assistance for	1008
alcohol use disorder and drug addiction.	1009
(18) "Recovery supports" means assistance that is intended	1010
to help an individual with alcoholismalcohol use disorder, drug	1011
addiction, or mental illness, or a member of such an	1012
individual's family, initiate and sustain the individual's	1013

recovery from alcoholismalcohol use disorder, drug addiction, or	1014
mental illness. "Recovery supports" does not mean alcohol and	1015
drug addiction services or mental health services.	1016
(18) (a) "Residence" (19) (a) "Residence," except when	1017
referring to a recovery housing residence or the meaning of	1018
"residence" in section 5119.90 of the Revised Code, means a	1019
person's physical presence in a county with intent to remain	1020
there, except in either of the following circumstances:	1021
(i) If a person is receiving a mental health treatment	1022
service at a facility that includes nighttime sleeping	1023
accommodations, "residence" means that county in which the	1024
person maintained the person's primary place of residence at the	1025
time the person entered the facility;	1026
(ii) If a person is committed pursuant to section 2945.38,	1027
2945.39, 2945.40, 2945.401, or 2945.402 of the Revised Code,	1028
"residence" means the county where the criminal charges were	1029
filed.	1030
(b) When the residence of a person is disputed, the matter	1031
of residence shall be referred to the department of mental	1032
health and addiction services for investigation and	1033
determination. Residence shall not be a basis for a board of	1034
alcohol, drug addiction, and mental health services to deny	1035
services to any person present in the board's service district,	1036
and the board shall provide services for a person whose	1037
residence is in dispute while residence is being determined and	1038
for a person in an emergency situation.	1039
(B) Any reference in this chapter to a board of alcohol,	1040
drug addiction, and mental health services also refers to an	1041
alcohol and drug addiction services board or a community mental	1042

health board in a service district in which an alcohol and drug	1043
addiction services board or a community mental health board has	1044
been established under section 340.021 or former section 340.02	1045
of the Revised Code.	1046
Sec. 5119.36. (A) A community mental health services	1047
provider applicant or community addiction services provider	1048
applicant that seeks <u>initial</u> certification of its certifiable	1049
services and supports, or renewal of the certification of those	1050
services and supports, shall submit an application to the	1051
director of mental health and addiction services. On receipt of	1052
the application, the director may conduct an on-site review and	1053
shall evaluate the applicant to determine whether its	1054
certifiable services and supports satisfy the standards	1055
established by rules adopted under this section. The director	1056
shall make the evaluation, and, if the director conducts an on-	1057
site review of the applicant, may make conduct the review, in	1058
cooperation with a board of alcohol, drug addiction, and mental	1059
health services that seeks to contract with the applicant under	1060
section 340.036 of the Revised Code.	1061
Not later than fourteen days after receipt of an initial	1062
or renewal application, the director shall provide a copy of the	1063
applicant's application materials to the board of alcohol, drug	1064
addiction, and mental health services serving the alcohol, drug	1065
addiction, and mental health service district in which the	1066
applicant's certifiable services and supports will be provided.	1067
The board may respond to the director with any additional	1068
information or concerns regarding the application, not later	1069
than thirty days after receipt of the application materials. If	1070
the board responds within the fourteen-day period with	1071
significant concerns regarding the application, the director	1072

1073

shall meet with the board regarding the concerns.

Not later than thirty days after a provider's	1074
certification ceases to be valid for any reason, including the	1075
provider's failure to renew the certification before it expired,	1076
the director's acceptance of the provider's surrender of the	1077
certification, or the issuance of a final order for disciplinary	1078
action under division (C) or (H) of this section, the director	1079
shall provide notice to the applicable board of alcohol, drug	1080
addiction, and mental health services of the reason the	1081
certification ceased to be valid and the date it became	1082
effective.	1083
(B) Subject to section 5119.361 of the Revised Code, the	1084
director shall determine whether the certifiable services and	1085
supports of a community mental health services provider	1086
applicant or community addiction services provider applicant	1087
satisfy the standards for certification. If the director	1088
determines that an applicant's certifiable services and supports	1089
satisfy the standards for certification and the applicant has	1090
paid the fee required by this section, the director shall	1091
certify the certifiable services and supports.	1092
No community mental health services provider shall be	1093
eligible to receive for its certifiable services and supports	1094
any state funds, federal funds, or funds administered by a board	1095
of alcohol, drug addiction, and mental health services, unless	1096
those certifiable services and supports have been certified by	1097
the director.	1098
No person or government entity subject to section 5119.35	1099
of the Revised Code or any other community addiction services	1100
provider shall be eligible to receive for its services described	1101
in that section or its other certifiable services and supports	1102

any state funds, federal funds, or funds administered by a board

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of alcohol, drug addiction, and mental health services, unless	1104
those services or other certifiable services and supports have	1105
been certified by the director.	1106
(C) The director may refuse to certify certifiable	1107
services and supports, refuse to renew certification, or revoke	1108
certification if any of the following apply to an applicant for	1109
certification or the holder of the certification:	1110
(1) The applicant or holder is not in compliance with	1111
rules adopted under this section.	1112
(2) The applicant or holder has been cited for a pattern	1113
of serious noncompliance or repeated violations of statutes or	1114
rules during the current certification period or any previous	1115
certification period.	1116
(3) The applicant or holder has been found to be in	1117
violation of section 5119.396 of the Revised Code.	1118
(4) The applicant or holder submits false or misleading	1119
information as part of a certification application, renewal, or	1120
investigation.	1121
(D) Proceedings initiated to deny applications to certify	1122
certifiable services and supports, to refuse to renew	1123
certification, or to revoke certification are governed by	1124
Chapter 119. of the Revised Code. If an order has been issued	1125
suspending admissions to a community addiction services provider	1126
that provides overnight accommodations, as provided in division	1127
(H) of this section, the order remains in effect during the	1128
pendency of those proceedings.	1129
(E) If the director determines that a community mental	1130
health services provider applicant's or a community addiction	1131
services provider applicant's certifiable services and supports	1132

do not satisty the standards for certification proposes to take_	1133
action under division (C) of this section, the director shall	1134
notify the board of alcohol, drug addiction, and mental health	1135
services serving the alcohol, drug addiction, and mental health	1136
service district in which the certifiable services and supports	1137
will be or were provided, and provide the board opportunity to	1138
respond as specified in division (A) of this section with	1139
respect to initial or renewal applications.	1140
When a final order is issued by the director under	1141
division (C) of this section, the director may request that the	1142
appropriate board of alcohol, drug addiction, and mental health	1143
services reallocate any funds for the certifiable services and	1144
supports the applicant was to provide to another community	1145
mental health services provider or community addiction services	1146
provider whose certifiable services and supports satisfy the	1147
standards. If the board does not reallocate such funds in a	1148
reasonable period of time, the director may withhold state and	1149
federal funds for the certifiable services and supports and	1150
allocate those funds directly to a community mental health	1151
services provider or community addiction services provider whose	1152
certifiable services and supports satisfy the standards.	1153
(F) Each community mental health services provider	1154
applicant or community addiction services provider applicant	1155
seeking certification of its certifiable services and supports	1156
under this section shall pay a fee for the certification	1157
required by this section, unless the applicant is exempt under	1158
rules adopted under this section. Fees shall be paid into the	1159
state treasury to the credit of the sale of goods and services	1160
fund created pursuant to section 5119.45 of the Revised Code.	1161
(C) The director shall adopt rules in accordance with	1163

Chapter 119. of the Revised Code to implement this section. The	1163
rules shall do all of the following:	1164
(1) Subject to section 340.034 of the Revised Code,	1165
specify the types of recovery supports that are required to be	1166
certified under this section;	1167
(2) Establish certification standards for certifiable	1168
services and supports that are consistent with nationally	1169
recognized applicable standards and facilitate participation in	1170
federal assistance programs. The rules shall include as	1171
certification standards only requirements that improve the	1172
quality of certifiable services and supports or the health and	1173
safety of persons receiving certifiable services and supports.	1174
The standards shall address at a minimum all of the following:	1175
(a) Reporting major unusual incidents to the director;	1176
(b) Procedures for applicants for and persons receiving	1177
certifiable services and supports to file grievances and	1178
complaints;	1179
(c) Seclusion;	1180
(d) Restraint;	1181
(e) Requirements regarding the physical facilities in	1182
which certifiable services and supports are provided;	1183
(f) Requirements with regard to health, safety, adequacy,	1184
and cultural specificity and sensitivity;	1185
(g) Standards for evaluating certifiable services and	1186
supports;	1187
(h) Standards and procedures for granting full,	1188
probationary, and interim certification of the certifiable	1189

services and supports of a community mental health services	1190
provider applicant or community addiction services provider	1191
applicant;	1192
(i) Standards and procedures for revoking the	1193
certification of a community mental health services provider's	1194
or community addiction services provider's certifiable services	1195
and supports that do not continue to meet the minimum standards	1196
established pursuant to this section;	1197
(j) The limitations to be placed on a provider whose	1198
certifiable services and supports are granted probationary or	1199
<pre>interim certification;</pre>	1200
(k) Development of written policies addressing the rights	1201
of persons receiving certifiable services and supports,	1202
including all of the following:	1203
(i) The right to a copy of the written policies addressing	1204
the rights of persons receiving certifiable services and	1205
supports;	1206
(ii) The right at all times to be treated with	1207
consideration and respect for the person's privacy and dignity;	1208
(iii) The right to have access to the person's own	1209
psychiatric, medical, or other treatment records unless access	1210
is specifically restricted in the person's treatment plan for	1211
clear treatment reasons;	1212
(iv) The right to have a client rights officer provided by	1213
the provider or board of alcohol, drug addiction, and mental	1214
health services advise the person of the person's rights,	1215
including the person's rights under Chapter 5122. of the Revised	1216
Code if the person is committed to the provider or board.	1217

(3) Establish the process for certification of certifiable	1218
services and supports;	1219
(4) Set the amount of certification review fees;	1220
(5) Specify the type of notice and hearing to be provided	1221
prior to a decision on whether to reallocate funds.	1222
(H)(1) The director may issue an order suspending	1223
admissions to a community addiction services provider that	1224
provides overnight accommodations if the director finds either	1225
of the following:	1226
(a) The provider's certifiable services and supports are	1227
not in compliance with rules adopted under this section;	1228
(b) The provider has been cited for more than one	1229
violation of statutes or rules during any previous certification	1230
period of the provider.	1231
(2)(a) Except as provided in division (H)(2)(b) of this	1232
section, proceedings initiated to suspend admissions to a	1233
community addiction services provider that provides overnight	1234
accommodations are governed by Chapter 119. of the Revised Code.	1235
(b) If a suspension of admissions is proposed because the	1236
director has determined that the provider has demonstrated a	1237
pattern of serious noncompliance or that a violation creates a	1238
substantial risk to the health and safety of patients, the	1239
director may issue an order suspending admissions before	1240
providing an opportunity for an adjudication under Chapter 119.	1241
of the Revised Code. The director shall lift the order for the	1242
suspension of admissions if the director determines that the	1243
violation that formed the basis for the order has been	1244
corrected.	1245

(3) Appeals from proceedings initiated to order the	1246
suspension of admissions shall be conducted in accordance with	1247
Chapter 119. of the Revised Code, unless the order was issued	1248
before providing an opportunity for an adjudication, in which	1249
case all of the following apply:	1250
(a) The provider may request a hearing not later than ten	1251
days after receiving the notice specified in section 119.07 of	1252
the Revised Code.	1253
(b) If a timely request for a hearing that includes the	1254
provider's current address is made, the hearing shall commence	1255
not later than thirty days after the department receives the	1256
request.	1257
(c) After commencing, the hearing shall continue	1258
uninterrupted, except for Saturdays, Sundays, and legal	1259
holidays, unless other interruptions are agreed to by the	1260
provider and the director.	1261
(d) If the hearing is conducted by a hearing examiner, the	1262
hearing examiner shall file a report and recommendations with	1263
the department not later than ten days after the last of the	1264
following:	1265
(i) The close of the hearing;	1266
(ii) If a transcript of the proceedings is ordered, the	1267
hearing examiner receives the transcript;	1268
(iii) If post-hearing briefs are timely filed, the hearing	1269
examiner receives the briefs.	1270
(e) The hearing examiner shall send a written copy of the	1271
report and recommendations, by certified mail, to the provider,	1272
or the provider's attorney, if applicable, not later than five	1273

days after the report is filed with the department.	1274
(f) Not later than five days after receiving the report	1275
and recommendations, the provider may file objections with the	1276
department.	1277
(g) Not later than fifteen days after the hearing examiner	1278
files the report and recommendations, the department shall issue	1279
an order approving, modifying, or disapproving the report and	1280
recommendations.	1281
(h) Notwithstanding the pendency of the hearing, the	1282
department shall lift the order for the suspension of admissions	1283
if the department determines the violation that formed the basis	1284
for the order has been corrected.	1285
(I)(1) In a proceeding initiated to suspend admissions to	1286
a community addiction services provider that provides overnight	1287
accommodations, to deny an application for certification of	1288
certifiable services and supports, to refuse to renew	1289
certification, or to revoke certification, the department may	1290
order the suspension, denial, refusal, or revocation regardless	1291
of whether some or all of the deficiencies that prompted the	1292
proceedings have been corrected at the time of the hearing.	1293
(2) When the department issues an order suspending	1294
admissions to a community addiction services provider that	1295
provides overnight accommodations, denies an application for	1296
certification of certifiable services and supports, refuses to	1297
renew certification, or revokes a certification, the department	1298
shall not grant an opportunity for submitting a plan of	1299
correction.	1300
(J) The department of mental health and addiction services	1301
shall maintain a current list of community addiction services	1302

providers and shall provide a copy of the list to a judge of a	1303
court of common pleas who requests a copy for the use of the	1304
judge under division (H) of section 2925.03 of the Revised Code.	1305
The list shall identify each provider by its name, its address,	1306
and the county in which it is located.	1307
(K) No person shall represent in any manner that a	1308
community mental health services provider's or community	1309
addiction services provider's certifiable services and supports	1310
are certified by the director if the certifiable services and	1311
supports are not so certified at the time the representation is	1312
made.	1313
(L) If a board of alcohol, drug addiction, and mental	1314
health services requests the department of mental health and	1315
addiction services to investigate a community mental health	1316
services provider or community addiction services provider	1317
pursuant to this section, the department shall initiate the	1318
investigation not later than ten business days after receipt of	1319
the request. If the department initiates an investigation of a	1320
community mental health services provider or community addiction	1321
services provider under this section for any other reason, the	1322
department shall notify the board of alcohol, drug addiction,	1323
and mental health services serving the applicable alcohol, drug	1324
addiction, and mental health service district of the	1325
investigation and the reason not later than three business days	1326
after the initiation. In either event, the department shall keep	1327
the board updated on the status of the investigation, including	1328
any final disposition of the investigation.	1329
Sec. 5119.363. The director of mental health and addiction	1330
services shall adopt rules governing the duties of boards of	1331
alcohol, drug addiction, and mental health services under	1332

section 340.20 of the Revised Code and the duties of community	1333
addiction services providers under section 5119.362 of the	1334
Revised Code. The rules shall be adopted in accordance with	1335
Chapter 119. of the Revised Code.	1336
The director shall adopt rules under this section that	1337
authorize the department of mental health and addiction services	1338
to determine an advanced practice registered nurse's, physician	1339
assistant's, or physician's compliance with section 3719.064 of	1340
the Revised Code if such practitioner works for a community	1341
addiction services provider.	1342
Sec. 5119.39. (A) The department of mental health and	1343
addiction services shall monitor the operation of recovery	1344
housing in this state by doing either of the following:	1345
(1) Certifying recovery housing residences through a	1346
<pre>process established by the department;</pre>	1347
(2) Accepting accreditation, or its equivalent for the	1348
service of recovery housing, from one or more of the following:	1349
(a) The Ohio affiliate of the national alliance for	1350
recovery residences;	1351
(b) Oxford house, inc.;	1352
(c) Any other organization that is designated by the	1353
department for purposes of this section.	1354
(B) If the department certifies recovery housing	1355
residences, the department shall, in rules adopted under section	1356
5119.397 of the Revised Code, establish requirements for initial	1357
certification and renewal certification, as well as grounds and	1358
procedures for disciplinary action against operators of recovery	1359
housing residences.	1360

Sec. 5119.391. (A) The department of mental health and	1361
addiction services shall monitor the establishment of recovery	1362
housing residences in this state.	1363
(B) For purposes of division (A) of this section, and	1364
within the timeframe specified in division (C) of this section,	1365
each person or government entity that will operate a recovery	1366
housing residence on or after the effective date of this	1367
section, including any recovery housing that was established and	1368
in operation prior to the effective date of this section, shall	1369
file with the department, on a form prescribed by the	1370
department, all of the following information:	1371
(1) The name of the recovery housing residence and any	1372
other name under which the residence does business;	1373
(2) The address of the recovery housing residence;	1374
(3) The name of the person or government entity operating	1375
the residence;	1376
(4) The primary telephone number and electronic mail	1377
address for the recovery housing operator;	1378
(5) The date the recovery housing residence was first	1379
occupied, or will be occupied, by its first resident;	1380
(6) Information related to any existing accreditation or	1381
its equivalent that the recovery housing residence has obtained	1382
or is in the process of obtaining;	1383
(7) Any other information the department considers	1384
appropriate.	1385
(C) The form required by division (B) of this section	1386
shall be filed with the department as follows:	1387

(1) For a recovery housing residence that began operating	1388
before the effective date of this section, not later than thirty	1389
days after the effective date of this section;	1390
(2) For a recovery housing residence that will begin	1391
operating on or after the effective date of this section, not	1392
later than thirty days after the first resident begins occupying	1393
the residence.	1394
(D) If the department accepts accreditation or its	1395
equivalent from an organization specified in section 5119.39 of	1396
the Revised Code, the department may provide copies of forms	1397
filed in accordance with this section to any such organization.	1398
Sec. 5119.392. (A) Beginning January 1, 2025, no person or	1399
government entity shall operate a recovery housing residence	1400
unless either of the following applies:	1401
(1) (a) If the department of mental health and addiction	1402
services certifies recovery housing residences, the recovery	1403
housing residence is certified by the department.	1404
(b) If the department accepts accreditation or its	1405
equivalent from an organization specified in section 5119.39 of	1406
the Revised Code, the residence is accredited by such an	1407
organization.	1408
(2) The recovery housing residence has been operating for	1409
not more than eighteen months and is actively engaged in efforts	1410
to obtain certification or accreditation, as applicable. For	1411
purposes of identifying this eighteen-month timeframe, a	1412
recovery housing residence is considered to begin operating on	1413
the date that the first resident occupies the residence, as	1414
specified on the form filed in accordance with section 5119.391	1415
of the Revised Code.	1416

(B) If the director of mental health and addiction	1417
services determines that a recovery housing residence is	1418
operating in violation of this section, the director may	1419
petition the court of common pleas of the county in which the	1420
recovery housing residence is located for an order enjoining	1421
operation of the recovery housing residence.	1422
Sec. 5119.393. (A) The department of mental health and	1423
addiction services shall establish a procedure to receive and	1424
investigate complaints from residents, staff, and the public	1425
regarding recovery housing residences. The department may	1426
contract with one or more of the organizations specified in	1427
section 5119.39 of the Revised Code to fulfill some or all of	1428
the functions associated with receiving and investigating	1429
<pre>complaints.</pre>	1430
(B) Any organization under contract with the department to	1431
receive and investigate complaints shall make reports to the	1432
<u>department as follows:</u>	1433
(1) Not less than monthly, the contractor shall report the	1434
status of each pending investigation and shall report the	1435
outcome of each investigation that has been completed since the	1436
<pre>last report was made;</pre>	1437
(2) As soon as practicable, but not less than ten days	1438
after making an adverse decision, if a contractor's	1439
accreditation or its equivalent is accepted by the department	1440
for purposes of section 5119.39 of the Revised Code, the	1441
contractor shall report that decision to the department in a	1442
manner prescribed by the department.	1443
Sec. 5119.394. (A) The department of mental health and	1444
addiction services shall establish and maintain a registry of	1445

recovery housing residences that meet the criteria described in	1446
division (A)(1) or (2) of section 5119.392 of the Revised Code.	1447
For each residence, the registry shall include all of the	1448
<pre>following:</pre>	1449
(1) Information on the form required by division (B) of	1450
section 5119.391 of the Revised Code;	1451
(2) If a complaint received under section 5119.393 of the	1452
Revised Code has been investigated, a description of the	1453
complaint, the date the complaint was submitted to the	1454
department or its contractor, and the outcome of the	1455
<pre>investigation;</pre>	1456
(3) Any other information the department considers	1457
appropriate.	1458
(B) The department shall immediately remove from the	1459
registry a recovery housing residence that ceases to meet the	1460
criteria described in division (A)(1) or (2) of section 5119.392	1461
of the Revised Code, including if the criteria described in	1462
those divisions ceases to be met because the residence has had	1463
its certification or accreditation, as applicable, revoked or	1464
<pre>not renewed.</pre>	1465
(C) The department shall make the registry available to	1466
the public on the department's web site.	1467
Sec. 5119.395. Beginning January 1, 2025, no person or	1468
government entity shall advertise or represent any residence or	1469
other building to be a recovery housing residence, sober living	1470
home, or any other alcohol and drug free housing for persons	1471
recovering from alcohol use disorder or drug addiction unless	1472
the residence or building meets either of the following	1473
<pre>conditions:</pre>	1474

(A) The residence or building is on the registry	1475
established and maintained under section 5119.394 of the Revised	1476
Code.	1477
(B) The residence or building is regulated by the	1478
department of rehabilitation and correction under section	1479
2967.14 of the Revised Code.	1480
Sec. 5119.396. Beginning January 1, 2025, community	1481
addiction services providers and community mental health	1482
services providers shall not refer clients to a recovery housing	1483
residence unless the residence is on the registry established	1484
and maintained under section 5119.394 of the Revised Code on the	1485
date that the referral is made. Community addiction services	1486
providers and community mental health services providers shall	1487
maintain records of all referrals made to recovery housing	1488
residences.	1489
Sec. 5119.397. The director of mental health and addiction	1490
services may adopt rules to implement sections 5119.39 to	1491
5119.396 of the Revised Code. Any rules adopted under this	1492
section shall be adopted in accordance with Chapter 119. of the	1493
Revised Code.	1494
Sec. 5119.48. (A) The department of mental health and	1495
addiction services shall create the all roads lead to home	1496
program. The program shall include all of the following	1497
initiatives:	1498
(1) A media campaign. As part of the campaign, the	1499
department shall develop public service announcements and shall	1500
make the announcements available to television and radio media	1501
outlets. The announcements shall be made available beginning on	1502
January 1, 2018, and at least twice annually, once between	1503

January and March of each year, and once in September of each	1504
year as part of national recovery month.	1505
(2) A web site as described in division (C) of this	1506
section;	1507
(3) A twenty-four-hour hotline, that is operated by a call	1508
center, for the purpose of helping individuals access addiction	1509
services.	1510
(B) The media campaign described in division (A)(1) of	1511
this section shall do all of the following:	1512
(1) Include messages to reduce the stigma associated with	1513
seeking help for drug addiction;	1514
(2) Provide directions for people who are in need of drug	1515
addiction assistance to a web-based location that includes all	1516
of the following:	1517
(a) Information on where to find help for drug addiction;	1518
(b) Information on intervention and referral options;	1519
(c) Contact information for county board drug addiction	1520
assistance authorities.	1521
(3) Prioritize its efforts in media markets that have the	1522
highest rates of drug overdose deaths in this state;	1523
(4) Utilize television and radio public service	1524
announcements provided to media outlets, as well as internet	1525
advertising models such as low-cost social media outlets.	1526
(C) Before January 1, 2018, the department shall create a	1527
web site as described in division (A)(2) of this section that	1528
offers all of the following components:	1529
(1) If reasonably available for use, an evidence-based	1530

self-reporting screening tool approved by the department's	1531
medical director;	1532
(2) Community detoxification and withdrawal management	1533
options and community treatment options;	1534
(3) A searchable database of certified substance abuse	1535
providers organized by zip code;	1536
(4) Information on recovery supports, including recovery	1537
housing_residences;	1538
(5) Clinical information regarding what a person may	1539
expect during detoxification, withdrawal, and treatment.	1540
(D) The department may contract with private vendors for	1541
the creation and maintenance of the interactive web site	1542
described in division (C) of this section.	1543
Sec. 5119.61. (A) The department of mental health and	1544
addiction services shall collect and compile statistics and	1545
other information on the care and treatment of persons with	1546
mental disabilities, and the care, treatment, and rehabilitation	1547
of persons with alcoholismalcohol use disorder, persons with	1548
drug dependencies, persons in danger of drug dependence, and	1549
persons with or in danger of developing a gambling addiction in	1550
this state. The information shall include, without limitation,	1551
information on the number of such persons, the type of drug	1552
involved, if any, the type of care, treatment, or rehabilitation	1553
prescribed or undertaken, and the success or failure of the	1554
care, treatment, or rehabilitation. The department shall collect	1555
information about addiction services, mental health services,	1556
and recovery supports delivered and persons served as required	1557
for reporting and evaluation relating to state and federal funds	1558
expended for such purposes.	1559

(B) No community addiction services provider or community	1560
mental health services provider shall fail to supply statistics	1561
and other information within its knowledge and with respect to	1562
its addiction services, mental health services, and recovery	1563
supports upon request of the department.	1564
(C) Communications by a person seeking aid in good faith	1565
for alcoholism—alcohol use disorder or drug dependence are	1566
confidential, and this section does not require the collection	1567
or permit the disclosure of information which reveals or	1568
comprises the identity of any person seeking aid.	1569
(D) Based on the information collected and compiled under	1570
division (A) of this section, the department shall develop a	1571
project to assess the outcomes of persons served by community	1572
addiction services providers and community mental health	1573
services providers that receive funds distributed by the	1574
department.	1575
Sec. 5119.90. As used in sections 5119.90 to 5119.98 of	1576
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the Revised Code:	1577
the Revised Code: (A) "Alcohol and other drug abuse" means alcoholism—	1577 1578
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physical harm upon self, family, or others.	1589
(E) "Hospital" has the same meaning as in section 3701.01	1590
or 3727.01 of the Revised Code but does not include either a	1591
hospital operated by the department of mental health and	1592
addiction services or an inpatient unit licensed by the	1593
department.	1594
(F) "Intoxicated" means being under the influence of	1595
alcohol, another drug, or both alcohol and another drug and, as	1596
a result, having a significantly impaired ability to function.	1597
(G) "Petitioner" means a person who institutes a	1598
proceeding under sections 5119.91 to 5119.98 of the Revised	1599
Code.	1600
(H) "Probate court" means the probate division of the	1601
court of common pleas.	1602
(I) "Qualified health professional" means a person that is	1603
properly credentialed or licensed to conduct a drug and alcohol	1604
assessment and diagnosis under Ohio law.	1605
(J) "Residence" means the legal residence of a person as	1606
determined by applicable principles governing conflicts of law.	1607
(K) "Respondent" means a person alleged in a petition	1608
filed or hearing under sections 5119.91 to 5119.98 of the	1609
Revised Code to be a person who is experiencing alcohol and	1610
other drug abuse and who may be ordered under those sections to	1611
undergo treatment.	1612
(L) "Treatment" means services and programs for the care	1613
and rehabilitation of intoxicated persons and persons	1614
experiencing alcohol and other drug abuse. "Treatment" includes	1615
residential treatment, a halfway house setting, and an intensive	1616

outpatient or outpatient level of care.	1617
Sec. 5119.99. (A) Whoever violates section 5119.333	1618
division (A) of section 5119.392, or section 5119.395 of the	1619
Revised Code is guilty of a misdemeanor of the first degree.	1620
(B) Whoever violates division (B) of section 5119.61 of	1621
the Revised Code is guilty of a misdemeanor of the fourth	1622
degree.	1623
(C) Whoever violates section 5119.27 or 5119.28, division	1624
(A) of section 5119.35, division (K) of section 5119.36, or	1625
division (A)(1) or (2) of section 5119.37 of the Revised Code is	1626
guilty of a felony of the fifth degree.	1627
Sec. 5160.45. (A) As used in sections 5160.45 to 5160.481	1628
of the Revised Code, "information" means all of the following:	1629
(1) Records, as defined in section 149.011 of the Revised	1630
Code;	1631
(2) Any other documents in any format;	1632
(3) Data derived from records and documents that are	1633
generated, acquired, or maintained by the department of	1634
medicaid, a county department of job and family services, or an	1635
entity performing duties on behalf of the department or a county	1636
department.	1637
(B) Except as permitted by this section, <u>division (B) of</u>	1638
section 340.035, section 5160.47, or rules authorized by section	1639
5160.48 or 5160.481 of the Revised Code, or when required by	1640
federal law, no person or government entity shall use or	1641
disclose information regarding a medical assistance recipient	1642
for any purpose not directly connected with the administration	1643
of a medical assistance program.	1644

(C) Both of the following shall be considered to be	1645
purposes directly connected with the administration of a medical	1646
assistance program:	1647
(1) Treatment, payment, or other operations or activities	1648
authorized by 42 C.F.R. Chapter IV;	1649
(2) Any administrative function or duty the department of	1650
medicaid performs alone or jointly with a federal government	1651
entity, another state government entity, or a local government	1652
entity implementing a provision of federal law.	1653
(D) The department or a county department of job and	1654
family services may disclose information regarding a medical	1655
assistance recipient to any of the following:	1656
(1) The recipient or the recipient's authorized	1657
representative;	1658
(2) The recipient's legal guardian in accordance with	1659
division (C) of section 2111.13 of the Revised Code;	1660
(3) The attorney of the recipient, if the department or	1661
county department has obtained authorization from the recipient	1662
or the recipient's authorized representative or legal guardian	1663
that meets all requirements of the Health Insurance Portability	1664
and Accountability Act of 1996, 42 U.S.C. 1320d et seq.,	1665
regulations promulgated by the United States department of	1666
health and human services to implement the act, section 5160.46	1667
of the Revised Code, and any rules authorized by section 5160.48	1668
of the Revised Code;	1669
(4) A health information or health records management	1670
entity that has executed with the department a business	1671
associate agreement required by 45 C.F.R 164.502(e)(2) and has	1672
been authorized by the recipient or the recipient's authorized	1673

representative or legal guardian to receive the recipient's	1674
electronic health records in accordance with rules authorized by	1675
section 5160.48 of the Revised Code;	1676
(5) A court if pursuant to a written order of the court.	1677
(E) The department may receive from county departments of	1678
job and family services information regarding any medical	1679
assistance recipient for purposes of training and verifying the	1680
accuracy of eligibility determinations for a medical assistance	1681
program. The department may assemble information received under	1682
this division into a report if the report is in a form specified	1683
by the department. Information received and assembled into a	1684
report under this division shall remain confidential and not be	1685
subject to disclosure pursuant to section 149.43 or 1347.08 of	1686
the Revised Code.	1687
(F) The department shall notify courts in this state	1688
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(F) The department shall notify courts in this state regarding its authority, under division (D)(5) of this section, to disclose information regarding a medical assistance recipient pursuant to a written court order. Section 2. That existing sections 340.01, 340.02, 340.022,	1688 1689 1690 1691 1692
(F) The department shall notify courts in this state regarding its authority, under division (D)(5) of this section, to disclose information regarding a medical assistance recipient pursuant to a written court order. Section 2. That existing sections 340.01, 340.02, 340.022, 340.03, 340.032, 340.033, 340.034, 340.035, 340.036, 340.04,	1688 1689 1690 1691 1692 1693
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(F) The department shall notify courts in this state regarding its authority, under division (D)(5) of this section, to disclose information regarding a medical assistance recipient pursuant to a written court order. Section 2. That existing sections 340.01, 340.02, 340.022, 340.03, 340.032, 340.033, 340.034, 340.035, 340.036, 340.04, 340.30, 5119.01, 5119.36, 5119.363, 5119.48, 5119.61, 5119.90, 5119.99, and 5160.45 of the Revised Code are hereby repealed. Section 3. That sections 340.20 and 3720.041 of the	1688 1689 1690 1691 1692 1693 1694 1695
(F) The department shall notify courts in this state regarding its authority, under division (D)(5) of this section, to disclose information regarding a medical assistance recipient pursuant to a written court order. Section 2. That existing sections 340.01, 340.02, 340.022, 340.03, 340.032, 340.033, 340.034, 340.035, 340.036, 340.04, 340.30, 5119.01, 5119.36, 5119.363, 5119.48, 5119.61, 5119.90, 5119.99, and 5160.45 of the Revised Code are hereby repealed. Section 3. That sections 340.20 and 3720.041 of the Revised Code are hereby repealed.	1688 1689 1690 1691 1692 1693 1694 1695 1696