As Introduced

131st General Assembly

Regular Session 2015-2016

H. B. No. 117

Representatives Roegner, Cupp

Cosponsors: Representatives Conditt, DeVitis, Brown, Duffey, McColley, Romanchuk, Henne, Butler, Patmon, Thompson, Hood, Becker, Ruhl, Koehler, Retherford, Schaffer, Vitale, Brinkman, Ginter, Amstutz, Derickson, Burkley, Brenner, Hayes, Buchy, Blessing, Schuring, Hambley

A BILL

То	amend sections 2305.11 and 4731.22 and to enact	1
	sections 2307.54, 2919.20, 2919.201, 2919.202,	2
	2919.203, 2919.204, and 2919.205 of the Revised	3
	Code to prohibit the performance of an abortion	4
	on a pregnant woman when the probable post-	5
	fertilization age of the unborn child is twenty	6
	weeks or greater.	7

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

Section 1. That sections 2305.11 and 4731.22 be amended	8
and sections 2307.54, 2919.20, 2919.201, 2919.202, 2919.203,	9
2919.204, and 2919.205 of the Revised Code be enacted to read as	10
follows:	11
Sec. 2305.11. (A) An action for libel, slander, malicious	12
prosecution, or false imprisonment, an action for malpractice	13
other than an action upon a medical, dental, optometric, or	14
chiropractic claim, or an action upon a statute for a penalty or	15
forfeiture shall be commenced within one year after the cause of	16
action accrued, provided that an action by an employee for the	17

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payment of unpaid minimum wages, unpaid overtime compensation,	18
or liquidated damages by reason of the nonpayment of minimum	19
wages or overtime compensation shall be commenced within two	20
years after the cause of action accrued.	21
(B) A civil action for unlawful abortion pursuant to	22
section 2919.12 of the Revised Code, a civil action authorized	23
by division (H) of section 2317.56 of the Revised Code, a civil	24
action pursuant to division (B)(1) or (2) of section 2307.51 of	25
the Revised Code for performing a dilation and extraction	26
procedure or attempting to perform a dilation and extraction-	27
procedure in violation of section 2919.15 of the Revised Code,	28
and a civil action pursuant to division (B) of section 2307.52	29
of the Revised Code for terminating or attempting to terminate a	30
human pregnancy after viability in violation of division (A) of	31
section 2919.17 of the Revised Code, and a civil action for	32
terminating or attempting to terminate a human pregnancy of a	33
pain-capable unborn child in violation of division (E) of	34
section 2919.201 of the Revised Code shall be commenced within	35
one year after the performance or inducement of the abortion $\overline{_{ au}}$ or	36
within one year after the attempt to perform or induce the	37
abortion in violation of division (A) of section 2919.17 of the	38
Revised Code or division (E) of section 2919.201 of the Revised	39
Code, within one year after the performance of the dilation and	40
extraction procedure, or, in the case of a civil action pursuant-	41
to division (B)(2) of section 2307.51 of the Revised Code,	42
within one year after the attempt to perform the dilation and	43
extraction procedure.	44
(C) As used in this section, "medical claim," "dental	45
claim," "optometric claim," and "chiropractic claim" have the	46

same meanings as in section 2305.113 of the Revised Code.

Sec. 2307.54. (A) As used in this section, "frivolous	48
conduct" has the same meaning as in section 2323.51 of the	49
Revised Code.	50
(B) A woman upon whom an abortion is purposely performed	51
or induced or purposely attempted to be performed or induced, or	52
the father of the unborn child who was the subject of such an	53
abortion, in violation of division (E) of section 2919.201 of	54
the Revised Code, has and may commence a civil action for	55
compensatory damages, punitive or exemplary damages if	56
authorized by section 2315.21 of the Revised Code, and court	57
costs and reasonable attorney's fees against the person who	58
purposely performed or induced or purposely attempted to perform	59
or induce the abortion in violation of division (E) of section	60
2919.201 of the Revised Code.	61
(C) If a judgment is rendered in favor of the defendant in	62
a civil action commenced pursuant to division (B) of this	63
section and the court finds, upon the filing of a motion under	64
section 2323.51 of the Revised Code, that the commencement of	65
the civil action constitutes frivolous conduct and that the	66
defendant was adversely affected by the frivolous conduct, the	67
court shall award in accordance with section 2323.51 of the	68
Revised Code reasonable attorney's fees to the defendant.	69
Sec. 2919.20. As used in sections 2919.20 to 2919.204 of	70
the Revised Code:	71
(A) "Fertilization" means the fusion of a human	72
spermatozoon with a human ovum.	73
(B) "Medical emergency" means a condition that in the	74
physician's good faith medical judgment, based upon the facts	75
known to the physician at that time, so complicates the woman's	76

pregnancy as to necessitate the immediate performance or	77
inducement of an abortion in order to prevent the death of the	78
pregnant woman or to avoid a serious risk of the substantial and	79
irreversible impairment of a major bodily function of the	80
pregnant woman that delay in the performance or inducement of	81
the abortion would create.	82
(C) "Pain-capable unborn child" means an unborn child of a	83
probable post-fertilization age of twenty weeks or more.	84
(D) "Physician" has the same meaning as in section	85
2305.113 of the Revised Code.	86
(E) "Post-fertilization age" means the age of the unborn	87
child as calculated from the fusion of a human spermatozoon with	88
a human ovum.	89
(F) "Probable post-fertilization age" means, in reasonable	90
medical judgment and with reasonable probability, the age of the	91
unborn child, as calculated from fertilization, at the time the	92
abortion is performed or induced or attempted to be performed or	93
induced.	94
(G) "Serious risk of the substantial and irreversible	95
impairment of a major bodily function" means any medically	96
diagnosed condition that so complicates the pregnancy of the	97
woman as to directly or indirectly cause the substantial and	98
irreversible impairment of a major bodily function. A medically	99
diagnosed condition that constitutes a "serious risk of the	100
substantial and irreversible impairment of a major bodily	101
function" includes pre-eclampsia, inevitable abortion, and	102
premature rupture of the membranes, may include, but is not	103
limited to, diabetes and multiple sclerosis, and does not	104
include a condition related to the woman's mental health.	105

(H) "Unborn child" means an individual organism of the	106
species homo sapiens from fertilization until live birth.	107
Sec. 2919.201. (A) No person shall purposely perform or	108
induce or purposely attempt to perform or induce an abortion on	109
a pregnant woman when the probable post-fertilization age of the	110
unborn child is twenty weeks or greater.	111
(B)(1) It is an affirmative defense to a charge under	112
division (A) of this section that the abortion was purposely	113
performed or induced or purposely attempted to be performed or	114
induced by a physician and that the physician determined, in the	115
physician's good faith medical judgment, based on the facts	116
known to the physician at that time, that either of the	117
<pre>following applied:</pre>	118
(a) The probable post-fertilization age of the unborn	119
child was less than twenty weeks.	120
(b) The abortion was necessary to prevent the death of the	121
pregnant woman or a serious risk of the substantial and	122
irreversible impairment of a major bodily function of the	123
pregnant woman.	124
(2) No abortion shall be considered necessary under	125
division (B)(1)(b) of this section on the basis of a claim or	126
diagnosis that the pregnant woman will engage in conduct that	127
would result in the pregnant woman's death or a substantial and	128
irreversible impairment of a major bodily function of the	129
pregnant woman or based on any reason related to the woman's	130
mental health.	131
(C) Except when a medical emergency exists that prevents	132
compliance with section 2919.203 of the Revised Code, the	133
affirmative defense set forth in division (B)(1)(a) of this	134

section does not apply unless the physician who purposely	135
performs or induces or purposely attempts to perform or induce	136
the abortion makes a determination of the probable post-	137
fertilization age of the unborn child as required by division	138
(A) of section 2919.203 of the Revised Code or relied upon such	139
a determination made by another physician and certifies in	140
writing, based on the results of the tests performed, that in	141
the physician's good faith medical judgment the unborn child's	142
probable post-fertilization age is less than twenty weeks.	143
(D) Except when a medical emergency exists that prevents	144
compliance with one or more of the following conditions, the	145
affirmative defense set forth in division (B)(1)(b) of this	146
section does not apply unless the physician who purposely	147
performs or induces or purposely attempts to perform or induce	148
the abortion complies with all of the following conditions:	149
(1) The physician who purposely performs or induces or	150
purposely attempts to perform or induce the abortion certifies	151
in writing that, in the physician's good faith medical judgment,	152
based on the facts known to the physician at that time, the	153
abortion is necessary to prevent the death of the pregnant woman	154
or a serious risk of the substantial and irreversible impairment	155
of a major bodily function of the pregnant woman.	156
(2) A different physician not professionally related to	157
the physician described in division (D)(1) of this section	158
certifies in writing that, in that different physician's good	159
faith medical judgment, based on the facts known to that	160
different physician at that time, the abortion is necessary to	161
prevent the death of the pregnant woman or a serious risk of the	162
substantial and irreversible impairment of a major bodily	163
function of the pregnant woman.	164

(3) The physician purposely performs or induces or	165
purposely attempts to perform or induce the abortion in a	166
hospital or other health care facility that has appropriate	167
neonatal services for premature infants.	168
(4) The physician who purposely performs or induces or	169
purposely attempts to perform or induce the abortion terminates	170
or attempts to terminate the pregnancy in the manner that	171
provides the best opportunity for the unborn child to survive,	172
unless that physician determines, in the physician's good faith	173
medical judgment, based on the facts known to the physician at	174
that time, that the termination of the pregnancy in that manner	175
poses a greater risk of the death of the pregnant woman or a	176
greater risk of the substantial and irreversible impairment of a	177
major bodily function of the pregnant woman than would other	178
available methods of abortion.	179
(5) The physician certifies in writing the available	180
method or techniques considered and the reasons for choosing the	181
method or technique employed.	182
(6) The physician who purposely performs or induces or	183
purposely attempts to perform or induce the abortion has	184
arranged for the attendance in the same room in which the	185
abortion is to be performed or induced or attempted to be	186
performed or induced at least one other physician who is to take	187
control of, provide immediate medical care for, and take all	188
reasonable steps necessary to preserve the life and health of	189
the unborn child immediately upon the child's complete expulsion	190
or extraction from the pregnant woman.	191
(E) Whoever purposely performs or induces or purposely	192
attempts to perform or induce an abortion in violation of, or	193
without complying with, the requirements of this section is	194

guilty of terminating or attempting to terminate a human	195
pregnancy of a pain-capable unborn child, a felony of the fourth	196
degree.	197
(F) The state medical board shall revoke a physician's	198
license to practice medicine in this state if the physician	199
violates or fails to comply with this section.	200
(G) Any physician who purposely performs or induces an	201
abortion or purposely attempts to perform or induce an abortion	202
with actual knowledge that neither of the affirmative defenses	203
set forth in division (B)(1) of this section applies, or with a	204
heedless indifference as to whether either an affirmative	205
defense applies, is liable in a civil action for compensatory	206
and exemplary damages and reasonable attorney's fees to any	207
person, or the representative of the estate of any person, who	208
sustains injury, death, or loss to person or property as the	209
result of the performance or inducement or the attempted	210
performance or inducement of the abortion. In any action under	211
this division, the court also may award any injunctive or other	212
equitable relief that the court considers appropriate.	213
(H) A pregnant woman on whom an abortion is purposely	214
performed or induced or purposely attempted to be performed or	215
induced in violation of division (A) of this section is not	216
guilty of violating division (A) of this section or of	217
attempting to commit, conspiring to commit, or complicity in	218
committing a violation of division (A) of this section.	219
Sec. 2919.202. (A) A physician who performs or induces or	220
attempts to perform or induce an abortion on a pregnant woman	221
shall submit a report to the department of health in accordance	222
with the forms, rules, and regulations adopted by the department	223
that includes all of the information the physician is required	224

to certify in writing or determine under sections 2919.201 and	225
2919.203 of the Revised Code.	226
(B) By the thirtieth day of September of each year, the	227
department of health shall issue a public report that provides	228
statistics for the previous calendar year compiled from all of	229
the reports covering that calendar year submitted to the	230
department in accordance with this section for each of the items	231
listed in division (A) of this section. The report shall also	232
provide the statistics for each previous calendar year in which	233
a report was filed with the department pursuant to this section,	234
adjusted to reflect any additional information that a physician	235
provides to the department in a late or corrected report. The	236
department shall ensure that none of the information included in	237
the report could reasonably lead to the identification of any	238
pregnant woman upon whom an abortion is performed.	239
(C)(1) The physician shall submit the report described in	240
division (A) of this section to the department of health within	241
fifteen days after the woman is discharged. If the physician	242
fails to submit the report more than thirty days after that	243
fifteen-day deadline, the physician shall be subject to a late	244
fee of five hundred dollars for each additional thirty-day	245
period or portion of a thirty-day period the report is overdue.	246
A physician who is required to submit to the department of	247
health a report under division (A) of this section and who has	248
not submitted a report or has submitted an incomplete report	249
more than one year following the last day of the fifteen-day	250
deadline may, in an action brought by the department of health,	251
be directed by a court of competent jurisdiction to submit a	252
complete report to the department of health within a period of	253
time stated in a court order or be subject to contempt of court.	254

(2) If a physician fails to comply with the requirements	255
of this section, other than filing a late report with the	256
department of health, or fails to submit a complete report to	257
the department of health in accordance with a court order, the	258
physician is subject to division (B)(44) of section 4731.22 of	259
the Revised Code.	260
(3) No person shall purposely falsify any report required	261
under this section. Whoever purposely violates this division is	262
guilty of pain-capable unborn child abortion report	263
falsification, a misdemeanor of the first degree.	264
(D) Within ninety days of the effective date of this	265
section, the department of health shall adopt rules pursuant to	266
section 111.15 of the Revised Code to assist in compliance with	267
this section.	268
Sec. 2919.203. (A) Except in a medical emergency that	269
prevents compliance with this division, no physician shall	270
purposely perform or induce or purposely attempt to perform or	271
induce an abortion on a pregnant woman after the unborn child	272
reaches the probable post-fertilization age of twenty weeks	273
unless, prior to the performance or inducement of the abortion	274
or the attempt to perform or induce the abortion, the physician	275
determines, in the physician's good faith medical judgment, the	276
unborn child's probable post-fertilization age. The physician	277
shall make that determination after making inquiries of the	278
pregnant woman and performing any medical examinations or tests	279
of the pregnant woman the physician considers necessary as a	280
reasonably prudent physician, knowledgeable about the case and	281
medical conditions involved, would consider necessary to	282
determine the unborn child's probable post-fertilization age.	283
(B) Except in a medical emergency that prevents compliance	284

with this division, no physician shall purposely perform or	285
induce or purposely attempt to perform or induce an abortion on	286
a pregnant woman after the unborn child reaches the probable	287
post-fertilization age of twenty weeks without first entering	288
the determination made in division (A) of this section and the	289
associated findings of the medical examination and tests in the	290
medical record of the pregnant woman.	291
(C) Whoever violates division (A) of this section is	292
guilty of failure to perform probable post-fertilization age	293
testing, a misdemeanor of the fourth degree.	294
(D) The state medical board shall suspend a physician's	295
license to practice medicine in this state for a period of not	296
less than six months if the physician violates this section.	297
Sec. 2919.204. There is hereby created in the state	298
treasury the Ohio pain-capable unborn child protection act	299
litigation fund to be used by the attorney general to pay for	300
any costs and expenses incurred by the attorney general in	301
relation to actions surrounding defense of the provisions	302
ofB. of the 131st general assembly. The fund shall consist	303
of appropriations made to it and any donations, gifts, or grants	304
made to the fund. Any interest earned on the fund shall be	305
credited to the fund.	306
Sec. 2919.205. Sections 2307.54 and 2919.20 to 2919.205	307
and the provisions of section 2305.11 of the Revised Code as	308
amended or enacted by this bill shall not be construed to	309
repeal, by implication or otherwise, any law regulating or	310
restricting abortion. An abortion that complies with the	311
provisions of those sections as amended or enacted by this bill	312
but violates the provisions of any otherwise applicable	313
provision of state law shall be deemed unlawful as provided in_	314

such provision. An abortion that complies with the provisions of	315
state law regulating or restricting abortion but violates the	316
provisions of those sections as amended or enacted by this bill	317
shall be deemed unlawful as provided in those sections. If some	318
or all of the provisions of sections 2307.54 and 2919.20 to	319
2919.205 and the provisions of section 2305.11 of the Revised	320
Code as amended or enacted by this bill are ever temporarily or	321
permanently restrained or enjoined by judicial order, all other	322
provisions of state law regulating or restricting abortion shall	323
be enforced as though such restrained or enjoined provisions had	324
not been adopted; provided, however, that whenever such	325
temporary or permanent restraining order of injunction is stayed	326
or dissolved, or otherwise ceases to have effect, such	327
provisions shall have full force and effect.	328
Sec. 4731.22. (A) The state medical board, by an	329
affirmative vote of not fewer than six of its members, may	330
limit, revoke, or suspend an individual's certificate to	331
practice, refuse to grant a certificate to an individual, refuse	332
to register an individual, refuse to reinstate a certificate, or	333
reprimand or place on probation the holder of a certificate if	334
the individual or certificate holder is found by the board to	335
have committed fraud during the administration of the	336
examination for a certificate to practice or to have committed	337
fraud, misrepresentation, or deception in applying for or	338
securing any certificate to practice or certificate of	339
registration issued by the board.	340
	241
(B) The board, by an affirmative vote of not fewer than	341
six members, shall, to the extent permitted by law, limit,	342
revoke, or suspend an individual's certificate to practice,	343
refuse to register an individual, refuse to reinstate a	344
certificate, or reprimand or place on probation the holder of a	345

certificate for one or more of the following reasons:	346
(1) Permitting one's name or one's certificate to practice	347
or certificate of registration to be used by a person, group, or	348
corporation when the individual concerned is not actually	349
directing the treatment given;	350
(2) Failure to maintain minimal standards applicable to	351
the selection or administration of drugs, or failure to employ	352
acceptable scientific methods in the selection of drugs or other	353
modalities for treatment of disease;	354
(3) Selling, giving away, personally furnishing,	355
prescribing, or administering drugs for other than legal and	356
legitimate therapeutic purposes or a plea of guilty to, a	357
judicial finding of guilt of, or a judicial finding of	358
eligibility for intervention in lieu of conviction of, a	359
violation of any federal or state law regulating the possession,	360
distribution, or use of any drug;	361
(4) Willfully betraying a professional confidence.	362
For purposes of this division, "willfully betraying a	363
professional confidence" does not include providing any	364
information, documents, or reports to a child fatality review	365
board under sections 307.621 to 307.629 of the Revised Code and	366
does not include the making of a report of an employee's use of	367
a drug of abuse, or a report of a condition of an employee other	368
than one involving the use of a drug of abuse, to the employer	369
of the employee as described in division (B) of section 2305.33	370
of the Revised Code. Nothing in this division affects the	371
immunity from civil liability conferred by that section upon a	372
physician who makes either type of report in accordance with	373
division (B) of that section. As used in this division,	374

"employee," "employer," and "physician" have the same meanings	375
as in section 2305.33 of the Revised Code.	376
(5) Making a false, fraudulent, deceptive, or misleading	377
statement in the solicitation of or advertising for patients; in	378
relation to the practice of medicine and surgery, osteopathic	379
medicine and surgery, podiatric medicine and surgery, or a	380
limited branch of medicine; or in securing or attempting to	381
secure any certificate to practice or certificate of	382
registration issued by the board.	383
As used in this division, "false, fraudulent, deceptive,	384
or misleading statement" means a statement that includes a	385
misrepresentation of fact, is likely to mislead or deceive	386
because of a failure to disclose material facts, is intended or	387
is likely to create false or unjustified expectations of	388
favorable results, or includes representations or implications	389
that in reasonable probability will cause an ordinarily prudent	390
person to misunderstand or be deceived.	391
(6) A departure from, or the failure to conform to,	392
minimal standards of care of similar practitioners under the	393
same or similar circumstances, whether or not actual injury to a	394
patient is established;	395
(7) Representing, with the purpose of obtaining	396
compensation or other advantage as personal gain or for any	397
other person, that an incurable disease or injury, or other	398
incurable condition, can be permanently cured;	399
(8) The obtaining of, or attempting to obtain, money or	400
anything of value by fraudulent misrepresentations in the course	401
of practice;	402
(9) A plea of guilty to, a judicial finding of guilt of,	403

or a judicial finding of eligibility for intervention in lieu of	404
conviction for, a felony;	405
(10) Commission of an act that constitutes a felony in	406
this state, regardless of the jurisdiction in which the act was	407
committed;	408
(11) A plea of guilty to, a judicial finding of guilt of,	409
or a judicial finding of eligibility for intervention in lieu of	410
conviction for, a misdemeanor committed in the course of	411
practice;	412
(12) Commission of an act in the course of practice that	413
constitutes a misdemeanor in this state, regardless of the	414
jurisdiction in which the act was committed;	415
(13) A plea of guilty to, a judicial finding of guilt of,	416
or a judicial finding of eligibility for intervention in lieu of	417
conviction for, a misdemeanor involving moral turpitude;	418
conviction for, a misdemeanor involving moral curpitude,	410
(14) Commission of an act involving moral turpitude that	419
constitutes a misdemeanor in this state, regardless of the	420
jurisdiction in which the act was committed;	421
(15) Violation of the conditions of limitation placed by	422
the board upon a certificate to practice;	423
(16) Failure to pay license repoyal face enceified in this	424
(16) Failure to pay license renewal fees specified in this	
chapter;	425
(17) Except as authorized in section 4731.31 of the	426
Revised Code, engaging in the division of fees for referral of	427
patients, or the receiving of a thing of value in return for a	428
specific referral of a patient to utilize a particular service	429
or business;	430
(18) Subject to section 4731.226 of the Revised Code,	431

violation of any provision of a code of ethics of the American	432
medical association, the American osteopathic association, the	433
American podiatric medical association, or any other national	434
professional organizations that the board specifies by rule. The	435
state medical board shall obtain and keep on file current copies	436
of the codes of ethics of the various national professional	437
organizations. The individual whose certificate is being	438
suspended or revoked shall not be found to have violated any	439
provision of a code of ethics of an organization not appropriate	440
to the individual's profession.	441
For purposes of this division, a "provision of a code of	442
ethics of a national professional organization" does not include	443
any provision that would preclude the making of a report by a	444
physician of an employee's use of a drug of abuse, or of a	445
condition of an employee other than one involving the use of a	446
drug of abuse, to the employer of the employee as described in	447
division (B) of section 2305.33 of the Revised Code. Nothing in	448
this division affects the immunity from civil liability	449
conferred by that section upon a physician who makes either type	450
of report in accordance with division (B) of that section. As	451
used in this division, "employee," "employer," and "physician"	452
have the same meanings as in section 2305.33 of the Revised	453
Code.	454
(19) Inability to practice according to acceptable and	455
prevailing standards of care by reason of mental illness or	456
physical illness, including, but not limited to, physical	457
deterioration that adversely affects cognitive, motor, or	458
perceptive skills.	459

In enforcing this division, the board, upon a showing of a

possible violation, may compel any individual authorized to

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practice by this chapter or who has submitted an application	462
pursuant to this chapter to submit to a mental examination,	463
physical examination, including an HIV test, or both a mental	464
and a physical examination. The expense of the examination is	465
the responsibility of the individual compelled to be examined.	466
Failure to submit to a mental or physical examination or consent	467
to an HIV test ordered by the board constitutes an admission of	468
the allegations against the individual unless the failure is due	469
to circumstances beyond the individual's control, and a default	470
and final order may be entered without the taking of testimony	471
or presentation of evidence. If the board finds an individual	472
unable to practice because of the reasons set forth in this	473
division, the board shall require the individual to submit to	474
care, counseling, or treatment by physicians approved or	475
designated by the board, as a condition for initial, continued,	476
reinstated, or renewed authority to practice. An individual	477
affected under this division shall be afforded an opportunity to	478
demonstrate to the board the ability to resume practice in	479
compliance with acceptable and prevailing standards under the	480
provisions of the individual's certificate. For the purpose of	481
this division, any individual who applies for or receives a	482
certificate to practice under this chapter accepts the privilege	483
of practicing in this state and, by so doing, shall be deemed to	484
have given consent to submit to a mental or physical examination	485
when directed to do so in writing by the board, and to have	486
waived all objections to the admissibility of testimony or	487
examination reports that constitute a privileged communication.	488
(20) Except when civil penalties are imposed under section	489
4731.225 or 4731.281 of the Revised Code, and subject to section	490
4731.226 of the Revised Code, violating or attempting to	491
violate, directly or indirectly, or assisting in or abetting the	492

violatio	n of,	or	conspiring	to vi	olate,	any	provisions	of	this	493
chapter	or an	ny ru	le promulga	ated b	y the	board	d.			494

This division does not apply to a violation or attempted 495 violation of, assisting in or abetting the violation of, or a 496 conspiracy to violate, any provision of this chapter or any rule 497 adopted by the board that would preclude the making of a report 498 by a physician of an employee's use of a drug of abuse, or of a 499 condition of an employee other than one involving the use of a 500 drug of abuse, to the employer of the employee as described in 501 division (B) of section 2305.33 of the Revised Code. Nothing in 502 this division affects the immunity from civil liability 503 conferred by that section upon a physician who makes either type 504 of report in accordance with division (B) of that section. As 505 used in this division, "employee," "employer," and "physician" 506 have the same meanings as in section 2305.33 of the Revised 507 Code. 508

- (21) The violation of section 3701.79 of the Revised Code
 or of any abortion rule adopted by the public health council
 pursuant to section 3701.341 of the Revised Code;
 510
- (22) Any of the following actions taken by an agency 512 responsible for authorizing, certifying, or regulating an 513 individual to practice a health care occupation or provide 514 health care services in this state or another jurisdiction, for 515 any reason other than the nonpayment of fees: the limitation, 516 revocation, or suspension of an individual's license to 517 practice; acceptance of an individual's license surrender; 518 denial of a license; refusal to renew or reinstate a license; 519 imposition of probation; or issuance of an order of censure or 520 other reprimand; 521
 - (23) The violation of section 2919.12 of the Revised Code

or the performance or inducement of an abortion upon a pregnant	523
woman with actual knowledge that the conditions specified in	524
division (B) of section 2317.56 of the Revised Code have not	525
been satisfied or with a heedless indifference as to whether	526
those conditions have been satisfied, unless an affirmative	527
defense as specified in division (H)(2) of that section would	528
apply in a civil action authorized by division (H)(1) of that	529
section;	530
(24) The revocation, suspension, restriction, reduction,	531
or termination of clinical privileges by the United States	532
department of defense or department of veterans affairs or the	533
termination or suspension of a certificate of registration to	534
prescribe drugs by the drug enforcement administration of the	535
United States department of justice;	536
(25) Termination or suspension from participation in the	537
medicare or medicaid programs by the department of health and	538
human services or other responsible agency for any act or acts	539
that also would constitute a violation of division (B)(2), (3),	540
(6), (8), or (19) of this section;	541
(26) Impairment of ability to practice according to	542
acceptable and prevailing standards of care because of habitual	543
or excessive use or abuse of drugs, alcohol, or other substances	544
that impair ability to practice.	545
For the purposes of this division, any individual	546
authorized to practice by this chapter accepts the privilege of	547
practicing in this state subject to supervision by the board. By	548
filing an application for or holding a certificate to practice	549
under this chapter, an individual shall be deemed to have given	550
consent to submit to a mental or physical examination when	551

ordered to do so by the board in writing, and to have waived all

objectio	ns to	the	admiss	sibility	of	testimony	or	examination	553
reports	that	const	citute	priviled	ged	communicat	ior	ns.	554

If it has reason to believe that any individual authorized 555 to practice by this chapter or any applicant for certification 556 to practice suffers such impairment, the board may compel the 557 individual to submit to a mental or physical examination, or 558 both. The expense of the examination is the responsibility of 559 the individual compelled to be examined. Any mental or physical 560 examination required under this division shall be undertaken by 561 562 a treatment provider or physician who is qualified to conduct the examination and who is chosen by the board. 563

Failure to submit to a mental or physical examination 564 ordered by the board constitutes an admission of the allegations 565 against the individual unless the failure is due to 566 circumstances beyond the individual's control, and a default and 567 final order may be entered without the taking of testimony or 568 presentation of evidence. If the board determines that the 569 individual's ability to practice is impaired, the board shall 570 suspend the individual's certificate or deny the individual's 571 application and shall require the individual, as a condition for 572 initial, continued, reinstated, or renewed certification to 573 574 practice, to submit to treatment.

Before being eligible to apply for reinstatement of a 575 certificate suspended under this division, the impaired 576 practitioner shall demonstrate to the board the ability to 577 resume practice in compliance with acceptable and prevailing 578 standards of care under the provisions of the practitioner's 579 certificate. The demonstration shall include, but shall not be 580 limited to, the following: 581

(a) Certification from a treatment provider approved under

section 4731.25 of the Revised Code that the individual has	583
successfully completed any required inpatient treatment;	584
(b) Evidence of continuing full compliance with an	585
aftercare contract or consent agreement;	586
(c) Two written reports indicating that the individual's	587
ability to practice has been assessed and that the individual	588
has been found capable of practicing according to acceptable and	589
prevailing standards of care. The reports shall be made by	590
individuals or providers approved by the board for making the	591
assessments and shall describe the basis for their	592
determination.	593
The board may reinstate a certificate suspended under this	594
division after that demonstration and after the individual has	595
entered into a written consent agreement.	596
When the impaired practitioner resumes practice, the board	597
shall require continued monitoring of the individual. The	598
monitoring shall include, but not be limited to, compliance with	599
the written consent agreement entered into before reinstatement	600
or with conditions imposed by board order after a hearing, and,	601
upon termination of the consent agreement, submission to the	602
board for at least two years of annual written progress reports	603
made under penalty of perjury stating whether the individual has	604
maintained sobriety.	605
(27) A second or subsequent violation of section 4731.66	606
or 4731.69 of the Revised Code;	607
(28) Except as provided in division (N) of this section:	608
(a) Waiving the payment of all or any part of a deductible	609
or copayment that a patient, pursuant to a health insurance or	610
health care policy, contract, or plan that covers the	611

individual's services, otherwise would be required to pay if the	612
waiver is used as an enticement to a patient or group of	613
patients to receive health care services from that individual;	614
(b) Advertising that the individual will waive the payment	615
of all or any part of a deductible or copayment that a patient,	616
pursuant to a health insurance or health care policy, contract,	617
or plan that covers the individual's services, otherwise would	618
be required to pay.	619
(29) Failure to use universal blood and body fluid	620
precautions established by rules adopted under section 4731.051	621
of the Revised Code;	622
(30) Failure to provide notice to, and receive	623
acknowledgment of the notice from, a patient when required by	624
section 4731.143 of the Revised Code prior to providing	625
nonemergency professional services, or failure to maintain that	626
notice in the patient's file;	627
(31) Failure of a physician supervising a physician	628
assistant to maintain supervision in accordance with the	629
requirements of Chapter 4730. of the Revised Code and the rules	630
adopted under that chapter;	631
(32) Failure of a physician or podiatrist to enter into a	632
standard care arrangement with a clinical nurse specialist,	633
certified nurse-midwife, or certified nurse practitioner with	634
whom the physician or podiatrist is in collaboration pursuant to	635
section 4731.27 of the Revised Code or failure to fulfill the	636
responsibilities of collaboration after entering into a standard	637
<pre>care arrangement;</pre>	638
(33) Failure to comply with the terms of a consult	639
agreement entered into with a pharmacist pursuant to section	640

4729.39 of the Revised Code;	641
(34) Failure to cooperate in an investigation conducted by	642
the board under division (F) of this section, including failure	643
to comply with a subpoena or order issued by the board or	644
failure to answer truthfully a question presented by the board	645
in an investigative interview, an investigative office	646
conference, at a deposition, or in written interrogatories,	647
except that failure to cooperate with an investigation shall not	648
constitute grounds for discipline under this section if a court	649
of competent jurisdiction has issued an order that either	650
quashes a subpoena or permits the individual to withhold the	651
testimony or evidence in issue;	652
(35) Failure to supervise an oriental medicine	653
practitioner or acupuncturist in accordance with Chapter 4762.	654
of the Revised Code and the board's rules for providing that	655
supervision;	656
(36) Failure to supervise an anesthesiologist assistant in	657
accordance with Chapter 4760. of the Revised Code and the	658
board's rules for supervision of an anesthesiologist assistant;	659
(37) Assisting suicide as defined in section 3795.01 of	660
the Revised Code;	661
(38) Failure to comply with the requirements of section	662
2317.561 of the Revised Code;	663
2017. Coll of the Nevisea coae,	000
(39) Failure to supervise a radiologist assistant in	664
accordance with Chapter 4774. of the Revised Code and the	665
board's rules for supervision of radiologist assistants;	666
(40) Performing or inducing an abortion at an office or	667
facility with knowledge that the office or facility fails to	668
post the notice required under section 3701.791 of the Revised	669

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Code;	670
(41) Failure to comply with the standards and procedures	671
established in rules under section 4731.054 of the Revised Code	672
for the operation of or the provision of care at a pain	673
management clinic;	674
(42) Failure to comply with the standards and procedures	675
established in rules under section 4731.054 of the Revised Code	676
for providing supervision, direction, and control of individuals	677
at a pain management clinic;	678
(43) Failure to comply with the requirements of section	679
4729.79 of the Revised Code, unless the state board of pharmacy	680
no longer maintains a drug database pursuant to section 4729.75	681
of the Revised Code;	682
(44) Failure to comply with the requirements of section	683
2919.171 <u>, 2919.202</u> , or 2919.203 of the Revised Code or failure	684
to submit to the department of health in accordance with a court	685
order a complete report as described in section 2919.171 <u>or</u>	686
2919.202 of the Revised Code;	687
(45) Practicing at a facility that is subject to licensure	688
as a category III terminal distributor of dangerous drugs with a	689
pain management clinic classification unless the person	690
operating the facility has obtained and maintains the license	691
with the classification;	692
(46) Owning a facility that is subject to licensure as a	693
category III terminal distributor of dangerous drugs with a pain	694
management clinic classification unless the facility is licensed	695
with the classification;	696
(47) Failure to comply with the requirement regarding	697
maintaining notes described in division (B) of section 2919.191	698

of the Revised Code or failure to satisfy the requirements of	699
section 2919.191 of the Revised Code prior to performing or	700
inducing an abortion upon a pregnant woman;	701
(48) Failure to comply with the requirements in section	702
3719.061 of the Revised Code before issuing for a minor a	703
prescription for an opioid analgesic, as defined in section	704
3719.01 of the Revised Code.	705
(C) Disciplinary actions taken by the board under	706
divisions (A) and (B) of this section shall be taken pursuant to	707
an adjudication under Chapter 119. of the Revised Code, except	708
that in lieu of an adjudication, the board may enter into a	709
consent agreement with an individual to resolve an allegation of	710
a violation of this chapter or any rule adopted under it. A	711
consent agreement, when ratified by an affirmative vote of not	712
fewer than six members of the board, shall constitute the	713
findings and order of the board with respect to the matter	714
addressed in the agreement. If the board refuses to ratify a	715
consent agreement, the admissions and findings contained in the	716
consent agreement shall be of no force or effect.	717
A telephone conference call may be utilized for	718
ratification of a consent agreement that revokes or suspends an	719
individual's certificate to practice. The telephone conference	720
call shall be considered a special meeting under division (F) of	721
section 121.22 of the Revised Code.	722
If the board takes disciplinary action against an	723
individual under division (B) of this section for a second or	724
subsequent plea of guilty to, or judicial finding of guilt of, a	725
violation of section 2919.123 of the Revised Code, the	726
disciplinary action shall consist of a suspension of the	727

individual's certificate to practice for a period of at least

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one year or, if determined appropriate by the board, a more serious sanction involving the individual's certificate to practice. Any consent agreement entered into under this division with an individual that pertains to a second or subsequent plea of guilty to, or judicial finding of guilt of, a violation of that section shall provide for a suspension of the individual's certificate to practice for a period of at least one year or, if determined appropriate by the board, a more serious sanction involving the individual's certificate to practice.

- (D) For purposes of divisions (B)(10), (12), and (14) of this section, the commission of the act may be established by a finding by the board, pursuant to an adjudication under Chapter 119. of the Revised Code, that the individual committed the act. The board does not have jurisdiction under those divisions if the trial court renders a final judgment in the individual's favor and that judgment is based upon an adjudication on the merits. The board has jurisdiction under those divisions if the trial court issues an order of dismissal upon technical or procedural grounds.
- (E) The sealing of conviction records by any court shall have no effect upon a prior board order entered under this section or upon the board's jurisdiction to take action under this section if, based upon a plea of guilty, a judicial finding of guilt, or a judicial finding of eligibility for intervention in lieu of conviction, the board issued a notice of opportunity for a hearing prior to the court's order to seal the records. The board shall not be required to seal, destroy, redact, or otherwise modify its records to reflect the court's sealing of conviction records.
 - (F) (1) The board shall investigate evidence that appears

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to show that a person has violated any provision of this chapter 759 or any rule adopted under it. Any person may report to the board 760 in a signed writing any information that the person may have 761 that appears to show a violation of any provision of this 762 chapter or any rule adopted under it. In the absence of bad 763 faith, any person who reports information of that nature or who 764 testifies before the board in any adjudication conducted under 765 Chapter 119. of the Revised Code shall not be liable in damages 766 in a civil action as a result of the report or testimony. Each 767 complaint or allegation of a violation received by the board 768 shall be assigned a case number and shall be recorded by the 769 board. 770

- (2) Investigations of alleged violations of this chapter 771 or any rule adopted under it shall be supervised by the 772 supervising member elected by the board in accordance with 773 section 4731.02 of the Revised Code and by the secretary as 774 provided in section 4731.39 of the Revised Code. The president 775 may designate another member of the board to supervise the 776 investigation in place of the supervising member. No member of 777 the board who supervises the investigation of a case shall 778 participate in further adjudication of the case. 779
- (3) In investigating a possible violation of this chapter 780 or any rule adopted under this chapter, or in conducting an 781 inspection under division (E) of section 4731.054 of the Revised 782 Code, the board may question witnesses, conduct interviews, 783 administer oaths, order the taking of depositions, inspect and 784 copy any books, accounts, papers, records, or documents, issue 785 subpoenas, and compel the attendance of witnesses and production 786 of books, accounts, papers, records, documents, and testimony, 787 except that a subpoena for patient record information shall not 788 be issued without consultation with the attorney general's 789

office and approval of the secretary and supervising member of 790 the board.

- (a) Before issuance of a subpoena for patient record 792 information, the secretary and supervising member shall 793 determine whether there is probable cause to believe that the 794 complaint filed alleges a violation of this chapter or any rule 795 adopted under it and that the records sought are relevant to the 796 alleged violation and material to the investigation. The 797 798 subpoena may apply only to records that cover a reasonable period of time surrounding the alleged violation. 799
- (b) On failure to comply with any subpoena issued by the 800 board and after reasonable notice to the person being 801 subpoenaed, the board may move for an order compelling the 802 production of persons or records pursuant to the Rules of Civil 803 Procedure.
- (c) A subpoena issued by the board may be served by a 805 sheriff, the sheriff's deputy, or a board employee designated by 806 the board. Service of a subpoena issued by the board may be made 807 by delivering a copy of the subpoena to the person named 808 therein, reading it to the person, or leaving it at the person's 809 usual place of residence, usual place of business, or address on 810 file with the board. When serving a subpoena to an applicant for 811 or the holder of a certificate issued under this chapter, 812 service of the subpoena may be made by certified mail, return 813 receipt requested, and the subpoena shall be deemed served on 814 the date delivery is made or the date the person refuses to 815 accept delivery. If the person being served refuses to accept 816 the subpoena or is not located, service may be made to an 817 attorney who notifies the board that the attorney is 818 representing the person. 819

(d) A sheriff's deputy who serves a subpoena shall receive	820
the same fees as a sheriff. Each witness who appears before the	821
board in obedience to a subpoena shall receive the fees and	822
mileage provided for under section 119.094 of the Revised Code.	823
(4) All hearings, investigations, and inspections of the	824
board shall be considered civil actions for the purposes of	825
section 2305.252 of the Revised Code.	826
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(5) A report required to be submitted to the board under	827
this chapter, a complaint, or information received by the board	828
pursuant to an investigation or pursuant to an inspection under	829
division (E) of section 4731.054 of the Revised Code is	830
confidential and not subject to discovery in any civil action.	831
The board shall conduct all investigations or inspections	832
and proceedings in a manner that protects the confidentiality of	833
patients and persons who file complaints with the board. The	834
board shall not make public the names or any other identifying	835
information about patients or complainants unless proper consent	836
is given or, in the case of a patient, a waiver of the patient	837
privilege exists under division (B) of section 2317.02 of the	838
Revised Code, except that consent or a waiver of that nature is	839
not required if the board possesses reliable and substantial	840
evidence that no bona fide physician-patient relationship	841
exists.	842
The board may share any information it receives pursuant	843
to an investigation or inspection, including patient records and	844
patient record information, with law enforcement agencies, other	845
licensing boards, and other governmental agencies that are	846
prosecuting, adjudicating, or investigating alleged violations	847
of statutes or administrative rules. An agency or board that	848

receives the information shall comply with the same requirements

regarding confidentiality as those with which the state medical	850
board must comply, notwithstanding any conflicting provision of	851
the Revised Code or procedure of the agency or board that	852
applies when it is dealing with other information in its	853
possession. In a judicial proceeding, the information may be	854
admitted into evidence only in accordance with the Rules of	855
Evidence, but the court shall require that appropriate measures	856
are taken to ensure that confidentiality is maintained with	857
respect to any part of the information that contains names or	858
other identifying information about patients or complainants	859
whose confidentiality was protected by the state medical board	860
when the information was in the board's possession. Measures to	861
ensure confidentiality that may be taken by the court include	862
sealing its records or deleting specific information from its	863
records.	864
(6) On a quarterly basis, the board shall prepare a report	865
that documents the disposition of all cases during the preceding	866
three months. The report shall contain the following information	867
for each case with which the board has completed its activities:	868
(a) The case number assigned to the complaint or alleged	869
violation;	870
(b) The type of certificate to practice, if any, held by	871
the individual against whom the complaint is directed;	872
(c) A description of the allegations contained in the	873
complaint;	874
complaint,	0 / 4
(d) The disposition of the case.	875
The report shall state how many cases are still pending	876
and shall be prepared in a manner that protects the identity of	877

each person involved in each case. The report shall be a public 878

record under section 149.43 of the Revised Code.	879
(G) If the secretary and supervising member determine both	880
of the following, they may recommend that the board suspend an	881
individual's certificate to practice without a prior hearing:	882
(1) That there is clear and convincing evidence that an	883
individual has violated division (B) of this section;	884
(2) That the individual's continued practice presents a	885
danger of immediate and serious harm to the public.	886
Written allegations shall be prepared for consideration by	887
the board. The board, upon review of those allegations and by an	888
affirmative vote of not fewer than six of its members, excluding	889
the secretary and supervising member, may suspend a certificate	890
without a prior hearing. A telephone conference call may be	891
utilized for reviewing the allegations and taking the vote on	892
the summary suspension.	893
The board shall issue a written order of suspension by	894
certified mail or in person in accordance with section 119.07 of	895
the Revised Code. The order shall not be subject to suspension	896
by the court during pendency of any appeal filed under section	897
119.12 of the Revised Code. If the individual subject to the	898
summary suspension requests an adjudicatory hearing by the	899
board, the date set for the hearing shall be within fifteen	900
days, but not earlier than seven days, after the individual	901
requests the hearing, unless otherwise agreed to by both the	902
board and the individual.	903
Any summary suspension imposed under this division shall	904
remain in effect, unless reversed on appeal, until a final	905
adjudicative order issued by the board pursuant to this section	906
and Chapter 119. of the Revised Code becomes effective. The	907

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- (H) If the board takes action under division (B) (9), (11), 913 or (13) of this section and the judicial finding of guilt, 914 quilty plea, or judicial finding of eligibility for intervention 915 in lieu of conviction is overturned on appeal, upon exhaustion 916 of the criminal appeal, a petition for reconsideration of the 917 order may be filed with the board along with appropriate court 918 documents. Upon receipt of a petition of that nature and 919 supporting court documents, the board shall reinstate the 920 individual's certificate to practice. The board may then hold an 921 adjudication under Chapter 119. of the Revised Code to determine 922 whether the individual committed the act in question. Notice of 923 an opportunity for a hearing shall be given in accordance with 924 Chapter 119. of the Revised Code. If the board finds, pursuant 925 to an adjudication held under this division, that the individual 926 committed the act or if no hearing is requested, the board may 927 order any of the sanctions identified under division (B) of this 928 section. 929
- (I) The certificate to practice issued to an individual under this chapter and the individual's practice in this state are automatically suspended as of the date of the individual's second or subsequent plea of guilty to, or judicial finding of guilt of, a violation of section 2919.123 of the Revised Code, or the date the individual pleads guilty to, is found by a judge or jury to be guilty of, or is subject to a judicial finding of eligibility for intervention in lieu of conviction in this state or treatment or intervention in lieu of conviction in another

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jurisdiction for any of the following criminal offenses in this	939
state or a substantially equivalent criminal offense in another	940
jurisdiction: aggravated murder, murder, voluntary manslaughter,	941
felonious assault, kidnapping, rape, sexual battery, gross	942
sexual imposition, aggravated arson, aggravated robbery, or	943
aggravated burglary. Continued practice after suspension shall	944
be considered practicing without a certificate.	945

The board shall notify the individual subject to the

suspension by certified mail or in person in accordance with

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section 119.07 of the Revised Code. If an individual whose

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certificate is automatically suspended under this division fails

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to make a timely request for an adjudication under Chapter 119.

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of the Revised Code, the board shall do whichever of the

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following is applicable:

- (1) If the automatic suspension under this division is for 953 a second or subsequent plea of guilty to, or judicial finding of 954 guilt of, a violation of section 2919.123 of the Revised Code, 955 the board shall enter an order suspending the individual's 956 certificate to practice for a period of at least one year or, if 957 determined appropriate by the board, imposing a more serious 958 sanction involving the individual's certificate to practice. 959
- (2) In all circumstances in which division (I)(1) of this section does not apply, enter a final order permanently revoking the individual's certificate to practice.

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(J) If the board is required by Chapter 119. of the 963
Revised Code to give notice of an opportunity for a hearing and 964
if the individual subject to the notice does not timely request 965
a hearing in accordance with section 119.07 of the Revised Code, 966
the board is not required to hold a hearing, but may adopt, by 967
an affirmative vote of not fewer than six of its members, a 968

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final order that contains the board's findings. In that final 969 order, the board may order any of the sanctions identified under 970 division (A) or (B) of this section. 971

(K) Any action taken by the board under division (B) of 972

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- (K) Any action taken by the board under division (B) of this section resulting in a suspension from practice shall be accompanied by a written statement of the conditions under which the individual's certificate to practice may be reinstated. The board shall adopt rules governing conditions to be imposed for reinstatement. Reinstatement of a certificate suspended pursuant to division (B) of this section requires an affirmative vote of not fewer than six members of the board.
- (L) When the board refuses to grant a certificate to an 980 applicant, revokes an individual's certificate to practice, 981 refuses to register an applicant, or refuses to reinstate an 982 individual's certificate to practice, the board may specify that 983 its action is permanent. An individual subject to a permanent 984 action taken by the board is forever thereafter ineligible to 985 hold a certificate to practice and the board shall not accept an 986 application for reinstatement of the certificate or for issuance 987 of a new certificate. 988
- (M) Notwithstanding any other provision of the RevisedCode, all of the following apply:
- (1) The surrender of a certificate issued under this 991 chapter shall not be effective unless or until accepted by the 992 board. A telephone conference call may be utilized for 993 acceptance of the surrender of an individual's certificate to 994 practice. The telephone conference call shall be considered a 995 special meeting under division (F) of section 121.22 of the 996 Revised Code. Reinstatement of a certificate surrendered to the 997 board requires an affirmative vote of not fewer than six members 998

of the board.	999
(2) An application for a certificate made under the	1000
provisions of this chapter may not be withdrawn without approval	1001
of the board.	1002
(3) Failure by an individual to renew a certificate of	1003
registration in accordance with this chapter shall not remove or	1004
limit the board's jurisdiction to take any disciplinary action	1005
under this section against the individual.	1006
(4) At the request of the board, a certificate holder	1007
shall immediately surrender to the board a certificate that the	1008
board has suspended, revoked, or permanently revoked.	1009
(N) Sanctions shall not be imposed under division (B) (28)	1010
of this section against any person who waives deductibles and	1011
copayments as follows:	1012
(1) In compliance with the health benefit plan that	1013
expressly allows such a practice. Waiver of the deductibles or	1014
copayments shall be made only with the full knowledge and	1015
consent of the plan purchaser, payer, and third-party	1016
administrator. Documentation of the consent shall be made	1017
available to the board upon request.	1018
(2) For professional services rendered to any other person	1019
authorized to practice pursuant to this chapter, to the extent	1020
allowed by this chapter and rules adopted by the board.	1021
(O) Under the board's investigative duties described in	1022
this section and subject to division (F) of this section, the	1023
board shall develop and implement a quality intervention program	1024
designed to improve through remedial education the clinical and	1025
communication skills of individuals authorized under this	1026
chapter to practice medicine and surgery, osteopathic medicine	1027

and surgery, and podiatric medicine and surgery. In developing	1028
and implementing the quality intervention program, the board may	1029
do all of the following:	1030
(1) Offer in appropriate cases as determined by the board	1031
an educational and assessment program pursuant to an	1032
investigation the board conducts under this section;	1033
(2) Select providers of educational and assessment	1034
services, including a quality intervention program panel of case	1035
reviewers;	1036
(3) Make referrals to educational and assessment service	1037
providers and approve individual educational programs	1038
recommended by those providers. The board shall monitor the	1039
progress of each individual undertaking a recommended individual	1040
educational program.	1041
(4) Determine what constitutes successful completion of an	1042
individual educational program and require further monitoring of	1043
the individual who completed the program or other action that	1044
the board determines to be appropriate;	1045
(5) Adopt rules in accordance with Chapter 119. of the	1046
Revised Code to further implement the quality intervention	1047
program.	1048
An individual who participates in an individual	1049
educational program pursuant to this division shall pay the	1050
financial obligations arising from that educational program.	1051
Section 2. That existing sections 2305.11 and 4731.22 of	1052
the Revised Code are hereby repealed.	1053