ANACT

To amend sections 2925.61, 3707.56, 3707.561, 3707.562, 3712.01, 3712.031, 3712.061, 3719.05, 3719.06, 4723.484, 4723.485, 4723.486, 4729.01, 4729.29, 4729.44, 4729.51, 4729.511, 4729.514, 4729.515, 4729.541, 4730.434, 4730.435, 4730.436, 4731.36, 4731.94, 4731.941, 4731.942, 4731.943, 4765.44, 4765.45, and 4765.52 of the Revised Code and to amend Section 337.205 of H.B. 110 of the 134th General Assembly regarding electronic prescriptions and schedule II controlled substances, terminology related to overdose reversal drugs, a pilot program for dispensing controlled substances in lockable containers, out-of-state physician consultations, and pediatric respite care programs.

Be it enacted by the General Assembly of the State of Ohio:

Section 1. That sections 2925.61, 3707.56, 3707.561, 3707.562, 3712.01, 3712.031, 3712.061, 3719.05, 3719.06, 4723.484, 4723.485, 4723.486, 4729.01, 4729.29, 4729.44, 4729.51, 4729.511, 4729.514, 4729.515, 4729.541, 4730.434, 4730.435, 4730.436, 4731.36, 4731.94, 4731.941, 4731.942, 4731.943, 4765.44, 4765.45, and 4765.52 of the Revised Code be amended to read as follows:

Sec. 2925.61. (A) As used in this section:

- (1) "Law enforcement agency" means a government entity that employs peace officers to perform law enforcement duties.
 - (2) "Licensed health professional" means all of the following:
 - (a) A physician;
- (b) A physician assistant who is licensed under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority;
- (c) An advanced practice registered nurse who holds a current, valid license issued under Chapter 4723. of the Revised Code and is designated as a clinical nurse specialist, certified nursemidwife, or certified nurse practitioner.
- (3) "Overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
 - (4) "Peace officer" has the same meaning as in section 2921.51 of the Revised Code.
- (4)—(5)_"Physician" means an individual who is authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery.
- (B) A family member, friend, or other individual who is in a position to assist an individual who is apparently experiencing or at risk of experiencing an opioid-related overdose is not subject to

criminal prosecution for a violation of section 4731.41 of the Revised Code, is not subject to criminal prosecution under this chapter, and is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that allegedly arises from obtaining, maintaining, accessing, or administering naloxoneoverdose reversal drugs, if the individual, acting in good faith, does all of the following:

- (1) Obtains naloxone overdose reversal drugs pursuant to a prescription issued by a licensed health professional, or obtains naloxone overdose reversal drugs from one of the following:
 - (a) A licensed health professional;
- (b) An individual who is authorized to personally furnish naloxone overdose reversal drugs by any of the following:
 - (i) A physician under section 4731.941 of the Revised Code;
 - (ii) An advanced practice registered nurse under section 4723.485 of the Revised Code;
 - (iii) A physician assistant under section 4730.435 of the Revised Code;
 - (iv) A board of health under section 3707.561 of the Revised Code.
- (c) A pharmacist or pharmacy intern who is authorized by a physician or board of health under section 4729.44 of the Revised Code to dispense naloxone overdose reversal drugs without a prescription.
- (2) Administers the naloxone an overdose reversal drug obtained as described in division (B) (1) of this section to an individual who is apparently experiencing an opioid-related overdose;
- (3) Attempts to summon emergency services as soon as practicable either before or after administering the naloxoneoverdose reversal drug.
- (C) An individual who is an employee, volunteer, or contractor of a service entity, as defined in section 4729.514 of the Revised Code, and has been authorized under section 3707.562, 4723.486, 4730.436, or 4731.943 of the Revised Code to administer naloxone overdose reversal drugs is not subject to criminal prosecution for a violation of section 4731.41 of the Revised Code or criminal prosecution under this chapter, if the individual, acting in good faith, does all of the following:
- (1) Obtains naloxone overdose reversal drugs from the service entity of which the individual is an employee, volunteer, or contractor;
- (2) Administers the naloxone an overdose reversal drug obtained to an individual who is apparently experiencing an opioid-related overdose;
- (3) Attempts to summon emergency services as soon as practicable either before or after administering the <u>naloxone</u> overdose reversal drug.
- (D) Divisions (B) and (C) of this section do not apply to a peace officer or to an emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic, as defined in section 4765.01 of the Revised Code.
- (E)(1) If a peace officer, acting in good faith, administers naloxone an overdose reversal drug to an individual who is apparently experiencing an opioid-related overdose, both of the following apply:
- (a) The peace officer is not subject to administrative action, criminal prosecution for a violation of section 4731.41 of the Revised Code, or criminal prosecution under this chapter.
- (b) The peace officer is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that allegedly arises from obtaining, maintaining, accessing,

or administering the naloxone overdose reversal drug.

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- (2) Division (E)(1)(b) of this section does not eliminate, limit, or reduce any other immunity or defense that an entity or person may be entitled to under section 9.86 or Chapter 2744. of the Revised Code, any other provision of the Revised Code, or the common law of this state.
- Sec. 3707.56. (A) As used in this section and in sections 3707.561 and 3707.562 of the Revised Code, "board:
- (1) "Board of health" means a board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code.
- (2) "Overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
- (B) A board of health, through a physician serving as the board's health commissioner or medical director, may authorize pharmacists and pharmacy interns practicing pharmacy in a county that includes all or part of the health district represented by the board to use the protocol developed pursuant to rules adopted under section 4729.44 of the Revised Code for the purpose of dispensing naloxone overdose reversal drugs under section 4729.44 of the Revised Code.
- Sec. 3707.561. (A) A board of health that establishes a protocol under division (C) of this section may, through a physician serving as the board's health commissioner or medical director, authorize one or more individuals to personally furnish a supply of naloxone overdose reversal drugs pursuant to the protocol to either of the following:
- (1) An individual who there is reason to believe is experiencing or at risk of experiencing an opioid-related overdose;
- (2) A family member, friend, or other person in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (B)(1) An individual authorized under this section may personally furnish naloxone overdose reversal drugs to an individual described in division (A) of this section if both of the following conditions are met:
- (a) The authorized individual complies with the protocol established by the authorizing board, including having completed the training required by the protocol.
- (b) The authorized individual instructs the individual to whom naloxone is overdose reversal drugs are furnished to summon emergency services as soon as practicable either before or after administering naloxone such drugs.
- (2) An individual authorized under this section to personally furnish <u>naloxone</u> <u>overdose</u> <u>reversal drugs</u> may do so without having examined the individual to whom it may be administered.
- (C) A board of health, through a physician serving as the board's health commissioner or medical director, may establish a protocol for personally furnishing naloxone overdose reversal drugs under division (A) of this section. The protocol must be in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs <u>specified in the protocol</u>;
- (2) Precautions and contraindications concerning furnishing—naloxone_overdose_reversal_drugs;
- (3) Any limitations the board specifies concerning the individuals to whom naloxoneoverdose reversal drugs may be furnished;

- (4) The naloxone dosage that may be furnished and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual can be authorized to furnish naloxone overdose reversal drugs;
- (7) Any instructions or training the authorized individual must provide to an individual to whom naloxone is overdose reversal drugs are furnished.
- (D) A board that in good faith authorizes an individual to personally furnish naloxoneoverdose reversal drugs under this section is not liable for damages in any civil action for any act or omission of the individual to whom the naloxone is drugs are furnished.

A physician serving as a board's health commissioner or medical director who in good faith authorizes an individual to personally furnish naloxone overdose reversal drugs under this section is not liable for or subject to any of the following for any act or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

An individual authorized under this section to personally furnish naloxone overdose reversal drugs who does so in good faith is not liable for or subject to any of the following for any act or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 3707.562. (A) As used in this section, "service entity" has the same meaning as in section 4729.514 of the Revised Code.

- (B) A board of health that has established a protocol under division (D) of this section may authorize an individual who is an employee, volunteer, or contractor of a service entity to administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose.
- (C) An individual authorized by a board of health under this section may administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose if both of the following conditions are met:
 - (1) The authorized individual complies with the protocol established by the board.
- (2) The authorized individual summons emergency services as soon as practicable either before or after administering the naloxone an overdose reversal drug.
- (D) A board of health, through a physician serving as the board's health commissioner or medical director, may establish a protocol for administering naloxone-overdose reversal drugs under this section. The protocol must be established in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs specified in the protocol;
- (2) Precautions and contraindications concerning the administration of <u>naloxone_overdose_reversal_drugs</u>;
- (3) Any limitations the board specifies concerning the individuals to whom naloxone-overdose reversal drugs may be administered;
- (4) The naloxone dosage that may be administered and any variation in the dosage based on circumstances specified in the protocol;

- (5) Labeling, storage, record keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual can be authorized to administer-naloxone overdose reversal drugs.
- (E) A board that in good faith authorizes an individual to administer naloxone overdose reversal drugs under this section is not liable for damages in any civil action for any act or omission of the authorized individual.

A physician serving as a board's health commissioner or medical director who in good faith authorizes an individual to administer naloxone-overdose reversal drugs under this section is not liable for or subject to any of the following for any act or omission of the authorized individual: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or using naloxone-overdose reversal drugs under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

This section does not eliminate, limit, or reduce any other immunity or defense that a service entity or an employee, volunteer, or contractor of a service entity may be entitled to under Chapter 2305. or any other provision of the Revised Code or under the common law of this state.

Sec. 3712.01. As used in this chapter:

- (A) "Hospice care program" means a coordinated program of home, outpatient, and inpatient care and services that is operated by a person or public agency and that provides the following care and services to hospice patients, including services as indicated below to hospice patients' families, through a medically directed interdisciplinary team, under interdisciplinary plans of care established pursuant to section 3712.06 of the Revised Code, in order to meet the physical, psychological, social, spiritual, and other special needs that are experienced during the final stages of illness, dying, and bereavement:
 - (1) Nursing care by or under the supervision of a registered nurse;
- (2) Physical, occupational, or speech or language therapy, unless waived by the department of health pursuant to rules adopted under division (A) of section 3712.03 of the Revised Code;
 - (3) Medical social services by a social worker under the direction of a physician;
 - (4) Services of a home health aide:
 - (5) Medical supplies, including drugs and biologicals, and the use of medical appliances;
 - (6) Physician's services;
 - (7) Short-term inpatient care, including both palliative and respite care and procedures;
 - (8) Counseling for hospice patients and hospice patients' families;
 - (9) Services of volunteers under the direction of the provider of the hospice care program;
 - (10) Bereavement services for hospice patients' families.
 - "Hospice care program" does not include a pediatric respite care program.
- (B) "Hospice patient" means a patient, other than a pediatric respite care patient, who has been diagnosed as terminally ill, has an anticipated life expectancy of six months or less, and has

voluntarily requested and is receiving care from a person or public agency licensed under this chapter to provide a hospice care program.

- (C) "Hospice patient's family" means a hospice patient's immediate family members, including a spouse, brother, sister, child, or parent, and any other relative or individual who has significant personal ties to the patient and who is designated as a member of the patient's family by mutual agreement of the patient, the relative or individual, and the patient's interdisciplinary team.
- (D) "Interdisciplinary team" means a working unit composed of professional and lay persons that includes at least a physician, a registered nurse, a social worker, a member of the clergy or a counselor, and a volunteer.
- (E) "Palliative care" means specialized care for a patient of any age who has been diagnosed with a serious or life-threatening illness that is provided at any stage of the illness by an interdisciplinary team working in consultation with other health care professionals, including those who may be seeking to cure the illness, and that aims to do all of the following:
 - (1) Relieve the symptoms, stress, and suffering resulting from the illness;
 - (2) Improve the quality of life of the patient and the patient's family;
 - (3) Address the patient's physical, emotional, social, and spiritual needs;
 - (4) Facilitate patient autonomy, access to information, and medical decision making.
- (F) "Physician" means a person authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.
- (G) "Attending physician" means the physician identified by the hospice patient, pediatric respite care patient, hospice patient's family, or pediatric respite care patient's family as having primary responsibility for the medical care of the hospice patient or pediatric respite care patient.
- (H) "Registered nurse" means a person registered under Chapter 4723. of the Revised Code to practice professional nursing.
- (I) "Social worker" means a person licensed under Chapter 4757. of the Revised Code to practice as a social worker or independent social worker.
- (J) "Pediatric respite care program" means a program operated by a person or public agency that provides does either of the following:
- (1) <u>Provides</u> inpatient respite care and related services, including all of the following services, only to pediatric respite care patients and, as indicated below, pediatric respite care patients' families, in order to meet the physical, psychological, social, spiritual, and other special needs that are experienced during or leading up to the final stages of illness, dying, and bereavement:
 - (1) (a) Short-term inpatient care, including both palliative and respite care and procedures;
 - (2) (b) Nursing care by or under the supervision of a registered nurse;
 - (3) (c) Physician's services;
 - (4) (d) Medical social services by a social worker under the direction of a physician;
 - (5) (e) Medical supplies, including drugs and biologicals, and the use of medical appliances;
- (6) (f) Counseling for pediatric respite care patients and pediatric respite care patients' families;
 - (7) (g) Bereavement services for respite care patients' families.
- (2) Provides in a home-like setting inpatient respite care and related services, including all of the following services, only to pediatric respite care patients and, as indicated below, the parents and

siblings of pediatric respite care patients, in order to meet the physical, psychological, social, spiritual, and other special needs of children who have been diagnosed with life-threatening diseases and conditions:

- (a) Inpatient care, including both palliative and respite care and procedures;
- (b) Skilled nursing care;
- (c) Nursing care by or under the supervision of a registered nurse:
- (d) Physician's services;
- (e) Medical social services by a social worker under the direction of a physician;
- (f) Medical supplies, including drugs and biologicals, and the use of medical appliances;
- (g) For a pediatric respite care patients' parents and siblings, counseling, education, visitation, and reunification.

"Pediatric respite care program" does not include a hospice care program.

- (K) "Pediatric respite care patient" means a patient, other than a hospice patient, who is less than twenty-seven years of age and to whom all of the following conditions apply:
- (1) The patient has been diagnosed with a disease or condition that is life-threatening and is expected to shorten the life expectancy that would have applied to the patient absent the patient's diagnosis, regardless of whether the patient is terminally ill.
- (2) The diagnosis described in division (K)(1) of this section occurred while the patient was less than eighteen years of age.
- (3) The patient, or the parent or guardian of the patient if the patient is under eighteen years of age or under guardianship, has voluntarily requested and is receiving care from a person or public agency licensed under this chapter to provide a pediatric respite care program.
- (L) "Pediatric respite care patient's family" means a pediatric respite care patient's family members, including a spouse, brother, sister, child, or parent, and any other relative or individual who has significant personal ties to the patient and who is designated as a member of the patient's family by mutual agreement of the patient, the relative or individual, and the patient's interdisciplinary team.
- (M) "Skilled nursing care" means procedures that require technical skills and knowledge beyond those the untrained person possesses and that are commonly employed in providing for the physical, mental, and emotional needs of the ill or otherwise incapacitated. "Skilled nursing care" includes the following:
 - (a) Irrigations, catheterizations, application of dressings, and supervision of special diets:
- (b) Objective observation of changes in the patient's condition as a means of analyzing and determining the nursing care required and the need for further medical diagnosis and treatment;
 - (c) Special procedures contributing to rehabilitation;
- (d) Administration of medication by any method ordered by a physician, such as hypodermically, rectally, or orally, including observation of the patient after receipt of the medication;
- (e) Carrying out other treatments prescribed by the physician that involve a similar level of complexity and skill in administration.
- Sec. 3712.031. (A) In accordance with Chapter 119. of the Revised Code, the director of health shall adopt, and may amend and rescind, rules:
 - (1) Providing for the licensing of persons or public agencies providing pediatric respite care

programs within this state by the department of health and for the suspension and revocation of licenses;

- (2) Establishing a license fee and license renewal fee for pediatric respite care programs, neither of which shall, except as provided in division (B) of this section, exceed six hundred dollars. The fees shall cover the three-year period during which an existing license is valid as provided in division (B) of section 3712.041 of the Revised Code.
- (3) Establishing an inspection fee not to exceed, except as provided in division (B) of this section, one thousand seven hundred fifty dollars;
 - (4) Establishing requirements for pediatric respite care program facilities and services;
- (5) Providing for the granting of licenses to provide pediatric respite care programs to persons and public agencies that are accredited or certified to provide such programs by an entity whose standards for accreditation or certification equal or exceed those provided for licensure under this chapter and rules adopted under it;
 - (6) Establishing interpretive guidelines for each rule adopted under this section.
- (B) Subject to the approval of the controlling board, the director of health may establish fees in excess of the maximum amounts specified in this section, provided that the fees do not exceed those amounts by greater than fifty per cent.
 - (C) The department of health shall:
- (1) Grant, suspend, and revoke licenses for pediatric respite care programs in accordance with this chapter and rules adopted under it;
- (2) Make such inspections as are necessary to determine whether pediatric respite care program facilities and services meet the requirements of this chapter and rules adopted under it; and
- (3) Implement and enforce provisions of this chapter and rules adopted under it as such provisions apply to pediatric respite care programs.
- (D) Rules adopted under this section that relate to a pediatric respite care program described under division (J)(2) of section 3712.01 of the Revised Code are not subject to sections 121.95 to 121.953 of the Revised Code.
- Sec. 3712.061. (A) Any person or public agency licensed under section 3712.041 of the Revised Code to provide a pediatric respite care program shall do all of the following:
- (1) Provide a planned and continuous pediatric respite care program, the medical components of which shall be under the direction of a physician;
- (2) Ensure that care <u>commensurate with a pediatric respite care patient's needs</u> is available twenty-four hours a day and seven days a week;
- (3) Establish an interdisciplinary plan of care for each pediatric respite care patient and the patient's family that:
- (a) Is coordinated by one designated individual who shall ensure that all components of the plan of care are addressed and implemented;
- (b) Addresses maintenance of patient-family participation in decision making <u>related to the</u> <u>patient's health care and well-being</u>; and
- (c) Is reviewed by the patient's attending physician and by the patient's interdisciplinary team immediately prior to or on admission to each session of respite care.
 - (4) Have an interdisciplinary team or teams that provide or supervise the provision of

pediatric respite care program services and establish the policies governing the provision of the services;

- (5) Maintain central clinical records on all pediatric respite care patients under its care;
- (6) In the case of a pediatric respite care program that is described in division (J)(2) of section 3712.01 of the Revised Code, maintain birth certificates and certified guardianship letters of authority for any patient who receives care for longer than thirty days, unless this requirement is waived by the director of health;
- (7) In the case of a pediatric respite care program that is described in division (J)(2) of section 3712.01 of the Revised Code, provide the services identified in that division to not more than ten patients at any time, unless additional patients are authorized by the director of health.
- (B) A provider of a pediatric respite care program may include pharmacist services among the other services that are made available to its pediatric respite care patients.
- (C) A provider of a pediatric respite care program may arrange for another person or public agency to furnish a component or components of the pediatric respite care program pursuant to a written contract. When a provider of a pediatric respite care program arranges for a home health agency to furnish a component or components of the pediatric respite care program to its patient, the care shall be provided by a home health agency pursuant to a written contract under which:
- (1) The provider of a pediatric respite care program furnishes to the contractor a copy of the pediatric respite care patient's interdisciplinary plan of care that is established under division (A)(3) of this section and specifies the care that is to be furnished by the contractor;
- (2) The regimen described in the established plan of care is continued while the pediatric respite care patient receives care from the contractor, subject to the patient's needs, and with approval of the coordinator of the interdisciplinary team designated pursuant to division (A)(3)(a) of this section;
- (3) All care, treatment, and services furnished by the contractor are entered into the pediatric respite care patient's medical record;
- (4) The designated coordinator of the interdisciplinary team ensures conformance with the established plan of care; and
- (5) A copy of the contractor's medical record and discharge summary is retained as part of the pediatric respite care patient's medical record.
- Sec. 3719.05. (A) A pharmacist may dispense controlled substances to any person upon a prescription issued in accordance with section 3719.06 of the Revised Code. When dispensing controlled substances, a pharmacist shall act in accordance with rules adopted by the state board of pharmacy and in accordance with the following:
- (1) The prescription shall be retained on file by the owner of the pharmacy in which it is filled for a period of three years, so as to be readily accessible for inspection by any public officer or employee engaged in the enforcement of Chapter 2925., 3719., or 4729. of the Revised Code.
- (2) Each oral prescription shall be recorded by the pharmacist and the record shall show the name and address of the patient for whom, or of the owner of the animal for which the controlled substance is dispensed, the full name, address, and registry number under the federal drug abuse control laws of the prescriber, the name of the controlled substance dispensed, the amount dispensed, and the date when dispensed. The record shall be retained on file by the owner of the pharmacy in

which it is filled for a period of three years.

- (3) A (a) Except as provided in divisions (A)(3)(b) and (c) of this section, a schedule II controlled substance shall be dispensed only upon a written or an electronic prescription, except that it.
- (b) A schedule II controlled substance may be dispensed upon an oral prescription in emergency situations as provided in the federal drug abuse control laws.
- (c) A schedule II controlled substance may be dispensed upon a written prescription if either of the following applies:
- (i) A temporary technical, electrical, or broadband failure prevents the pharmacist from dispensing upon an electronic prescription.
- (ii) The written prescription was issued as described in division (C) of section 3719.06 of the Revised Code.
- (d) A pharmacist who receives a faxed, oral, or written prescription for a schedule II controlled substance is not required to verify that the prescription was issued under an exception to the requirement that a prescriber issue such a prescription electronically, including an exception described in divisions (A)(3)(b) and (c) of this section or division (C) of section 3719.06 of the Revised Code.

A pharmacist may continue to dispense any other drug upon an otherwise valid faxed, oral, or written prescription that is consistent with state and federal statutes, rules, and regulations.

- (4) A prescription for a schedule II controlled substance shall not be refilled.
- (5) Prescriptions for schedule III and IV controlled substances may be refilled not more than five times in a six-month period from the date the prescription is given by a prescriber.
- (B) The legal owner of any stock of schedule II controlled substances in a pharmacy, upon discontinuance of dealing in those drugs, may sell the stock to a manufacturer, wholesaler, or owner of a pharmacy registered under the federal drug abuse control laws pursuant to an official written order.
- Sec. 3719.06. (A)(1) A licensed health professional authorized to prescribe drugs, if acting in the course of professional practice, in accordance with the laws regulating the professional's practice, and in accordance with rules adopted by the state board of pharmacy, may, except as provided in division (A)(2) or (3) of this section, do the following:
 - (a) Prescribe schedule II, III, IV, and V controlled substances:
- (b) Administer or personally furnish to patients schedule II, III, IV, and V controlled substances;
- (c) Cause schedule II, III, IV, and V controlled substances to be administered under the prescriber's direction and supervision.
- (2) A licensed health professional authorized to prescribe drugs who is a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner is subject to both of the following:
- (a) A schedule II controlled substance may be prescribed only in accordance with division (C) of section 4723.481 of the Revised Code.
 - (b) No schedule II controlled substance shall be personally furnished to any patient.
- (3) A licensed health professional authorized to prescribe drugs who is a physician assistant is subject to all of the following:

- (a) A controlled substance may be prescribed or personally furnished only if it is included in the physician-delegated prescriptive authority granted to the physician assistant in accordance with Chapter 4730. of the Revised Code.
- (b) A schedule II controlled substance may be prescribed only in accordance with division (B)(4) of section 4730.41 and section 4730.411 of the Revised Code.
 - (c) No schedule II controlled substance shall be personally furnished to any patient.
- (B) No licensed health professional authorized to prescribe drugs shall prescribe, administer, or personally furnish a schedule III anabolic steroid for the purpose of human muscle building or enhancing human athletic performance and no pharmacist shall dispense a schedule III anabolic steroid for either purpose, unless it has been approved for that purpose under the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended.
- (C) When issuing a prescription for a schedule II controlled substance, a licensed health professional authorized to prescribe drugs shall do so only upon an electronic prescription, except that the prescriber may issue a written prescription if any of the following apply:
- (1) A temporary technical, electrical, or broadband failure occurs preventing the prescriber from issuing an electronic prescription.
 - (2) The prescription is issued for a nursing home resident or hospice care patient.
- (3) The prescriber is employed by or under contract with the same entity that operates the pharmacy.
- (4) The prescriber determines that an electronic prescription cannot be issued in a timely manner and the patient's medical condition is at risk.
- (5) The prescriber issues the prescription from a health care facility, which may include an emergency department, and reasonably determines that an electronic prescription would be impractical for the patient or would cause a delay that may adversely impact the patient's medical condition.
- (6) The prescriber issues per year not more than fifty prescriptions for schedule II controlled substances.
 - (7) The prescriber is a veterinarian licensed under Chapter 4741. of the Revised Code.
- (D) Each written or electronic prescription for a controlled substance shall be properly executed, dated, and signed by the prescriber on the day when issued and shall bear the full name and address of the person for whom, or the owner of the animal for which, the controlled substance is prescribed and the full name, address, and registry number under the federal drug abuse control laws of the prescriber. If the prescription is for an animal, it shall state the species of the animal for which the controlled substance is prescribed.
- Sec. 4723.484. (A) <u>As used in this section and in sections 4723.485 and 4723.486 of the Revised Code</u>, "overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
- (B) Notwithstanding any provision of this chapter or rule adopted by the board of nursing, an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may personally furnish a supply of <u>naloxone_overdose_reversal_drugs</u>, or issue a prescription for <u>naloxone_overdose_reversal_drugs</u>, without having examined the individual to whom it may be administered if both of the following conditions are met:

- (1) The naloxone supply is furnished to, or the prescription is issued to and in the name of, a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (2) The advanced practice registered nurse instructs the individual receiving the naloxone supply or prescription to summon emergency services as soon as practicable either before or after administering naloxone an overdose reversal drug to an individual apparently experiencing an opioid-related overdose.
- (B) (C) An advanced practice registered nurse who under division (A) (B) of this section in good faith furnishes a supply of naloxone overdose reversal drugs or issues a prescription for naloxone overdose reversal drugs is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is overdose reversal drugs are furnished or the prescription is issued: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.
- Sec. 4723.485. (A)(1) An advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and who has established a protocol that meets the requirements of division (C) of this section may authorize one or more other individuals to personally furnish a supply of naloxone overdose reversal drugs pursuant to the protocol to either of the following:
- (a) An individual who there is reason to believe is experiencing or at risk of experiencing an opioid-related overdose;
- (b) A family member, friend, or other person in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (2) An individual authorized under this section to personally furnish <u>naloxone</u> <u>overdose</u> <u>reversal drugs</u> may do so without having examined the individual to whom it may be administered.
- (B) An individual authorized by an advanced practice registered nurse under this section may personally furnish naloxone-overdose reversal drugs to an individual described in division (A)(1)(a) or (b) of this section if both of the following conditions are met:
- (1) The authorized individual complies with the protocol established by the authorizing advanced practice registered nurse, including having completed the training required by the protocol.
- (2) The authorized individual instructs the individual to whom naloxone is overdose reversal drugs are furnished to summon emergency services as soon as practicable either before or after administering naloxone the drug.
- (C) A protocol established by an advanced practice registered nurse for purposes of this section shall be established in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs specified in the protocol;
- (2) Precautions and contraindications concerning furnishing—naloxone_overdose_reversal_drugs;
- (3) Any limitations the advanced practice registered nurse specifies concerning the individuals to whom naloxone-overdose reversal drugs may be furnished;
- (4) The naloxone dosage that may be furnished and any variation in the dosage based on circumstances specified in the protocol;

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(5) Labeling, storage, record keeping, and administrative requirements;

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- (6) Training requirements that must be met before an individual will be authorized to furnish naloxone overdose reversal drugs;
- (7) Any instructions or training that the authorized individual must provide to an individual to whom naloxone is overdose reversal drugs are furnished.
- (D) An advanced practice registered nurse who in good faith authorizes another individual to personally furnish naloxone overdose reversal drugs in accordance with a protocol established by the advanced practice registered nurse under this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

An individual authorized under this section to personally furnish naloxone overdose reversal drugs who does so in good faith is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 4723.486. (A) As used in this section, "service entity" has the same meaning as in section 4729.514 of the Revised Code.

- (B) An advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and who has established a protocol under division (D) of this section may authorize an individual who is an employee, volunteer, or contractor of a service entity to administer naloxone-overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose.
- (C) An individual authorized by an advanced practice registered nurse under this section may administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose if all of the following conditions are met:
- (1) The naloxone is overdose reversal drugs are obtained from a service entity of which the authorized individual is an employee, volunteer, or contractor.
- (2) The authorized individual complies with the protocol established by the authorizing advanced practice registered nurse.
- (3) The authorized individual summons emergency services as soon as practicable either before or after administering the <u>naloxone</u> overdose reversal drugs.
- (D) A protocol established by an advanced practice registered nurse for purposes of this section must be in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs <u>specified in the protocol</u>;
- (2) Precautions and contraindications concerning the administration of <u>naloxone_overdose_reversal_drugs</u>;
- (3) Any limitations the advanced practice registered nurse specifies concerning the individuals to whom naloxone overdose reversal drugs may be administered;
- (4) The naloxone dosage that may be administered and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record keeping, and administrative requirements;

- (6) Training requirements that must be met before an individual can be authorized to administer-naloxone overdose reversal drugs.
- (E) An advanced practice registered nurse who in good faith authorizes an individual to administer naloxone overdose reversal drugs under this section is not liable for or subject to any of the following for any act or omission of the authorized individual: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or administering naloxone overdose reversal drugs under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

This section does not eliminate, limit, or reduce any other immunity or defense that a service entity or an employee, volunteer, or contractor of a service entity may be entitled to under Chapter 2305. or any other provision of the Revised Code or under the common law of this state.

Sec. 4729.01. As used in this chapter:

- (A) "Pharmacy," except when used in a context that refers to the practice of pharmacy, means any area, room, rooms, place of business, department, or portion of any of the foregoing where the practice of pharmacy is conducted.
- (B) "Practice of pharmacy" means providing pharmacist care requiring specialized knowledge, judgment, and skill derived from the principles of biological, chemical, behavioral, social, pharmaceutical, and clinical sciences. As used in this division, "pharmacist care" includes the following:
 - (1) Interpreting prescriptions;
 - (2) Dispensing drugs and drug therapy related devices;
 - (3) Compounding drugs;
- (4) Counseling individuals with regard to their drug therapy, recommending drug therapy related devices, and assisting in the selection of drugs and appliances for treatment of common diseases and injuries and providing instruction in the proper use of the drugs and appliances;
- (5) Performing drug regimen reviews with individuals by discussing all of the drugs that the individual is taking and explaining the interactions of the drugs;
- (6) Performing drug utilization reviews with licensed health professionals authorized to prescribe drugs when the pharmacist determines that an individual with a prescription has a drug regimen that warrants additional discussion with the prescriber;
- (7) Advising an individual and the health care professionals treating an individual with regard to the individual's drug therapy;
 - (8) Acting pursuant to a consult agreement, if an agreement has been established;
- (9) Engaging in the administration of immunizations to the extent authorized by section 4729.41 of the Revised Code;
- (10) Engaging in the administration of drugs to the extent authorized by section 4729.45 of the Revised Code.
 - (C) "Compounding" means the preparation, mixing, assembling, packaging, and labeling of

one or more drugs in any of the following circumstances:

- (1) Pursuant to a prescription issued by a licensed health professional authorized to prescribe drugs;
- (2) Pursuant to the modification of a prescription made in accordance with a consult agreement;
 - (3) As an incident to research, teaching activities, or chemical analysis;
- (4) In anticipation of orders for drugs pursuant to prescriptions, based on routine, regularly observed dispensing patterns;
- (5) Pursuant to a request made by a licensed health professional authorized to prescribe drugs for a drug that is to be used by the professional for the purpose of direct administration to patients in the course of the professional's practice, if all of the following apply:
- (a) At the time the request is made, the drug is not commercially available regardless of the reason that the drug is not available, including the absence of a manufacturer for the drug or the lack of a readily available supply of the drug from a manufacturer.
 - (b) A limited quantity of the drug is compounded and provided to the professional.
- (c) The drug is compounded and provided to the professional as an occasional exception to the normal practice of dispensing drugs pursuant to patient-specific prescriptions.
- (D) "Consult agreement" means an agreement that has been entered into under section 4729.39 of the Revised Code.
 - (E) "Drug" means:
- (1) Any article recognized in the United States pharmacopoeia and national formulary, or any supplement to them, intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans or animals;
- (2) Any other article intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans or animals;
- (3) Any article, other than food, intended to affect the structure or any function of the body of humans or animals:
- (4) Any article intended for use as a component of any article specified in division (E)(1), (2), or (3) of this section; but does not include devices or their components, parts, or accessories.

"Drug" does not include "hemp" or a "hemp product" as those terms are defined in section 928.01 of the Revised Code.

- (F) "Dangerous drug" means any of the following:
- (1) Any drug to which either of the following applies:
- (a) Under the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is required to bear a label containing the legend "Caution: Federal law prohibits dispensing without prescription" or "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian" or any similar restrictive statement, or the drug may be dispensed only upon a prescription;
- (b) Under Chapter 3715. or 3719. of the Revised Code, the drug may be dispensed only upon a prescription.
- (2) Any drug that contains a schedule V controlled substance and that is exempt from Chapter 3719. of the Revised Code or to which that chapter does not apply;

- (3) Any drug intended for administration by injection into the human body other than through a natural orifice of the human body;
 - (4) Any drug that is a biological product, as defined in section 3715.01 of the Revised Code.
- (G) "Federal drug abuse control laws" has the same meaning as in section 3719.01 of the Revised Code.
 - (H) "Prescription" means all of the following:
- (1) A written, electronic, or oral order for drugs or combinations or mixtures of drugs to be used by a particular individual or for treating a particular animal, issued by a licensed health professional authorized to prescribe drugs;
- (2) For purposes of sections 2925.61, 4723.484, 4730.434, and 4731.94 of the Revised Code, a written, electronic, or oral order for naloxone an overdose reversal drug issued to and in the name of a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (3) For purposes of section 4729.44 of the Revised Code, a written, electronic, or oral order for naloxone an overdose reversal drug issued to and in the name of either of the following:
- (a) An individual who there is reason to believe is at risk of experiencing an opioid-related overdose:
- (b) A family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (4) For purposes of sections 4723.4810, 4729.282, 4730.432, and 4731.93 of the Revised Code, a written, electronic, or oral order for a drug to treat chlamydia, gonorrhea, or trichomoniasis issued to and in the name of a patient who is not the intended user of the drug but is the sexual partner of the intended user;
- (5) For purposes of sections 3313.7110, 3313.7111, 3314.143, 3326.28, 3328.29, 4723.483, 4729.88, 4730.433, 4731.96, and 5101.76 of the Revised Code, a written, electronic, or oral order for an epinephrine autoinjector issued to and in the name of a school, school district, or camp;
- (6) For purposes of Chapter 3728. and sections 4723.483, 4729.88, 4730.433, and 4731.96 of the Revised Code, a written, electronic, or oral order for an epinephrine autoinjector issued to and in the name of a qualified entity, as defined in section 3728.01 of the Revised Code;
- (7) For purposes of sections 3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, 4723.4811, 4730.437, 4731.92, and 5101.78 of the Revised Code, a written, electronic, or oral order for injectable or nasally administered glucagon in the name of a school, school district, or camp.
- (I) "Licensed health professional authorized to prescribe drugs" or "prescriber" means an individual who is authorized by law to prescribe drugs or dangerous drugs or drug therapy related devices in the course of the individual's professional practice, including only the following:
 - (1) A dentist licensed under Chapter 4715. of the Revised Code;
- (2) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a current, valid license issued under Chapter 4723. of the Revised Code to practice nursing as an advanced practice registered nurse;
- (3) A certified registered nurse anesthetist who holds a current, valid license issued under Chapter 4723. of the Revised Code to practice nursing as an advanced practice registered nurse, but only to the extent of the nurse's authority under sections 4723.43 and 4723.434 of the Revised Code;

- (4) An optometrist licensed under Chapter 4725. of the Revised Code to practice optometry under a therapeutic pharmaceutical agents certificate;
- (5) A physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery;
- (6) A physician assistant who holds a license to practice as a physician assistant issued under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority;
 - (7) A veterinarian licensed under Chapter 4741. of the Revised Code.
- (J) "Sale" or "sell" includes any transaction made by any person, whether as principal proprietor, agent, or employee, to do or offer to do any of the following: deliver, distribute, broker, exchange, gift or otherwise give away, or transfer, whether the transfer is by passage of title, physical movement, or both.
- (K) "Wholesale sale" and "sale at wholesale" mean any sale in which the purpose of the purchaser is to resell the article purchased or received by the purchaser.
- (L) "Retail sale" and "sale at retail" mean any sale other than a wholesale sale or sale at wholesale.
- (M) "Retail seller" means any person that sells any dangerous drug to consumers without assuming control over and responsibility for its administration. Mere advice or instructions regarding administration do not constitute control or establish responsibility.
- (N) "Price information" means the price charged for a prescription for a particular drug product and, in an easily understandable manner, all of the following:
 - (1) The proprietary name of the drug product;
 - (2) The established (generic) name of the drug product;
- (3) The strength of the drug product if the product contains a single active ingredient or if the drug product contains more than one active ingredient and a relevant strength can be associated with the product without indicating each active ingredient. The established name and quantity of each active ingredient are required if such a relevant strength cannot be so associated with a drug product containing more than one ingredient.
 - (4) The dosage form;
- (5) The price charged for a specific quantity of the drug product. The stated price shall include all charges to the consumer, including, but not limited to, the cost of the drug product, professional fees, handling fees, if any, and a statement identifying professional services routinely furnished by the pharmacy. Any mailing fees and delivery fees may be stated separately without repetition. The information shall not be false or misleading.
- (O) "Wholesale distributor of dangerous drugs" or "wholesale distributor" means a person engaged in the sale of dangerous drugs at wholesale and includes any agent or employee of such a person authorized by the person to engage in the sale of dangerous drugs at wholesale.
- (P) "Manufacturer of dangerous drugs" or "manufacturer" means a person, other than a pharmacist or prescriber, who manufactures dangerous drugs and who is engaged in the sale of those dangerous drugs.
- (Q) "Terminal distributor of dangerous drugs" or "terminal distributor" means a person who is engaged in the sale of dangerous drugs at retail, or any person, other than a manufacturer,

repackager, outsourcing facility, third-party logistics provider, wholesale distributor, or pharmacist, who has possession, custody, or control of dangerous drugs for any purpose other than for that person's own use and consumption. "Terminal distributor" includes pharmacies, hospitals, nursing homes, and laboratories and all other persons who procure dangerous drugs for sale or other distribution by or under the supervision of a pharmacist, licensed health professional authorized to prescribe drugs, or other person authorized by the state board of pharmacy.

- (R) "Promote to the public" means disseminating a representation to the public in any manner or by any means, other than by labeling, for the purpose of inducing, or that is likely to induce, directly or indirectly, the purchase of a dangerous drug at retail.
- (S) "Person" includes any individual, partnership, association, limited liability company, or corporation, the state, any political subdivision of the state, and any district, department, or agency of the state or its political subdivisions.
- (T)(1) "Animal shelter" means a facility operated by a humane society or any society organized under Chapter 1717. of the Revised Code or a dog pound operated pursuant to Chapter 955, of the Revised Code.
- (2) "County dog warden" means a dog warden or deputy dog warden appointed or employed under section 955.12 of the Revised Code.
 - (U) "Food" has the same meaning as in section 3715.01 of the Revised Code.
- (V) "Pain management clinic" has the same meaning as in section 4731.054 of the Revised Code.
- (W) "Investigational drug or product" means a drug or product that has successfully completed phase one of the United States food and drug administration clinical trials and remains under clinical trial, but has not been approved for general use by the United States food and drug administration. "Investigational drug or product" does not include controlled substances in schedule I, as defined in section 3719.01 of the Revised Code.
- (X) "Product," when used in reference to an investigational drug or product, means a biological product, other than a drug, that is made from a natural human, animal, or microorganism source and is intended to treat a disease or medical condition.
- (Y) "Third-party logistics provider" means a person that provides or coordinates warehousing or other logistics services pertaining to dangerous drugs including distribution, on behalf of a manufacturer, wholesale distributor, or terminal distributor of dangerous drugs, but does not take ownership of the drugs or have responsibility to direct the sale or disposition of the drugs.
- (Z) "Repackager of dangerous drugs" or "repackager" means a person that repacks and relabels dangerous drugs for sale or distribution.
- (AA) "Outsourcing facility" means a facility that is engaged in the compounding and sale of sterile drugs and is registered as an outsourcing facility with the United States food and drug administration.
- (BB) "Laboratory" means a laboratory licensed under this chapter as a terminal distributor of dangerous drugs and entrusted to have custody of any of the following drugs and to use the drugs for scientific and clinical purposes and for purposes of instruction: dangerous drugs that are not controlled substances, as defined in section 3719.01 of the Revised Code; dangerous drugs that are controlled substances, as defined in that section; and controlled substances in schedule I, as defined

in that section.

- (CC) "Overdose reversal drug" means both of the following:
- (1) Naloxone;
- (2) Any other drug that the state board of pharmacy, through rules adopted in accordance with Chapter 119. of the Revised Code, designates as a drug that is approved by the federal food and drug administration for the reversal of a known or suspected opioid-related overdose.
- Sec. 4729.29. Divisions (A) and (B) of section 4729.01 and section 4729.28 of the Revised Code do not do any of the following:
- (A) Apply to a licensed health professional authorized to prescribe drugs who is acting within the prescriber's scope of professional practice;
- (B) Prevent a prescriber from personally furnishing the prescriber's patients with drugs, within the prescriber's scope of professional practice, that seem proper to the prescriber, as long as the drugs are furnished in accordance with section 4729.291 of the Revised Code;
- (C) Apply to an individual who personally furnishes a supply of naloxone overdose reversal drugs under authority conferred under section 4723.485, 4730.435, or 4731.941 of the Revised Code or prevent that individual from personally furnishing the supply of naloxone overdose reversal drugs in accordance with a protocol established under section 4723.485, 4730.435, or 4731.941 of the Revised Code;
- (D) Apply to the sale of oxygen, the sale of peritoneal dialysis solutions, or the sale of drugs that are not dangerous drugs by a retail dealer, in original packages when labeled as required by the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended.

Sec. 4729.44. (A) As used in this section:

- (1) "Board of health" means a board of health of a city or general health district or an authority having the duties of a board of health under section 3709.05 of the Revised Code.
- (2) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery.
- (B) If use of the protocol developed pursuant to rules adopted under division (G) of this section has been authorized under section 3707.56 or 4731.942 of the Revised Code, a pharmacist or pharmacy intern may dispense naloxone overdose reversal drugs without a prescription to either of the following in accordance with that protocol:
- (1) An individual who there is reason to believe is experiencing or at risk of experiencing an opioid-related overdose;
- (2) A family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (C) A pharmacist or pharmacy intern who dispenses <u>naloxone_overdose reversal drugs_under</u> this section shall instruct the individual to whom <u>naloxone is_the drugs are_dispensed</u> to summon emergency services as soon as practicable either before or after administering—<u>naloxone_the drugs</u>.
- (D) A pharmacist may document on a prescription form the dispensing of naloxone-overdose reversal drugs by the pharmacist or a pharmacy intern supervised by the pharmacist. The form may be assigned a number for record-keeping purposes.
- (E) This section does not affect the authority of a pharmacist or pharmacy intern to fill or refill a prescription for naloxone overdose reversal drugs.

(F) A board of health that in good faith authorizes a pharmacist or pharmacy intern to dispense naloxone overdose reversal drugs without a prescription in accordance with a protocol developed pursuant to rules adopted under division (G) of this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are dispensed: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A physician who in good faith authorizes a pharmacist or pharmacy intern to dispense naloxone overdose reversal drugs without a prescription in accordance with a protocol developed pursuant to rules adopted under division (G) of this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are dispensed: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A pharmacist or pharmacy intern authorized under this section to dispense <u>naloxone overdose</u> <u>reversal drugs</u> without a prescription who does so in good faith is not liable for or subject to any of the following for any action or omission of the individual to whom the <u>naloxone is drugs are</u> dispensed: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

(G) The state board of pharmacy shall, after consulting with the department of health and state medical board, adopt rules to implement this section. The rules shall specify a protocol under which pharmacists or pharmacy interns may dispense naloxone overdose reversal drugs without a prescription.

All rules adopted under this section shall be adopted in accordance with Chapter 119. of the Revised Code.

- (H)(1) The state board of pharmacy shall develop a program to educate all of the following about the authority of a pharmacist or pharmacy intern to dispense naloxone-overdose reversal drugs without a prescription:
- (a) Holders of licenses issued under this chapter that engage in the sale or dispensing of naloxone overdose reversal drugs pursuant to this section;
- (b) Registered pharmacy technicians, certified pharmacy technicians, and pharmacy technician trainees registered under this chapter who engage in the sale of naloxone overdose reversal drugs pursuant to this section;
- (c) Individuals who are not licensed or registered under this chapter but are employed by license holders described in division (H)(1)(a) of this section.
- (2) As part of the program, the board also shall educate the license holders, pharmacy technicians, and employees described in division (H)(1) of this section about maintaining an adequate supply of naloxone overdose reversal drugs and methods for determining a pharmacy's stock of the drug such drugs.
 - (3) The board may use its web site to share information under the program.

Sec. 4729.51. (A) No person other than a licensed manufacturer of dangerous drugs, outsourcing facility, third-party logistics provider, repackager of dangerous drugs, or wholesale distributor of dangerous drugs shall possess for sale, sell, distribute, or deliver, at wholesale, dangerous drugs or investigational drugs or products, except as follows:

- (1) A licensed terminal distributor of dangerous drugs that is a pharmacy may make occasional sales of dangerous drugs or investigational drugs or products at wholesale.
- (2) A licensed terminal distributor of dangerous drugs having more than one licensed location may transfer or deliver dangerous drugs from one licensed location to another licensed location owned by the terminal distributor if the license issued for each location is in effect at the time of the transfer or delivery.
- (3) A licensed terminal distributor of dangerous drugs that is not a pharmacy may make occasional sales of the following at wholesale:
 - (a) Naloxone Overdose reversal drugs;
- (b) Dangerous drugs if the drugs being sold are in shortage, as defined in rules adopted under section 4729.26 of the Revised Code;
- (c) Dangerous drugs other than those described in divisions (A)(3)(a) and (b) of this section or investigational drugs or products if authorized by rules adopted under section 4729.26 of the Revised Code.
- (B) No licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor shall possess for sale, sell, or distribute, at wholesale, dangerous drugs or investigational drugs or products to any person other than the following:
 - (1) Subject to division (D) of this section, a licensed terminal distributor of dangerous drugs;
- (2) Subject to division (C) of this section, any person exempt from licensure as a terminal distributor of dangerous drugs under section 4729.541 of the Revised Code;
- (3) A licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor;
- (4) A terminal distributor, manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor that is located in another state, is not engaged in the sale of dangerous drugs within this state, and is actively licensed to engage in the sale of dangerous drugs by the state in which the distributor conducts business.
- (C) No licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor shall possess for sale, sell, or distribute, at wholesale, dangerous drugs or investigational drugs or products to either of the following:
 - (1) A prescriber who is employed by either of the following:
- (a) A pain management clinic that is not licensed as a terminal distributor of dangerous drugs with a pain management clinic classification issued under section 4729.552 of the Revised Code;
- (b) A facility, clinic, or other location that provides office-based opioid treatment but is not licensed as a terminal distributor of dangerous drugs with an office-based opioid treatment classification issued under section 4729.553 of the Revised Code if such a license is required by that section.
- (2) A business entity described in division (A)(2) or (3) of section 4729.541 of the Revised Code that is, or is operating, either of the following:
- (a) A pain management clinic without a license as a terminal distributor of dangerous drugs with a pain management clinic classification issued under section 4729.552 of the Revised Code;
- (b) A facility, clinic, or other location that provides office-based opioid treatment without a license as a terminal distributor of dangerous drugs with an office-based opioid treatment

classification issued under section 4729.553 of the Revised Code if such a license is required by that section.

- (D) No licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor shall possess dangerous drugs or investigational drugs or products for sale at wholesale, or sell or distribute such drugs at wholesale, to a licensed terminal distributor of dangerous drugs, except as follows:
- (1) In the case of a terminal distributor with a category II license, only dangerous drugs in category II, as defined in division (A)(1) of section 4729.54 of the Revised Code;
- (2) In the case of a terminal distributor with a category III license, dangerous drugs in category II and category III, as defined in divisions (A)(1) and (2) of section 4729.54 of the Revised Code;
- (3) In the case of a terminal distributor with a limited category II or III license, only the dangerous drugs specified in the license.
- (E)(1) Except as provided in division (E)(2) of this section, no person shall do any of the following:
 - (a) Sell or distribute, at retail, dangerous drugs;
 - (b) Possess for sale, at retail, dangerous drugs;
 - (c) Possess dangerous drugs.
 - (2)(a) Divisions (E)(1)(a), (b), and (c) of this section do not apply to any of the following:
 - (i) A licensed terminal distributor of dangerous drugs;
- (ii) A person who possesses, or possesses for sale or sells, at retail, a dangerous drug in accordance with Chapters 3719., 4715., 4723., 4725., 4729., 4730., 4731., and 4741. of the Revised Code:
- (iii) Any of the persons identified in divisions (A)(1) to (5) and (13) of section 4729.541 of the Revised Code, but only to the extent specified in that section.
 - (b) Division (E)(1)(c) of this section does not apply to any of the following:
- (i) A licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor;
- (ii) Any of the persons identified in divisions (A)(6) to (12) of section 4729.541 of the Revised Code, but only to the extent specified in that section.
- (F) No licensed terminal distributor of dangerous drugs or person that is exempt from licensure under section 4729.541 of the Revised Code shall purchase dangerous drugs or investigational drugs or products from any person other than a licensed manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor, except as follows:
- (1) A licensed terminal distributor of dangerous drugs or person that is exempt from licensure under section 4729.541 of the Revised Code may make occasional purchases of dangerous drugs or investigational drugs or products that are sold in accordance with division (A)(1) or (3) of this section.
- (2) A licensed terminal distributor of dangerous drugs having more than one licensed location may transfer or deliver dangerous drugs or investigational drugs or products from one licensed location to another licensed location if the license issued for each location is in effect at the time of the transfer or delivery.

(G) No licensed terminal distributor of dangerous drugs shall engage in the retail sale or other distribution of dangerous drugs or investigational drugs or products or maintain possession, custody, or control of dangerous drugs or investigational drugs or products for any purpose other than the distributor's personal use or consumption, at any establishment or place other than that or those described in the license issued by the state board of pharmacy to such terminal distributor.

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- (H) Nothing in this section shall be construed to interfere with the performance of official duties by any law enforcement official authorized by municipal, county, state, or federal law to collect samples of any drug, regardless of its nature or in whose possession it may be.
- (I) Notwithstanding anything to the contrary in this section, the board of education of a city, local, exempted village, or joint vocational school district may distribute epinephrine autoinjectors for use in accordance with section 3313.7110 of the Revised Code, may distribute inhalers for use in accordance with section 3313.7113 of the Revised Code, and may distribute injectable or nasally administered glucagon for use in accordance with section 3313.7115 of the Revised Code.

Sec. 4729.511. (A) As used in this section, "naloxone overdose reversal drug distributor" means either of the following:

- (1) A wholesale distributor of dangerous drugs;
- (2) A terminal distributor of dangerous drugs that supplies naloxone overdose reversal drugs to any entity under division (B)(1) of this section.
- (B)(1) A naloxone An overdose reversal drug distributor shall prioritize the sale, distribution, and delivery of naloxone overdose reversal drugs to all of the following:
 - (a) A children's hospital, as defined in section 3727.01 of the Revised Code;
 - (b) A hospital, as defined in section 3727.01 of the Revised Code;
- (c) An emergency medical service organization, as defined in section 4765.01 of the Revised Code;
 - (d) A facility that is operated as an urgent care center.
- (2) The order in which the entities are listed in division (B)(1) of this section does not establish levels of priority among the listed entities.
- (C) A naloxone—An overdose reversal drug distributor who in good faith complies with division (B) of this section is not liable for or subject to any of the following for an act or omission arising from that compliance: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.
- Sec. 4729.514. (A) As used in this section, "service entity" means a public or private entity that may provide services to or interact with individuals who there is reason to believe may be at risk of experiencing an opioid-related overdose. "Service entity" includes a church or other place of worship, college or university, school, library, health department operated by the board of health of a city or general health district, community addiction services provider, court, probation department, halfway house, prison, jail, community residential center, homeless shelter, or similar entity.
- (B) A service entity may procure and maintain naloxone-overdose reversal drugs for either or both of the following purposes:
 - (1) To use in emergency situations;
- (2) To permit an employee, volunteer, or contractor of the service entity to personally furnish a supply of naloxone overdose reversal drugs pursuant to a protocol established under section

3707.561, 4723.485, 4730.435, or 4731.941 of the Revised Code.

(C) A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, using, or personally furnishing naloxone overdose reversal drugs under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

This section does not eliminate, limit, or reduce any other immunity or defense that a service entity or an employee, volunteer, or contractor of a service entity may be entitled to under Chapter 2305. or any other provision of the Revised Code or under the common law of this state.

- Sec. 4729.515. (A) In accordance with divisions (B) and (C) of this section, a terminal distributor of dangerous drugs may acquire and maintain a supply of naloxone-overdose reversal drugs for use in emergency situations and for distribution through an automated mechanism. The naloxone-overdose reversal drugs may be maintained at a location other than the location licensed as a terminal distributor of dangerous drugs.
- (B) In the case of naloxone overdose reversal drugs for use in emergency situations, a terminal distributor of dangerous drugs shall do all of the following:
- (1) Provide instructions regarding the emergency administration of naloxone overdose reversal drugs to any individual who accesses—the naloxone such drugs, including a specific instruction to summon emergency services as set forth in division (D) of this section;
- (2) Specify a process to be used to notify the terminal distributor that the naloxone an overdose reversal drug has been accessed within a reasonable time of its being accessed;
- (3) Maintain the naloxone overdose reversal drugs in accordance with the manufacturer's or distributor's instructions.
- (C) In the case of naloxone overdose reversal drugs for distribution through an automated mechanism, a terminal distributor of dangerous drugs shall comply with standards and procedures specified in rules adopted under division (F) of this section.
- (D)(1) Notwithstanding any conflicting provision of the Revised Code, both of the following apply:
- (a) Any individual may access naloxone overdose reversal drugs maintained as provided in division (B) of this section and may administer it—the drugs to an individual who there is reason to believe is experiencing an opioid-related overdose.
- (b) Any individual may receive <u>naloxone</u> <u>overdose reversal drugs</u> distributed through an automated system as provided in division (C) of this section and may administer <u>it</u> the <u>drugs</u> to an individual who there is reason to believe is experiencing an opioid-related overdose.
- (2) An individual who administers naloxone overdose reversal drugs as authorized by this section shall make a good faith effort to activate or have another individual activate an emergency medical services system as soon as possible, except that this requirement does not apply if the individual administering the naloxone drugs is doing so as part of an emergency medical services system or at a hospital, as defined in section 3727.01 of the Revised Code.
- (E) An individual is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with any action

authorized by this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

- (F) The state board of pharmacy shall adopt rules establishing standards and procedures applicable to the distribution of naloxone-overdose reversal drugs through an automated mechanism. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.
- Sec. 4729.541. (A) Except as provided in divisions (B) to (D) of this section, all of the following are exempt from licensure as a terminal distributor of dangerous drugs:
 - (1) A licensed health professional authorized to prescribe drugs;
- (2) A business entity that is a corporation formed under division (B) of section 1701.03 of the Revised Code, a limited liability company formed under Chapter 1705. or 1706. of the Revised Code, or a professional association formed under Chapter 1785. of the Revised Code if the entity has a sole shareholder who is a prescriber and is authorized to provide the professional services being offered by the entity;
- (3) A business entity that is a corporation formed under division (B) of section 1701.03 of the Revised Code, a limited liability company formed under Chapter 1705. or 1706. of the Revised Code, a partnership or a limited liability partnership formed under Chapter 1775. of the Revised Code, or a professional association formed under Chapter 1785. of the Revised Code, if, to be a shareholder, member, or partner, an individual is required to be licensed, certified, or otherwise legally authorized under Title XLVII of the Revised Code to perform the professional service provided by the entity and each such individual is a prescriber;
- (4) An individual who holds a current license, certificate, or registration issued under Title XLVII of the Revised Code and has been certified to conduct diabetes education by a national certifying body specified in rules adopted by the state board of pharmacy under section 4729.68 of the Revised Code, but only with respect to insulin that will be used for the purpose of diabetes education and only if diabetes education is within the individual's scope of practice under statutes and rules regulating the individual's profession;
- (5) An individual who holds a valid certificate issued by a nationally recognized S.C.U.B.A. diving certifying organization approved by the state board of pharmacy under rules adopted by the board, but only with respect to medical oxygen that will be used for the purpose of emergency care or treatment at the scene of a diving emergency;
- (6) With respect to epinephrine autoinjectors that may be possessed under section 3313.7110, 3313.7111, 3314.143, 3326.28, or 3328.29 of the Revised Code, any of the following: the board of education of a city, local, exempted village, or joint vocational school district; a chartered or nonchartered nonpublic school; a community school established under Chapter 3314. of the Revised Code; a STEM school established under Chapter 3326. of the Revised Code; or a college-preparatory boarding school established under Chapter 3328. of the Revised Code;
- (7) With respect to epinephrine autoinjectors that may be possessed under section 5101.76 of the Revised Code, any of the following: a residential camp, as defined in section 2151.011 of the Revised Code; a child day camp, as defined in section 5104.01 of the Revised Code; or a child day camp operated by any county, township, municipal corporation, township park district created under section 511.18 of the Revised Code, park district created under section 1545.04 of the Revised Code,

or joint recreation district established under section 755.14 of the Revised Code;

- (8) With respect to epinephrine autoinjectors that may be possessed under Chapter 3728. of the Revised Code, a qualified entity, as defined in section 3728.01 of the Revised Code;
- (9) With respect to inhalers that may be possessed under section 3313.7113, 3313.7114, 3314.144, 3326.30, or 3328.30 of the Revised Code, any of the following: the board of education of a city, local, exempted village, or joint vocational school district; a chartered or nonchartered nonpublic school; a community school established under Chapter 3314. of the Revised Code; a STEM school established under Chapter 3326. of the Revised Code; or a college-preparatory boarding school established under Chapter 3328. of the Revised Code;
- (10) With respect to inhalers that may be possessed under section 5101.77 of the Revised Code, any of the following: a residential camp, as defined in section 2151.011 of the Revised Code; a child day camp, as defined in section 5104.01 of the Revised Code; or a child day camp operated by any county, township, municipal corporation, township park district created under section 511.18 of the Revised Code, park district created under section 1545.04 of the Revised Code, or joint recreation district established under section 755.14 of the Revised Code;
- (11) With respect to <u>naloxone</u> <u>overdose reversal drugs</u> that may be possessed under section 2925.61 of the Revised Code, a law enforcement agency and its peace officers;
- (12) With respect to <u>naloxone</u> <u>overdose reversal drugs</u> that may be possessed under section 4729.514 of the Revised Code for use in emergency situations or for personally furnishing supplies of <u>naloxone</u> <u>overdose reversal drugs</u>, a service entity, as defined in that section;
- (13) A facility that is owned and operated by the United States department of defense, the United States department of veterans affairs, or any other federal agency;
- (14) With respect to injectable or nasally administered glucagon that may be possessed under sections 3313.7115, 3313.7116, 3314.147, 3326.60, and 3328.38 of the Revised Code, any of the following: the board of education of a city, local, exempted village, or joint vocational school district; a chartered or nonchartered nonpublic school; a community school established under Chapter 3314. of the Revised Code; a STEM school established under Chapter 3326. of the Revised Code; or a college-preparatory boarding school established under Chapter 3328. of the Revised Code;
- (15) With respect to injectable or nasally administered glucagon that may be possessed under section 5101.78 of the Revised Code, any of the following: a residential camp, as defined in section 2151.011 of the Revised Code; a child day camp, as defined in section 5104.01 of the Revised Code; or a child day camp operated by any county, township, municipal corporation, township park district created under section 511.18 of the Revised Code, park district created under section 1545.04 of the Revised Code, or joint recreation district established under section 755.14 of the Revised Code.
- (B) If a person described in division (A) of this section is a pain management clinic or is operating a pain management clinic, the person shall hold a license as a terminal distributor of dangerous drugs with a pain management clinic classification issued under section 4729.552 of the Revised Code.
- (C) If a person described in division (A) of this section is operating a facility, clinic, or other location described in division (B) of section 4729.553 of the Revised Code that must hold a category III terminal distributor of dangerous drugs license with an office-based opioid treatment classification, the person shall hold a license with that classification.

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- (D) Any of the persons described in divisions (A)(1) to (12) of this section shall hold a license as a terminal distributor of dangerous drugs in order to possess, have custody or control of, and distribute any of the following:
 - (1) Dangerous drugs that are compounded or used for the purpose of compounding;
- (2) A schedule I, II, III, IV, or V controlled substance, as defined in section 3719.01 of the Revised Code.
- Sec. 4730.434. (A) As used in this section and in sections 4730.435 and 4730.436 of the Revised Code, "overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
- (B) Notwithstanding any provision of this chapter or rule adopted by the state medical board, a physician assistant who holds a valid prescriber number issued by the board and has been granted physician-delegated prescriptive authority may personally furnish a supply of <u>naloxone</u> overdose reversal drugs, or issue a prescription for-naloxone_such drugs, without having examined the individual to whom it may be administered if both of the following conditions are met:
- (1) The naloxone supply is furnished to, or the prescription is issued to and in the name of, a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (2) The physician assistant instructs the individual receiving the naloxone supply or prescription to summon emergency services as soon as practicable either before or after administering naloxone an overdose reversal drug to an individual apparently experiencing an opioid-related overdose.
- (B) (C) A physician assistant who under division (A) (B) of this section in good faith furnishes a supply of naloxone overdose reversal drugs or issues a prescription for naloxone overdose reversal drugs is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished or the prescription is issued: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.
- Sec. 4730.435. (A)(1) A physician assistant who holds a valid prescriber number issued by the state medical board, who has been granted physician-delegated prescriptive authority, and who has established a protocol that meets the requirements of division (C) of this section may authorize one or more other individuals to personally furnish a supply of naloxone overdose reversal drugs pursuant to the protocol to either of the following:
- (a) An individual who there is reason to believe is experiencing or at risk of experiencing an opioid-related overdose;
- (b) A family member, friend, or other person in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (2) An individual authorized under this section to personally furnish naloxone overdose reversal drugs may do so without having examined the individual to whom it the drug may be administered.
- (B) An individual authorized by a physician assistant under this section may personally furnish naloxone overdose reversal drugs to an individual described in division (A)(1)(a) or (b) of this section if both of the following conditions are met:
 - (1) The authorized individual complies with the protocol established by the authorizing

physician assistant, including having completed the training required by the protocol.

(2) The authorized individual instructs the individual to whom naloxone is overdose reversal drugs are furnished to summon emergency services as soon as practicable either before or after administering naloxone the drugs.

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- (C) A protocol established by a physician assistant for purposes of this section shall be established in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs <u>specified in the protocol</u>;
- (2) Precautions and contraindications concerning furnishing—naloxone_overdose_reversal_drugs;
- (3) Any limitations the physician assistant specifies concerning the individuals to whom naloxone overdose reversal drugs may be furnished;
- (4) The naloxone-dosage that may be furnished and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual will be authorized to furnish naloxone overdose reversal drugs;
- (7) Any instructions or training that the authorized individual must provide to an individual to whom naloxone is overdose reversal drugs are furnished.
- (D) A physician assistant who in good faith authorizes another individual to personally furnish naloxone overdose reversal drugs in accordance with a protocol established by the physician assistant under this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

An individual authorized under this section to personally furnish naloxone overdose reversal drugs who does so in good faith is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 4730.436. (A) As used in this section, "service entity" has the same meaning as in section 4729.514 of the Revised Code.

- (B) A physician assistant who holds a valid prescriber number issued by the state medical board, who has been granted physician-delegated prescriptive authority, and who has established a protocol under division (D) of this section may authorize an individual who is an employee, volunteer, or contractor of a service entity to administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose.
- (C) An individual authorized by a physician assistant under this section may administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose if all of the following conditions are met:
- (1) The naloxone overdose reversal drug is obtained from a service entity of which the authorized individual is an employee, volunteer, or contractor.
- (2) The authorized individual complies with the protocol established by the authorizing physician assistant.

- (3) The authorized individual summons emergency services as soon as practicable either before or after administering the naloxoneoverdose reversal drug.
- (D) A protocol established by a physician assistant for purposes of this section must be in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs specified in the protocol;
- (2) Precautions and contraindications concerning the administration of <u>naloxone_overdose_reversal_drugs</u>;
- (3) Any limitations the physician assistant specifies concerning the individuals to whom naloxone overdose reversal drugs may be administered;
- (4) The naloxone dosage that may be administered and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual can be authorized to administer-naloxone overdose reversal drugs.
- (E) A physician assistant who in good faith authorizes an individual to administer naloxone overdose reversal drugs under this section is not liable for or subject to any of the following for any act or omission of the authorized individual: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or administering naloxone overdose reversal drugs under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

This section does not eliminate, limit, or reduce any other immunity or defense that a service entity or an employee, volunteer, or contractor of a service entity may be entitled to under Chapter 2305. or any other provision of the Revised Code or under the common law of this state.

Sec. 4731.36. (A) Sections 4731.01 to 4731.47 of the Revised Code shall not prohibit service in case of emergency, domestic administration of family remedies, or provision of assistance to another individual who is self-administering drugs.

Sections 4731.01 to 4731.47 of the Revised Code shall not apply to any of the following:

- (1) A commissioned medical officer of the armed forces of the United States or an employee of the veterans administration of the United States or the United States public health service in the discharge of the officer's or employee's professional duties;
- (2) A dentist authorized under Chapter 4715. of the Revised Code to practice dentistry when engaged exclusively in the practice of dentistry or when administering anesthetics in the practice of dentistry;
- (3) A physician or surgeon in another state or territory who is a legal practitioner of medicine or surgery therein when providing consultation to an individual holding a license to practice issued under this chapter who is responsible for the examination, diagnosis, and treatment of has an established physician-patient relationship with the patient who is the subject of the consultation, if

one of the following applies:

- (a) The physician or surgeon does not provide consultation in this state on a regular or frequent basis.
- (b) The physician or surgeon provides the consultation without compensation of any kind, direct or indirect, for the consultation.
- (c) The consultation is part of the curriculum of a medical school or osteopathic medical school of this state or a program described in division (A)(2) of section 4731.291 of the Revised Code.
- (4) A physician or surgeon in another state or territory who is a legal practitioner of medicine or surgery therein and provided services to a patient in that state or territory, when providing, not later than one year after the last date services were provided in another state or territory, follow-up services in person or through the use of any communication, including oral, written, or electronic communication, in this state to the patient for the same condition;
- (5) A physician or surgeon residing on the border of a contiguous state and authorized under the laws thereof to practice medicine and surgery therein, whose practice extends within the limits of this state. Such practitioner shall not either in person or through the use of any communication, including oral, written, or electronic communication, open an office or appoint a place to see patients or receive calls within the limits of this state.
- (6) A board, committee, or corporation engaged in the conduct described in division (A) of section 2305.251 of the Revised Code when acting within the scope of the functions of the board, committee, or corporation;
- (7) The conduct of an independent review organization accredited by the superintendent of insurance under section 3922.13 of the Revised Code for the purpose of external reviews conducted under Chapter 3922. of the Revised Code.

As used in division (A)(1) of this section, "armed forces of the United States" means the army, air force, navy, marine corps, coast guard, and any other military service branch that is designated by congress as a part of the armed forces of the United States.

- (B)(1) Subject to division (B)(2) of this section, this chapter does not apply to a person who holds a current, unrestricted license to practice medicine and surgery or osteopathic medicine and surgery in another state when the person, pursuant to a written agreement with an athletic team located in the state in which the person holds the license, provides medical services to any of the following while the team is traveling to or from or participating in a sporting event in this state:
 - (a) A member of the athletic team;
- (b) A member of the athletic team's coaching, communications, equipment, or sports medicine staff;
 - (c) A member of a band or cheerleading squad accompanying the athletic team;
 - (d) The athletic team's mascot.
- (2) In providing medical services pursuant to division (B)(1) of this section, the person shall not provide medical services at a health care facility, including a hospital, an ambulatory surgical facility, or any other facility in which medical care, diagnosis, or treatment is provided on an inpatient or outpatient basis.
 - (C) Sections 4731.51 to 4731.61 of the Revised Code do not apply to any graduate of a

podiatric school or college while performing those acts that may be prescribed by or incidental to participation in an accredited podiatric internship, residency, or fellowship program situated in this state approved by the state medical board.

- (D) This chapter does not apply to an individual engaged in the practice of oriental medicine, or to an acupuncturist who complies with Chapter 4762. of the Revised Code.
 - (E) This chapter does not prohibit the administration of drugs by any of the following:
- (1) An individual who is licensed or otherwise specifically authorized by the Revised Code to administer drugs;
- (2) An individual who is not licensed or otherwise specifically authorized by the Revised Code to administer drugs, but is acting pursuant to the rules for delegation of medical tasks adopted under section 4731.053 of the Revised Code;
- (3) An individual specifically authorized to administer drugs pursuant to a rule adopted under the Revised Code that is in effect on April 10, 2001, as long as the rule remains in effect, specifically authorizing an individual to administer drugs.
- (F) The exemptions described in divisions (A)(3), (4), and (5) of this section do not apply to a physician or surgeon whose license to practice issued under this chapter is under suspension or has been revoked or permanently revoked by action of the state medical board.
- Sec. 4731.94. (A) As used in this section and <u>in sections</u> 4731.941, 4731.942, and 4731.943 of the Revised Code, "physician":
- (1) "Overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
- (2) "Physician" means an individual authorized under this chapter to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery.
- (B) Notwithstanding any provision of this chapter or rule adopted by the state medical board, a physician may personally furnish a supply of <u>naloxone</u> <u>overdose reversal drugs</u>, or issue a prescription for <u>naloxone</u> <u>overdose reversal drugs</u>, without having examined the individual to whom it may be administered if both of the following conditions are met:
- (1) The naloxone supply is furnished to, or the prescription is issued to and in the name of, a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.
- (2) The physician instructs the individual receiving the naloxone supply or prescription to summon emergency services as soon as practicable either before or after administering the naloxone an overdose reversal drug to an individual apparently experiencing an opioid-related overdose.
- (C) A physician who under division (B) of this section in good faith furnishes a supply of naloxone overdose reversal drugs or issues a prescription for naloxone overdose reversal drugs is not liable for or subject to any of the following for any act or omission of the individual to whom the naloxone is drugs are furnished or the prescription is issued: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.
- Sec. 4731.941. (A)(1) A physician who has established a protocol that meets the requirements of division (C) of this section may authorize one or more other individuals to personally furnish a supply of naloxone overdose reversal drugs pursuant to the protocol to either of the following:
 - (a) An individual who there is reason to believe is experiencing or at risk of experiencing an

opioid-related overdose;

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(b) A family member, friend, or other person in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.

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- (2) An individual authorized under this section to personally furnish <u>naloxone overdose</u> <u>reversal drugs</u> may do so without having examined the individual to whom it may be administered.
- (B) An individual authorized by a physician under this section may personally furnish naloxone overdose reversal drugs to an individual described in division (A)(1)(a) or (b) of this section if both of the following conditions are met:
- (1) The authorized individual complies with the protocol established by the authorizing physician, including having completed the training required by the protocol.
- (2) The authorized individual instructs the individual to whom naloxone is overdose reversal drugs are furnished to summon emergency services as soon as practicable either before or after administering naloxone the drugs.
- (C) A protocol established by a physician for purposes of this section shall be established in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> the overdose reversal drugs <u>specified in the protocol</u>;
- (2) Precautions and contraindications concerning furnishing—naloxone_overdose_reversal_drugs;
- (3) Any limitations the physician specifies concerning the individuals to whom naloxoneoverdose reversal drugs may be furnished;
- (4) The naloxone dosage that may be furnished and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record-keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual will be authorized to furnish naloxone overdose reversal drugs;
- (7) Any instructions or training that the authorized individual must provide to an individual to whom naloxone is overdose reversal drugs are furnished.
- (D) A physician who in good faith authorizes another individual to personally furnish naloxone overdose reversal drugs in accordance with a protocol established by the physician under this section is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

An individual authorized under this section to personally furnish naloxone overdose reversal drugs who does so in good faith is not liable for or subject to any of the following for any action or omission of the individual to whom the naloxone is drugs are furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sec. 4731.942. A physician may authorize one or more pharmacists and any of the pharmacy interns supervised by the pharmacist or pharmacists to use the protocol developed pursuant to rules adopted under section 4729.44 of the Revised Code for the purpose of dispensing naloxone overdose reversal drugs under section 4729.44 of the Revised Code.

Sec. 4731.943. (A) As used in this section, "service entity" has the same meaning as in

section 4729.514 of the Revised Code.

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- (B) A physician who has established a protocol under division (D) of this section may authorize an individual who is an employee, volunteer, or contractor of a service entity to administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose.
- (C) An individual authorized by a physician under this section may administer naloxone overdose reversal drugs to an individual who is apparently experiencing an opioid-related overdose if all of the following conditions are met:
- (1) The naloxone overdose reversal drug is obtained from a service entity of which the authorized individual is an employee, volunteer, or contractor.
- (2) The authorized individual complies with the protocol established by the authorizing physician.
- (3) The authorized individual summons emergency services as soon as practicable either before or after administering the <u>naloxone</u> overdose reversal drug.
- (D) A protocol established by a physician for purposes of this section must be in writing and include all of the following:
- (1) A description of the clinical pharmacology of <u>naloxone</u> <u>overdose reversal drugs specified</u> <u>in the protocol</u>;
- (2) Precautions and contraindications concerning the administration of <u>naloxone</u> <u>overdose</u> <u>reversal drugs</u>;
- (3) Any limitations the physician specifies concerning the individuals to whom naloxone overdose reversal drugs may be administered;
- (4) The naloxone dosage that may be administered and any variation in the dosage based on circumstances specified in the protocol;
 - (5) Labeling, storage, record-keeping, and administrative requirements;
- (6) Training requirements that must be met before an individual can be authorized to administer-naloxone overdose reversal drugs.
- (E) A physician who in good faith authorizes an individual to administer <u>naloxone-overdose</u> <u>reversal drugs</u> under this section is not liable for or subject to any of the following for any act or omission of the authorized individual: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or administering naloxone overdose reversal drugs under this section, unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

This section does not eliminate, limit, or reduce any other immunity or defense that a service entity or an employee, volunteer, or contractor of a service entity may be entitled to under Chapter 2305. or any other provision of the Revised Code or under the common law of this state.

Sec. 4765.44. (A) As used in this section, "law enforcement agency" has and "overdose reversal drug" have the same meaning meanings as in section 2925.61 of the Revised Code.

- (B)(1) Upon request of a law enforcement agency as described in division (B)(2) of this section, emergency medical service personnel and any firefighter or volunteer firefighter acting within the course of the firefighting profession shall disclose the name and address, if known, of an individual to whom the emergency medical services service personnel, firefighter, or volunteer firefighter administered naloxone an overdose reversal drug due to an actual or suspected drug overdose, unless the emergency medical services service personnel, firefighter, or volunteer firefighter reasonably believes that the law enforcement agency making the request does not have jurisdiction over the place where the naloxone overdose reversal drug was administered.
- (2) A law enforcement agency may request a name and address of an individual under division (B)(1) of this section for the purposes of investigation or treatment referral and may use a name and address received under that division for either or both of those purposes.
- Sec. 4765.45. (A) If the department of public safety collects any of the following information regarding the administration of naloxone-overdose reversal drugs, as defined in section 4729.01 of the Revised Code, by emergency medical service personnel or any firefighter or volunteer firefighter, the department of public safety shall report the information for the previous month to the department of health on a monthly basis and in a manner prescribed by the department of health:
- (1) The five-digit postal zip code plus four-digit add-on where the naloxone overdose reversal drug was administered;
 - (2) The date on which the naloxone overdose reversal drug was administered;
 - (3) The number of doses administered;
- (4) The name of the emergency medical service organization or fire department that administered the naloxone overdose reversal drug;
 - (5) Whether or not an overdose was reversed:
- (6) Whether the individual to whom naloxone the overdose reversal drug was administered was taken to a hospital;
 - (7) If known, the individual's age;
 - (8) If known, the United States postal zip code in which the individual resides.

When reporting to the department of health, the department of public safety shall not include any information that identifies or tends to identify specific individuals to whom naloxone was overdose reversal drugs were administered.

- (B) Each month, the department of health shall compile the information received under division (A) of this section, organize it by county, and forward it to each board of alcohol, drug addiction, and mental health services in this state.
- (C) The department of health may adopt rules as necessary to implement this section. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

Sec. 4765.52. (A) As used in this section, "veterinarian":

- (1) "Veterinarian" means an individual licensed under Chapter 4741. of the Revised Code to practice veterinary medicine.
- (2) "Overdose reversal drug" has the same meaning as in section 4729.01 of the Revised Code.
- (B) In the course of an emergency medical response, fire response, or response to aid law enforcement, a first responder, emergency medical technician-basic, emergency medical technician-

intermediate, or emergency medical technician-paramedic may provide any of the following emergency medical services to a dog or cat prior to the dog or cat being transferred to a veterinarian for further treatment, but only to the extent that the first responder, EMT-basic, EMT-I, or paramedic is authorized by this chapter or rules adopted pursuant to this chapter to perform the corresponding form of each of the services when providing emergency medical services to a human patient:

- (1) Opening and manually maintaining an airway;
- (2) Giving mouth to snout or mouth to barrier ventilation;
- (3) Administering oxygen;
- (4) Managing ventilation by mask;
- (5) Controlling hemorrhage with direct pressure;
- (6) Immobilizing fractures;
- (7) Bandaging;
- (8) Administering—naloxone—hydrochloride_an overdose reversal drug, if administering the drug has been authorized by the medical director or cooperating physician advisory board of an emergency medical service organization and the drug is administered either in accordance with a written protocol established and provided by a veterinarian or pursuant to a consultation with a veterinarian.
- (C) In addition to the immunity from civil liability granted under division (A) of section 4765.49 of the Revised Code, a first responder, EMT-basic, EMT-I, paramedic, or medical director or member of a cooperating physician advisory board of an emergency medical service organization is not subject to prosecution in a criminal proceeding or professional disciplinary action allegedly arising from an act or omission associated with the provision of emergency medical services to a dog or cat under this section, unless the act or omission constitutes willful or wanton misconduct.
- (D)(1) An emergency medical service organization is not liable for or subject to any of the following that allegedly arises from an act or omission associated with the provision of emergency medical services to a dog or cat under this section, unless the act or omission constitutes willful or wanton misconduct: damages in a civil action for injury, death, or loss to person or property; prosecution in a criminal proceeding; or professional disciplinary action.
- (2) The state board of pharmacy shall not take disciplinary action against an emergency medical service organization's license issued under Chapter 4729. of the Revised Code as a terminal distributor of dangerous drugs for reasons arising from an act or omission associated with the provision of emergency medical services to a dog or cat under this section, unless the act or omission constitutes willful or wanton misconduct.
- (E)(1) Notwithstanding any conflicting provision of Chapter 4741. of the Revised Code or rule adopted by the state veterinary medical licensing board, a veterinarian may establish and provide a written protocol to, or consult with, a first responder, EMT-basic, EMT-I, or paramedic for the purpose of enabling the provision of emergency medical services to a dog or cat under this section.
- (2) A veterinarian who acts in good faith in accordance with this section is not liable for or subject to any of the following for any act or omission associated with a first responder's, EMT-basic's, EMT-I's, or paramedic's provision of emergency medical services to a dog or cat under this section: damages in any civil action; prosecution in any criminal proceeding; or professional disciplinary action.

Section 2. That existing sections 2925.61, 3707.56, 3707.561, 3707.562, 3712.01, 3712.031, 3712.061, 3719.05, 3719.06, 4723.484, 4723.485, 4723.486, 4729.01, 4729.29, 4729.44, 4729.51, 4729.511, 4729.514, 4729.515, 4729.541, 4730.434, 4730.435, 4730.436, 4731.36, 4731.94, 4731.941, 4731.942, 4731.943, 4765.44, 4765.45, and 4765.52 of the Revised Code are hereby repealed.

Section 3. In addition to the exceptions set forth in division (C) of section 3719.06 of the Revised Code, for twelve months after the effective date of this section, a licensed health professional authorized to prescribe drugs may issue a written prescription for a schedule II controlled substance if the drug is to be dispensed by a pharmacist employed by or under contract with any state agency.

Section 4. That Section 337.205 of H.B. 110 of the 134th General Assembly be amended to read as follows:

Sec. 337.205. (A) As used in this section:

- (1) "Controlled substance" and "schedule II" have the same meanings as in section 3719.01 of the Revised Code.
 - (2) "Lockable container" means a container that meets both of the following requirements:
 - (a) Has special packaging;
 - (b) Has a locking mechanism that can be unlocked in any of the following ways:
 - (i) Physically by using a key or other object capable of unlocking a locked container;
- (ii) Physically by entering a numeric or alphanumeric combination code that is selected by the patient or an individual acting on behalf of the patient;
- (iii) Electronically by entering a password or code that is selected by the patient or an individual acting on behalf of the patient.
- (3) "Special packaging" has the same meaning as in the "Poison Prevention Packaging Act of 1970," 15 U.S.C. 1471.
- (4) "Tamper-evident container" means a container that meets both of the following requirements:
 - (a) Has special packaging;
- (b) Displays a visual sign when there is unauthorized entry into the container or has a numerical display of the time that the container was last opened.
 - (5) "Third-party payer" has the same meaning as in section 3901.38 of the Revised Code.
- (B)(1) Subject to division (C) of this section, the Department of Mental Health and Addiction Services shall operate a two-year pilot program under which all schedule II controlled substances in solid oral dosage formulations are dispensed by participating pharmacies in lockable containers or tamper-evident containers. Under the pilot program, the Department shall reimburse participating pharmacies for the expenses they incur in participating in the program, including a fee determined by the Department for dispensing all schedule II controlled substances in solid oral dosage formulations in those containers.
 - (2) The Department shall select the pharmacies to be included in the pilot program. Pharmacy

participation in the pilot program is voluntary. Any pharmacy may volunteer to participate in the pilot program by notifying the Department. Of the volunteering pharmacies, the Department shall select those to be included in the pilot program.

- (3) In each of the pilot program's participating pharmacies, all of the following apply:
- (a) A pharmacist shall dispense a schedule II controlled substance in a solid oral dosage formulation in a lockable container or tamper-evident container unless the patient or an individual acting on behalf of the patient requests that the drug not be dispensed in such a container.
- (b) The expenses that the pharmacy incurs for the containers shall not be included in any amount that is to be paid by a patient, an individual acting on behalf of the patient, or a third-party payer.
- (4) A pharmacist, pharmacist's delegate, or pharmacy is not liable for damages in any civil action, subject to prosecution in any criminal proceeding, or subject to professional disciplinary action for actions taken in good faith in accordance with this section, including either of the following:
- (a) Disclosing information to aid a patient or an individual acting on the patient's behalf in obtaining entry into a lockable container or tamper-evident container;
- (b) Dispensing a drug in a lockable container or tamper-evident container that fails to restrict unauthorized access into the container.
- (5) Not later than six months after the pilot program ends, the Department shall prepare a report describing its findings regarding the impact of the program. In evaluating the pilot program's impact, the Department shall contract with a third-party research organization to assess whether a measured decrease in diversion of schedule II controlled substances occurred regarding drugs dispensed through the program as compared with those dispensed outside of the program. On completion of the report, the Department shall submit the report to the General Assembly in accordance with section 101.68 of the Revised Code.
- (C) The pilot program shall be operated for two years or until funds appropriated for the program are expended, whichever occurs first.
- (D) The Department may adopt rules to administer the pilot program. Any rules shall be adopted in accordance with Chapter 119. of the Revised Code.
- (E) Nothing in this section precludes a pharmacy that is not participating in the pilot program from stocking lockable containers or tamper-evident containers and offering to have drugs containing a schedule II controlled substance dispensed in those containers.

Section 5. That existing Section 337.205 of H.B. 110 of the 134th General Assembly is hereby repealed.

Section 6. The General Assembly, applying the principle stated in division (B) of section 1.52 of the Revised Code that amendments are to be harmonized if reasonably capable of simultaneous operation, finds that the following sections, presented in this act as composites of the sections as amended by the acts indicated, are the resulting versions of the sections in effect prior to the effective date of the sections as presented in this act:

Section 4729.01 of the Revised Code as amended by H.B. 24, H.B. 197, H.B. 203, H.B. 231, H.B. 341, and S.B. 57, all of the 133rd General Assembly.

Section 4729.51 of the Revised Code as amended by both H.B. 231 and H.B. 341 of the 133rd General Assembly.

Section 4729.541 of the Revised Code as amended by H.B. 231, H.B. 341, and S.B. 276, all of the 133rd General Assembly.

Speaker	of the House of Representatives	
	President	of the Senate
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Approved	, ′	20

The section numbering of law of a general and permanent nature is complete and in conformity with the Revised Code.		
	Director, Legislative Service Commission.	
	ce of the Secretary of State at Columbus, Ohio, on the, A. D. 20	
	Secretary of State.	
File No	Effective Date	