

**As Introduced**

**135th General Assembly  
Regular Session  
2023-2024**

**S. B. No. 255**

**Senators Huffman, S., Johnson**

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**A BILL**

To amend sections 313.02, 313.10, 313.12, 313.161, 1  
325.15, 2335.061, 4723.431, and 4730.19 of the 2  
Revised Code to revise the law governing 3  
coroners and death certificates. 4

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

**Section 1.** That sections 313.02, 313.10, 313.12, 313.161, 5  
325.15, 2335.061, 4723.431, and 4730.19 of the Revised Code be 6  
amended to read as follows: 7

**Sec. 313.02.** (A) (1) Except as provided in division (A) (2) 8  
of this section, no person shall be eligible to the office of 9  
coroner except a physician who has been licensed under Chapter 10  
4731. of the Revised Code to practice as a physician in this 11  
state medicine and surgery or osteopathic medicine and surgery 12  
for a period of at least two years immediately preceding 13  
election or appointment as a coroner, and who is in good 14  
standing in the person's profession. 15

(2) No person shall be eligible to the office of coroner 16  
of a charter county except a physician who is licensed under 17  
Chapter 4731. of the Revised Code to practice as a physician in 18  
this state medicine and surgery or osteopathic medicine and 19

surgery and who is in good standing in the person's profession. 20

(B) (1) Beginning in calendar year 2000 and in each fourth 21  
year thereafter, each newly elected coroner, after the general 22  
election but prior to commencing the term of office to which 23  
elected, shall attend and successfully complete sixteen hours of 24  
continuing education at programs sponsored by the Ohio state 25  
coroners association. Within ninety days after appointment to 26  
the office of coroner under section 305.02 of the Revised Code, 27  
the newly appointed coroner shall attend and successfully 28  
complete sixteen hours of continuing education at programs 29  
sponsored by the association. Hours of continuing education 30  
completed under the requirement described in division (B) (1) of 31  
this section shall not be counted toward fulfilling the 32  
continuing education requirement described in division (B) (2) of 33  
this section. 34

As used in division (B) (1) of this section, "newly elected 35  
coroner" means a person who did not hold the office of coroner 36  
on the date the person was elected coroner. 37

(2) Except as otherwise provided in division (B) (2) of 38  
this section, beginning in calendar year 2001, each coroner, 39  
during the coroner's four-year term, shall attend and 40  
successfully complete thirty-two hours of continuing education 41  
at programs sponsored by the Ohio state coroners association. 42  
Except as otherwise provided in division (B) (2) of this section, 43  
each coroner shall attend and successfully complete twenty-four 44  
of these thirty-two hours at statewide meetings, and eight of 45  
these thirty-two hours at regional meetings, sponsored by the 46  
association. The association may approve attendance at 47  
continuing education programs it does not sponsor but, if 48  
attendance is approved, successful completion of hours at these 49

programs shall be counted toward fulfilling only the twenty- 50  
four-hour requirement described in division (B) (2) of this 51  
section. 52

(3) Upon successful completion of a continuing education 53  
program required by division (B) (1) or (2) of this section, the 54  
person who successfully completes the program shall receive from 55  
the association or the sponsoring organization a certificate 56  
indicating that the person successfully completed the program. 57

**Sec. 313.10.** (A) (1) Except as otherwise provided in this 58  
section, the records of the coroner who has jurisdiction over 59  
the case, including, but not limited to, the detailed 60  
descriptions of the observations written during the progress of 61  
an autopsy and the conclusions drawn from those observations 62  
filed in the office of the coroner under division (A) of section 63  
313.13 of the Revised Code, made personally by the coroner or by 64  
anyone acting under the coroner's direction or supervision, are 65  
public records. Those records, or transcripts or photostatic 66  
copies of them, certified by the coroner shall be received as 67  
evidence in any criminal or civil action or proceeding in a 68  
court in this state, as to the facts contained in those records. 69  
The coroner of the county where the death was pronounced shall 70  
be responsible for the release of all public records relating to 71  
that death. 72

(2) Except as otherwise provided in division (D) or (E) of 73  
this section, the following records in a coroner's office are 74  
not public records: 75

(a) Preliminary autopsy and investigative notes and 76  
findings made by the coroner or by anyone acting under the 77  
coroner's direction or supervision; 78

(b) Photographs of a decedent made by the coroner or by anyone acting under the coroner's direction or supervision;	79 80
(c) Suicide notes;	81
(d) Medical and psychiatric records provided to the coroner, a deputy coroner, or a representative of the coroner or a deputy coroner under section 313.091 of the Revised Code;	82 83 84
(e) Records of a deceased individual that are confidential law enforcement investigatory records as defined in section 149.43 of the Revised Code;	85 86 87
(f) Laboratory reports generated from the analysis of physical evidence by the coroner's laboratory that is discoverable under Criminal Rule 16.	88 89 90
(3) In the coroner's discretion, photographs of a decedent may be used for medical, legal, or educational purposes.	91 92
(B) All records in the coroner's office that are public records are open to inspection by the public, and any person may receive a copy of any such record or part of it upon demand in writing, accompanied by payment of a record retrieval and copying fee, at the rate of twenty-five cents per page or a minimum fee of one dollar.	93 94 95 96 97 98
(C) (1) The coroner shall provide a copy of the full and complete records of the coroner with respect to a decedent to a person who makes a written request as the next of kin of the decedent. The following persons may make a request pursuant to this division as the next of kin of a decedent:	99 100 101 102 103
(a) The surviving spouse of the decedent;	104
(b) If there is no surviving spouse, or if the surviving spouse has died without having made a request pursuant to this	105 106

division, any child of the decedent over eighteen years of age, 107  
with each child over eighteen years of age having an independent 108  
right to make a request pursuant to this division; 109

(c) If there is no surviving spouse or child over eighteen 110  
years of age, or if the surviving spouse and all children over 111  
eighteen years of age have died without having made a request 112  
pursuant to this division, the parents of the decedent, with 113  
each parent having an independent right to make a request 114  
pursuant to this division; 115

(d) If there is no surviving spouse, child over eighteen 116  
years of age, or parents of the decedent, or if all have died 117  
without having made a request pursuant to this division, the 118  
brothers and sisters of the decedent, whether of the whole or 119  
the half blood, with each having an independent right to make a 120  
request pursuant to this division. 121

(2) If there is no surviving person who may make a written 122  
request as next of kin for a copy of the full and complete 123  
records of the coroner pursuant to division (C) (1) of this 124  
section, or if all next of kin of the decedent have died without 125  
having made a request pursuant to that division, the coroner 126  
shall provide a copy of the full and complete records of the 127  
coroner with respect to a decedent to the representative of the 128  
estate of the decedent who is the subject of the records upon 129  
written request made by the representative. 130

(D) A journalist may submit to the coroner a written 131  
request to view suicide notes, photographs of the decedent made 132  
by the coroner or by anyone acting under the coroner's 133  
discretion or supervision, or preliminary autopsy and 134  
investigative notes and findings but not records of a deceased 135  
individual that are confidential law enforcement investigatory 136

records as defined in section 149.43 of the Revised Code. The 137  
request shall include the journalist's name and title and the 138  
name and address of the journalist's employer and state that the 139  
granting of the request would be in the best interest of the 140  
public. If a journalist submits a written request to the coroner 141  
to view the records described in this division and the final 142  
autopsy is not yet completed, the coroner ~~shall~~ may grant the 143  
journalist's request. ~~The~~ After the final autopsy report and 144  
final death certification are complete, if a journalist submits 145  
a written request to the coroner to view the records described 146  
in this division, the coroner shall grant the journalist's 147  
request. 148

A journalist shall not copy the preliminary autopsy and 149  
investigative notes and findings, suicide notes, or photographs 150  
of the decedent. 151

(E) (1) An insurer may submit to the coroner a written 152  
request to obtain a copy of the full and complete records of the 153  
coroner with respect to a deceased person. The request shall 154  
include the name of the deceased person, the type of policy to 155  
which the written request relates, and the name and address of 156  
the insurer. 157

(2) If an insurer submits a written request to the coroner 158  
to obtain a copy of records pursuant to division (E) (1) of this 159  
section, the coroner shall grant that request. 160

(3) Upon the granting of a written request to obtain a 161  
copy of records by the coroner, the insurer may utilize the 162  
records for the following purposes: 163

(a) To investigate any first party claim or third party 164  
claim asserted under a policy of insurance issued by the insurer 165

that arises from the death of the deceased person;	166
(b) To determine coverage for any first party claim or	167
third party claim asserted under a policy of insurance issued by	168
the insurer that arises from the death of the deceased person;	169
(c) To determine the insurer's liability for any first	170
party claim or third party claim asserted under a policy of	171
insurance issued by the insurer that arises from the death of	172
the deceased person.	173
(4) Prior to the delivery of records that are the subject	174
of a request made pursuant to division (E) (1) of this section,	175
the coroner may require the insurer who submitted the written	176
request for the records to provide a payment to the coroner of a	177
record retrieval and copying fee at the rate of twenty-five	178
cents per page or a minimum fee of one dollar.	179
(5) Any records produced by the coroner in response to a	180
written request under division (E) (1) of this section shall	181
remain in the care, custody, and control of the insurer and its	182
employees or representatives at all times. The insurer may not	183
release or disclose the records to any other person unless any	184
of the following apply:	185
(a) The release of the records is reasonably necessary to	186
further a purpose described in division (E) (3) of this section.	187
(b) A court of competent jurisdiction orders the insurer	188
to produce the records.	189
(c) The insurer is required to produce the records in	190
response to a civil or criminal subpoena.	191
(d) The insurer is responding to a request for the records	192
from a law enforcement agency, the department of insurance or a	193

department of insurance from another state, or another	194
governmental authority.	195
(F) The coroner may contact the decedent's next of kin to	196
inform the next of kin that a journalist or an insurer has	197
submitted a written request pursuant to division (D) or (E) of	198
this section and whether the coroner has granted the	199
journalist's or the insurer's request.	200
(G) As used in this section:	201
(1) "Full and complete records of the coroner" includes,	202
but is not limited to, the following:	203
(a) The detailed descriptions of the observations written	204
by the coroner or by anyone acting under the coroner's direction	205
or supervision during the progress of an autopsy and the	206
conclusions drawn from those observations that are filed in the	207
office of the coroner under division (A) of section 313.13 of	208
the Revised Code;	209
(b) Preliminary autopsy and investigative notes and	210
findings made by the coroner or by anyone acting under the	211
coroner's direction or supervision;	212
(c) Photographs of a decedent made by the coroner or by	213
anyone acting under the coroner's direction or supervision;	214
(d) Suicide notes;	215
(e) Medical and psychiatric records provided to the	216
coroner, a deputy coroner, or a representative of the coroner or	217
a deputy coroner under section 313.091 of the Revised Code;	218
(f) Records of a deceased individual that are confidential	219
law enforcement investigatory records as defined in section	220
149.43 of the Revised Code;	221



(g) Laboratory reports generated from the analysis of 222  
physical evidence by the coroner's laboratory that is 223  
discoverable under Criminal Rule 16. 224

(2) "Insurer" has the same meaning as in section 3901.07 225  
of the Revised Code. 226

(3) "Journalist" has the same meaning as in section 149.43 227  
of the Revised Code. 228

**Sec. 313.12.** ~~(A)(1)~~ (1) When any person dies as a result of 229  
~~criminal or other violent means, by casualty, by suicide, or in~~ 230  
~~any suspicious or unusual manner, when any person, including a~~ 231  
~~child under two years of age, dies suddenly when in apparent~~ 232  
~~good health, or when any person with a developmental disability~~ 233  
~~dies regardless of the circumstances~~ in circumstances as 234  
described in division (A)(2) of this section, the physician 235  
called in attendance, ~~or any member of an ambulance service,~~ 236  
~~emergency squad, or law enforcement agency and any of the~~ 237  
following who obtains knowledge thereof arising from the 238  
person's duties, shall immediately notify the office of the 239  
coroner of the known facts concerning the time, place, manner, 240  
and circumstances of the death, and any other information that 241  
is required pursuant to sections 313.01 to 313.22 of the Revised 242  
Code: 243

(a) A health care worker caring for the person; 244

(b) Any member of an ambulance service or emergency squad; 245

(c) A law enforcement agency. 246

(2) The notification required by division (A)(1) of this 247  
section applies in all of the following circumstances: 248

(a) When any person dies as a result of criminal or other 249

<u>violent means, by casualty, by suicide, or in any suspicious or</u>	250
<u>unusual manner;</u>	251
<u>(b) When any person, including a child under two years of</u>	252
<u>age, dies suddenly when in apparent good health;</u>	253
<u>(c) When any person with a developmental disability dies</u>	254
<u>regardless of the circumstances.</u>	255
<u>(3) In such cases, the case of a death in circumstances as</u>	256
<u>described in division (A) (2) of this section, if a request is</u>	257
<u>made for cremation, the funeral director called in attendance</u>	258
<u>shall immediately notify the coroner.</u>	259
<u>(B) As used in this section, "developmental:</u>	260
<u>(1) "Developmental disability" has the same meaning as in</u>	261
<u>section 5123.01 of the Revised Code.</u>	262
<u>(2) "Health care worker" means any individual licensed or</u>	263
<u>otherwise authorized by the state to practice a health care</u>	264
<u>profession and any other individual who provides health-related</u>	265
<u>services in any setting as part of the individual's employment</u>	266
<u>or otherwise for remuneration.</u>	267
<b>Sec. 313.161.</b> (A) Whenever an autopsy is performed,	268
<u>including any individual component of an autopsy as defined in</u>	269
<u>section 313.123 of the Revised Code, and the injury causing</u>	270
<u>death occurred within the boundaries of a county other than the</u>	271
<u>one in which the autopsy was performed, such other county shall</u>	272
<u>pay the costs of the autopsy, including associated</u>	273
<u>transportation costs.</u> The cost of such autopsy shall be no	274
greater than the actual value of the <u>transportation of the body,</u>	275
<u>services of the technicians, and materials used. Money derived</u>	276
<u>from the fees paid for such autopsies shall be credited to the</u>	277
<u>coroner's laboratory fund created in section 313.16 of the</u>	278

Revised Code.	279
(B) (1) Whenever an autopsy is performed, <u>including any individual component of an autopsy as defined in section 313.123 of the Revised Code,</u> and the person who died was an inmate of a state correctional facility, the department of rehabilitation and correction or the department of youth services, as appropriate, shall pay the costs of the autopsy, <u>including associated transportation costs.</u> The costs of the autopsy shall be no greater than the actual value of the transportation of the body, services of the technicians, and the facilities and materials used. Money derived from the fees paid for such autopsies shall be credited to the coroner's laboratory fund created in section 313.16 of the Revised Code.	280 281 282 283 284 285 286 287 288 289 290 291
(2) As used in this division, "state correctional facility" means a "state correctional institution," as defined in section 2967.01 of the Revised Code, a state correctional institution that is privately operated and managed pursuant to section 9.06 of the Revised Code, and an "institution," as defined in section 5139.01 of the Revised Code.	292 293 294 295 296 297
<b>Sec. 325.15.</b> (A) Each coroner shall be classified, for salary purposes, according to the population of the county. All coroners shall receive annual compensation in accordance with the following schedules and in accordance with section 325.18 of the Revised Code:	298 299 300 301 302
CLASSIFICATION AND COMPENSATION SCHEDULE	303
FOR CALENDAR YEAR 2018 FOR	304
CORONERS WITH A PRIVATE PRACTICE	305

306

	1	2	3
A	Class	Population Range	Compensation
B	1	1 - 55,000	\$30,993
C	2	55,001 - 95,000	45,384
D	3	95,001 - 200,000	56,458
E	4	200,001 - 400,000	69,739
F	5	400,001 - 1,000,000	78,594
G	6	1,000,001 or more	83,310

CLASSIFICATION AND COMPENSATION SCHEDULE 307

FOR CALENDAR YEAR 2018 FOR 308

CORONERS WITHOUT A PRIVATE PRACTICE 309

310

	1	2	3
A	Class	Population Range	Compensation
B	3	175,001 - 200,000	\$127,563
C	4	200,001 - 400,000	127,563
D	5	400,001 - 1,000,000	130,661
E	6	1,000,001 or more	133,759

CLASSIFICATION AND COMPENSATION SCHEDULE	311
FOR CALENDAR YEAR 2019 FOR CORONERS	312
WITH A PRIVATE PRACTICE	313

314

	1	2	3
A	Class	Population Range	Compensation
B	1	1 - 55,000	\$32,543
C	2	55,001 - 95,000	47,653
D	3	95,001 - 200,000	59,281
E	4	200,001 - 400,000	73,226
F	5	400,001 - 1,000,000	82,524
G	6	1,000,001 or more	87,476

CLASSIFICATION AND COMPENSATION SCHEDULE	315
FOR CALENDAR YEAR 2019 FOR CORONERS	316
WITHOUT A PRIVATE PRACTICE	317

318

	1	2	3
A	Class	Population Range	Compensation

B	3	175,001 - 200,000	\$133,941
C	4	200,001 - 400,000	133,941
D	5	400,001 - 1,000,000	137,194
E	6	1,000,001 or more	140,447

CLASSIFICATION AND COMPENSATION SCHEDULE	319
FOR CALENDAR YEAR 2020 FOR CORONERS	320
WITH A PRIVATE PRACTICE	321

322

	1	2	3
A	Class	Population Range	Compensation
B	1	1 - 55,000	\$34,170
C	2	55,001 - 95,000	50,036
D	3	95,001 - 200,000	62,245
E	4	200,001 - 400,000	76,887
F	5	400,001 - 1,000,000	86,650
G	6	1,000,001 or more	91,849

CLASSIFICATION AND COMPENSATION SCHEDULE	323
FOR CALENDAR YEAR 2020 FOR CORONERS	324
WITHOUT A PRIVATE PRACTICE	325

326

	1	2	3
A	Class	Population Range	Compensation
B	3	175,001 - 200,000	\$140,638
C	4	200,001 - 400,000	140,638
D	5	400,001 - 1,000,000	144,054
E	6	1,000,001 or more	147,469

(B) (1) A coroner in a county with a population of one hundred seventy-five thousand one or more shall not engage in the private practice of medicine unless, before taking office, the coroner notifies the board of county commissioners of the intention to engage in that private practice. A coroner in such a county shall elect to engage or not to engage in the private practice of medicine before the commencement of each new term of office. A coroner in such a county who engages in the private practice of medicine, but who intends not to engage in the private practice of medicine during the coroner's next term of office, shall so notify the board of county commissioners as specified in this division. For a period of six months after taking office, a coroner who elects not to engage in the private practice of medicine may engage in the private practice of medicine, without any reduction of compensation as provided in division (A) of this section and in section 325.18 of the Revised Code, for the purpose of concluding the affairs of the coroner's private practice of medicine.

(2) A coroner in a county with a population of one hundred seventy-five thousand one or more who elects not to engage in

the private practice of medicine under division (B) (1) of this 347  
section may, during the coroner's term of office, elect to 348  
engage in the private practice of medicine by notifying the 349  
board in writing of the intention to so engage. The notice shall 350  
state the date on which the coroner will commence the private 351  
practice of medicine and shall be given to the board at least 352  
thirty days before that date. On the date stated in the notice, 353  
the coroner's compensation shall be reduced as provided in 354  
division (A) of this section and in section 325.18 of the 355  
Revised Code for coroners with a private practice. 356

(C) Each coroner who is the coroner in a county with a 357  
population of one hundred seventy-five thousand one or more and 358  
who is without a private practice of medicine shall receive 359  
supplemental compensation of an additional fifty per cent of the 360  
annual compensation calculated under division (A) of this 361  
section and section 325.18 of the Revised Code in each calendar 362  
year in which the office of the coroner satisfies all of the 363  
following: 364

(1) The office operates as a regional forensic pathology 365  
examination referral center, and the operation generates 366  
coroner's laboratory fund income, for purposes of section 313.16 367  
of the Revised Code, that is in excess of the fund's expenses 368  
and is sufficient to provide the supplemental compensation 369  
specified in division (C) of this section; 370

(2) The coroner is a forensic pathologist certified by the 371  
American board of pathology; and 372

(3) The coroner performs a minimum of seventy-five post 373  
mortem examinations annually. 374

(D) Each coroner who is the coroner in a county with a 375



population of one hundred seventy-five thousand one or more and 376  
who is without a private practice of medicine and does not 377  
operate a regional forensic pathology examination referral 378  
center may, on approval of the board of county commissioners, 379  
receive supplemental compensation of up to an additional twenty- 380  
five per cent of the annual compensation calculated under 381  
division (A) of this section and section 325.18 of the Revised 382  
Code in each calendar year in which the coroner is a forensic 383  
pathologist certified by the American board of pathology and is 384  
performing the forensic examinations of the county. 385

(E) As used in this section, "private practice of 386  
medicine" includes both of the following: 387

(1) The provision of services for the diagnosis, 388  
prevention, treatment, cure, or relief of a health condition, 389  
illness, injury, or disease for remuneration; 390

(2) The performance of an autopsy at the request of 391  
another person, including another coroner, a hospital, a 392  
business entity, an institution of higher education, or any 393  
other person. 394

"Private practice" refers to the private practice of 395  
medicine, as described in this division. 396

**Sec. 2335.061.** (A) As used in this section: 397

(1) "Coroner" has the same meaning as in section 313.01 of 398  
the Revised Code, and includes the following: 399

(a) The coroner of a county other than a county in which 400  
the death occurred or the dead human body was found if the 401  
coroner of that other county performed services for the county 402  
in which the death occurred or the dead human body was found; 403

(b) A medical examiner appointed by the governing authority of a county to perform the duties of a coroner set forth in Chapter 313. of the Revised Code.

~~(2) "Deposition fee" means the amount derived by multiplying the hourly rate by the number of hours a coroner or deputy coroner spent preparing for and giving expert testimony at a deposition in a civil action pursuant to this section.~~

~~(3) "Deputy coroner" means a pathologist serving as a deputy coroner.~~

~~(4) (3) "Expert testimony" means testimony given by a coroner or deputy coroner as an expert witness pursuant to this section and the Rules of Evidence.~~

~~(5) (4) "Fact testimony" means testimony given by a coroner or deputy coroner regarding the performance of the duties of the coroner as set forth in Chapter 313. of the Revised Code. "Fact testimony" does not include expert testimony.~~

~~(6) "Hourly rate" means the compensation established in sections 325.15 and 325.18 of the Revised Code for a coroner without a private practice of medicine at the class 8 level for calendar year 2001 and thereafter, divided by two thousand eighty.~~

~~(7) "Testimonial fee" means the amount derived by multiplying the hourly rate by six and multiplying the product by the number of hours that a coroner or deputy coroner spent preparing for and giving expert testimony at a trial or hearing in a civil action pursuant to this section.~~

(B) (1) A party may subpoena a coroner or deputy coroner to give expert testimony at a trial, hearing, or deposition in a

civil action only upon filing with the court a notice that 433  
includes all of the following: 434

(a) The name of the coroner or deputy coroner whose 435  
testimony is sought; 436

(b) A brief statement of the issues upon which the party 437  
seeks expert testimony from the coroner or deputy coroner; 438

(c) An acknowledgment by the party that the giving of 439  
expert testimony by the coroner or deputy coroner at the trial, 440  
hearing, or deposition is governed by this section and that the 441  
party will comply with all of the requirements of this section; 442

(d) A statement of the obligations of the coroner or 443  
deputy coroner under division (C) of this section. 444

(2) The notice under division (B) (1) of this section shall 445  
be served together with the subpoena. 446

(C) A party that obtains the expert testimony of a coroner 447  
or deputy coroner at a trial, hearing, or deposition in a civil 448  
action pursuant to division (B) or (D) of this section shall pay 449  
to the treasury of the county in which the coroner or deputy 450  
coroner holds office or is appointed or employed a ~~testimonial~~ 451  
~~fee or deposition fee, whichever is applicable,~~ of three hundred 452  
fifty dollars per hour spent preparing for and giving expert 453  
testimony at a trial, hearing, or deposition in a civil action, 454  
within thirty days after receiving the statement described in 455  
this division. Upon the conclusion of the coroner's or deputy 456  
coroner's expert testimony, the coroner or deputy coroner shall 457  
file a statement with the court on behalf of the county in which 458  
the coroner or deputy coroner holds office or is appointed or 459  
employed showing the fee due and how the coroner or deputy 460  
coroner calculated the fee. The coroner or deputy coroner shall 461

serve a copy of the statement on each of the parties. 462

(D) For good cause shown, the court may permit a coroner 463  
or deputy coroner who has not been served with a subpoena under 464  
division (B) of this section to give expert testimony at a 465  
trial, hearing, or deposition in a civil action. Unless good 466  
cause is shown, the failure of a party to file with the court 467  
the notice described in division (B)(1) of this section 468  
prohibits the party from having a coroner or deputy coroner 469  
subpoenaed to give expert testimony at a trial, hearing, or 470  
deposition in a civil action or from otherwise calling the 471  
coroner or a deputy coroner to give expert testimony at a trial, 472  
hearing, or deposition in a civil action. 473

(E) In the event of a dispute as to the contents of the 474  
notice filed by a party under division (B) of this section or as 475  
to the nature of the testimony sought from or given by a coroner 476  
or a deputy coroner at a trial, hearing, or deposition in a 477  
civil action, the court shall determine whether the testimony 478  
sought from or given by the coroner or deputy coroner is expert 479  
testimony or fact testimony. In making this determination, the 480  
court shall consider all of the following: 481

(1) The definitions of "expert testimony" and "fact 482  
testimony" set forth in this section; 483

(2) All applicable rules of evidence; 484

(3) Any other information that the court considers 485  
relevant. 486

(F) Nothing in this section shall be construed to alter, 487  
amend, or supersede the requirements of the Rules of Civil 488  
Procedure or the Rules of Evidence. 489

**Sec. 4723.431.** (A) (1) An advanced practice registered 490

nurse who is designated as a clinical nurse specialist, 491  
certified nurse-midwife, or certified nurse practitioner may 492  
practice only in accordance with a standard care arrangement 493  
entered into with each physician or podiatrist with whom the 494  
nurse collaborates. A copy of the standard care arrangement 495  
shall be retained on file by the nurse's employer. Prior 496  
approval of the standard care arrangement by the board of 497  
nursing is not required, but the board may periodically review 498  
it for compliance with this section. 499

A clinical nurse specialist, certified nurse-midwife, or 500  
certified nurse practitioner may enter into a standard care 501  
arrangement with one or more collaborating physicians or 502  
podiatrists. If a collaborating physician or podiatrist enters 503  
into standard care arrangements with more than five nurses, the 504  
physician or podiatrist shall not collaborate at the same time 505  
with more than five nurses in the prescribing component of their 506  
practices. 507

Not later than thirty days after first engaging in the 508  
practice of nursing as a clinical nurse specialist, certified 509  
nurse-midwife, or certified nurse practitioner, the nurse shall 510  
submit to the board the name and business address of each 511  
collaborating physician or podiatrist. Thereafter, the nurse 512  
shall notify the board of any additions or deletions to the 513  
nurse's collaborating physicians or podiatrists. Except as 514  
provided in division (D) of this section, the notice must be 515  
provided not later than thirty days after the change takes 516  
effect. 517

(2) All of the following conditions apply with respect to 518  
the practice of a collaborating physician or podiatrist with 519  
whom a clinical nurse specialist, certified nurse-midwife, or 520

certified nurse practitioner may enter into a standard care arrangement:	521 522
(a) The physician or podiatrist must be authorized to practice in this state.	523 524
(b) Except as provided in division (A) (2) (c) of this section, the physician or podiatrist must be practicing in a specialty that is the same as or similar to the nurse's nursing specialty.	525 526 527 528
(c) If the nurse is a clinical nurse specialist who is certified as a psychiatric-mental health CNS by the American nurses credentialing center or a certified nurse practitioner who is certified as a psychiatric-mental health NP by the American nurses credentialing center, the nurse may enter into a standard care arrangement with a physician but not a podiatrist and the collaborating physician must be practicing in one of the following specialties:	529 530 531 532 533 534 535 536
(i) Psychiatry;	537
(ii) Pediatrics;	538
(iii) Primary care or family practice.	539
(B) A standard care arrangement shall be in writing and shall contain all of the following:	540 541
(1) Criteria for referral of a patient by the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to a collaborating physician or podiatrist or another physician or podiatrist;	542 543 544 545
(2) A process for the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to obtain a consultation with a collaborating physician or podiatrist or	546 547 548

another physician or podiatrist;	549
(3) A plan for coverage in instances of emergency or planned absences of either the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner or a collaborating physician or podiatrist that provides the means whereby a physician or podiatrist is available for emergency care;	550 551 552 553 554 555
(4) The process for resolution of disagreements regarding matters of patient management between the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and a collaborating physician or podiatrist;	556 557 558 559
(5) <u>An agreement that the collaborating physician shall complete and sign the medical certificate of death pursuant to section 3705.16 of the Revised Code;</u>	560 561 562
(6) Any other criteria required by rule of the board adopted pursuant to section 4723.07 or 4723.50 of the Revised Code.	563 564 565
(C) (1) A standard care arrangement entered into pursuant to this section may permit a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to supervise services provided by a home health agency as defined in section 3740.01 of the Revised Code.	566 567 568 569 570
(2) A standard care arrangement entered into pursuant to this section may permit a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to admit a patient to a hospital in accordance with section 3727.06 of the Revised Code.	571 572 573 574 575
(D) (1) Except as provided in division (D) (2) of this section, if a physician or podiatrist terminates the	576 577

collaboration between the physician or podiatrist and a 578  
certified nurse-midwife, certified nurse practitioner, or 579  
clinical nurse specialist before their standard care arrangement 580  
expires, all of the following apply: 581

(a) The physician or podiatrist must give the nurse 582  
written or electronic notice of the termination. 583

(b) Once the nurse receives the termination notice, the 584  
nurse must notify the board of nursing of the termination as 585  
soon as practicable by submitting to the board a copy of the 586  
physician's or podiatrist's termination notice. 587

(c) Notwithstanding the requirement of section 4723.43 of 588  
the Revised Code that the nurse practice in collaboration with a 589  
physician or podiatrist, the nurse may continue to practice 590  
under the existing standard care arrangement without a 591  
collaborating physician or podiatrist for not more than one 592  
hundred twenty days after submitting to the board a copy of the 593  
termination notice. 594

(2) In the event that the collaboration between a 595  
physician or podiatrist and a certified nurse-midwife, certified 596  
nurse practitioner, or clinical nurse specialist terminates 597  
because of the physician's or podiatrist's death, the nurse must 598  
notify the board of the death as soon as practicable. The nurse 599  
may continue to practice under the existing standard care 600  
arrangement without a collaborating physician or podiatrist for 601  
not more than one hundred twenty days after notifying the board 602  
of the physician's or podiatrist's death. 603

(E) Nothing in this section prohibits a hospital from 604  
hiring a clinical nurse specialist, certified nurse-midwife, or 605  
certified nurse practitioner as an employee and negotiating 606



standard care arrangements on behalf of the employee as 607  
necessary to meet the requirements of this section. A standard 608  
care arrangement between the hospital's employee and the 609  
employee's collaborating physician is subject to approval by the 610  
medical staff and governing body of the hospital prior to 611  
implementation of the arrangement at the hospital. 612

**Sec. 4730.19.** (A) Before initiating supervision of one or 613  
more physician assistants licensed under this chapter, a 614  
physician shall enter into a supervision agreement with each 615  
physician assistant who will be supervised. A supervision 616  
agreement may apply to one or more physician assistants, but, 617  
except as provided in division ~~(B) (2) (e)~~ (B) (2) (f) of this 618  
section, may apply to not more than one physician. The 619  
supervision agreement shall specify that the physician agrees to 620  
supervise the physician assistant and the physician assistant 621  
agrees to practice under that physician's supervision. 622

The agreement shall clearly state that the supervising 623  
physician is legally responsible and assumes legal liability for 624  
the services provided by the physician assistant. The agreement 625  
shall be signed by the physician and the physician assistant. 626

(B) A supervision agreement shall include either or both 627  
of the following: 628

(1) If a physician assistant will practice within a health 629  
care facility, the agreement shall include terms that require 630  
the physician assistant to practice in accordance with the 631  
policies of the health care facility. 632

(2) If a physician assistant will practice outside a 633  
health care facility, the agreement shall include terms that 634  
specify all of the following: 635

- (a) The responsibilities to be fulfilled by the physician  
in supervising the physician assistant; 636  
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- (b) The responsibilities to be fulfilled by the physician  
assistant when performing services under the physician's  
supervision; 638  
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- (c) Any limitations on the responsibilities to be  
fulfilled by the physician assistant; 641  
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- (d) The circumstances under which the physician assistant  
is required to refer a patient to the supervising physician; 643  
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- (e) An agreement that the supervising physician shall  
complete and sign the medical certificate of death pursuant to  
section 3705.16 of the Revised Code; 645  
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- (f) If the supervising physician chooses to designate  
physicians to act as alternate supervising physicians, the  
names, business addresses, and business telephone numbers of the  
physicians who have agreed to act in that capacity. 648  
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- (C) A supervision agreement may be amended to modify the  
responsibilities of one or more physician assistants or to  
include one or more additional physician assistants. 652  
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- (D) The supervising physician who entered into a  
supervision agreement shall retain a copy of the agreement in  
the records maintained by the supervising physician. Each  
physician assistant who entered into the supervision agreement  
shall retain a copy of the agreement in the records maintained  
by the physician assistant. 655  
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- (E) (1) If the board finds, through a review conducted  
under this section or through any other means, any of the  
following, the board may take disciplinary action against the 661  
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individual under section 4730.25 or 4731.22 of the Revised Code, 664  
impose a civil penalty, or both: 665

(a) That a physician assistant has practiced in a manner 666  
that departs from, or fails to conform to, the terms of a 667  
supervision agreement entered into under this section; 668

(b) That a physician has supervised a physician assistant 669  
in a manner that departs from, or fails to conform to, the terms 670  
of a supervision agreement entered into under this section; 671

(c) That a physician or physician assistant failed to 672  
comply with division (A) or (B) of this section. 673

(2) If the board finds, through a review conducted under 674  
this section or through any other means, that a physician or 675  
physician assistant failed to comply with division (D) of this 676  
section, the board may do either of the following: 677

(a) Take disciplinary action against the individual under 678  
section 4730.25 or 4731.22 of the Revised Code, impose a civil 679  
penalty, or both; 680

(b) Permit the individual to agree in writing to update 681  
the records to comply with division (D) of this section and pay 682  
a civil penalty. 683

(3) The board's finding in any disciplinary action taken 684  
under division (E) of this section shall be made pursuant to an 685  
adjudication conducted under Chapter 119. of the Revised Code. 686

(4) A civil penalty imposed under division (E) (1) or (2) 687  
(a) of this section or paid under division (E) (2) (b) of this 688  
section shall be in an amount specified by the board of not more 689  
than five thousand dollars and shall be deposited in accordance 690  
with section 4731.24 of the Revised Code. 691

**Section 2.** That existing sections 313.02, 313.10, 313.12, 692  
313.161, 325.15, 2335.061, 4723.431, and 4730.19 of the Revised 693  
Code are hereby repealed. 694