As Reported by the Senate Health Committee

135th General Assembly Regular Session 2023-2024

Sub. S. B. No. 81

Senator Romanchuk Cosponsors: Senators Roegner, Hackett, Ingram

A BILL

То	amend sections 4723.431 and 4730.01 and to enact	1
	sections 4723.436 and 4730.204 of the Revised	2
	Code to authorize certain advanced practice	3
	registered nurses to sign documents related to	4
	psychiatric inpatients; to authorize physician	5
	assistants to sign documents related to hospital	6
	patients; and to amend the version of section	7
	4723.431 of the Revised Code that is scheduled	8
	to take effect on September 30, 2024, to	9
	continue the changes to that section on and	10
	after that date.	11

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

Section 1. That sections 4723.431 and 4730.01 be amended	12
and sections 4723.436 and 4730.204 of the Revised Code be	13
enacted to read as follows:	14
Sec. 4723.431. (A)(1) An advanced practice registered	15
nurse who is designated as a clinical nurse specialist,	16
certified nurse-midwife, or certified nurse practitioner may	17
practice only in accordance with a standard care arrangement	18

entered into with each physician or podiatrist with whom the19nurse collaborates. A copy of the standard care arrangement20shall be retained on file by the nurse's employer. Prior21approval of the standard care arrangement by the board of22nursing is not required, but the board may periodically review23it for compliance with this section.24

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

Not later than thirty days after first engaging in the 33 practice of nursing as a clinical nurse specialist, certified 34 nurse-midwife, or certified nurse practitioner, the nurse shall 35 submit to the board the name and business address of each 36 collaborating physician or podiatrist. Thereafter, the nurse 37 shall notify the board of any additions or deletions to the 38 nurse's collaborating physicians or podiatrists. Except as 39 provided in division (D) of this section, the notice must be 40 provided not later than thirty days after the change takes 41 effect. 42

(2) All of the following conditions apply with respect to
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the practice of a collaborating physician or podiatrist with
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whom a clinical nurse specialist, certified nurse-midwife, or
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certified nurse practitioner may enter into a standard care
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arrangement:

(a) The physician or podiatrist must be authorized to

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another physician or podiatrist;

practice in this state. 49 (b) Except as provided in division (A)(2)(c) of this 50 section, the physician or podiatrist must be practicing in a 51 specialty that is the same as or similar to the nurse's nursing 52 specialty. 53 (c) If the nurse is a clinical nurse specialist who is 54 certified as a psychiatric-mental health CNS by the American 55 nurses credentialing center or a certified nurse practitioner 56 who is certified as a psychiatric-mental health NP by the 57 American nurses credentialing center, the nurse may enter into a 58 standard care arrangement with a physician but not a podiatrist 59 and the collaborating physician must be practicing in one of the 60 following specialties: 61 (i) Psychiatry; 62 (ii) Pediatrics; 63 (iii) Primary care or family practice. 64 (B) A standard care arrangement shall be in writing and 65 shall contain all of the following: 66 (1) Criteria for referral of a patient by the clinical 67 nurse specialist, certified nurse-midwife, or certified nurse 68 practitioner to a collaborating physician or podiatrist or 69 another physician or podiatrist; 70 71 (2) A process for the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to obtain a 72 73 consultation with a collaborating physician or podiatrist or

(3) A plan for coverage in instances of emergency or75planned absences of either the clinical nurse specialist,76

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certified nurse-midwife, or certified nurse practitioner or a 77 collaborating physician or podiatrist that provides the means 78 whereby a physician or podiatrist is available for emergency 79 care; 80

(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;
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(5) Any other criteria required by rule of the board
adopted pursuant to section 4723.07 or 4723.50 of the Revised
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Code.
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(C) (1) (C) A standard care arrangement entered into88pursuant to this section may permit a clinical nurse specialist,89certified nurse-midwife, or certified nurse practitioner to90supervise do any of the following:91

(1) Supervise services provided by a home health agency as 92 defined in section 3740.01 of the Revised Code... 93

(2) A standard care arrangement entered into pursuant to94this section may permit a clinical nurse specialist, certified95nurse-midwife, or certified nurse practitioner to admit;96

(2) Admit a patient to a hospital in accordance with 97 section 3727.06 of the Revised Code; 98

(3) Sign any document relating to the admission,99treatment, or discharge of an inpatient receiving psychiatric or100other behavioral health care services, but only if the101conditions of section 4723.436 of the Revised Code have been102met.103

(D) (1) Except as provided in division (D) (2) of this 104

section, if a physician or podiatrist terminates the	105
collaboration between the physician or podiatrist and a	106
certified nurse-midwife, certified nurse practitioner, or	107
clinical nurse specialist before their standard care arrangement	108
expires, all of the following apply:	109
(a) The physician or podiatrist must give the nurse	110
written or electronic notice of the termination.	111
(b) Once the nurse receives the termination notice, the	112
nurse must notify the board of nursing of the termination as	113
soon as practicable by submitting to the board a copy of the	114
physician's or podiatrist's termination notice.	115
(c) Notwithstanding the requirement of section 4723.43 of	116
the Revised Code that the nurse practice in collaboration with a	117
physician or podiatrist, the nurse may continue to practice	118
under the existing standard care arrangement without a	119
collaborating physician or podiatrist for not more than one	120
hundred twenty days after submitting to the board a copy of the	121
termination notice.	122
(2) In the event that the collaboration between a	123
physician or podiatrist and a certified nurse-midwife, certified	124
nurse practitioner, or clinical nurse specialist terminates	125
because of the physician's or podiatrist's death, the nurse must	126
notify the board of the death as soon as practicable. The nurse	127
may continue to practice under the existing standard care	128
arrangement without a collaborating physician or podiatrist for	129
not more than one hundred twenty days after notifying the board	130
of the physician's or podiatrist's death.	131

(E) Nothing in this section prohibits a hospital fromhiring a clinical nurse specialist, certified nurse-midwife, or133

certified nurse practitioner as an employee and negotiating	134
standard care arrangements on behalf of the employee as	135
necessary to meet the requirements of this section. A standard	136
care arrangement between the hospital's employee and the	137
employee's collaborating physician is subject to approval by the	138
medical staff and governing body of the hospital prior to	139
implementation of the arrangement at the hospital.	140
Sec. 4723.436. (A) Subject to division (B) of this	141
section, a certified nurse-midwife, clinical nurse specialist,	142
or certified nurse practitioner may sign one or more documents	143
relating to any of the following:	144
(1) The admission of a patient to a facility for the	145
purpose of receiving psychiatric or other behavioral health care	146
services on an inpatient basis;	147
(2) The discharge of a patient from a facility after	148
receiving inpatient psychiatric or other behavioral health care	149
services;	150
(3) The treatment a patient receives while at a facility	151
on an inpatient basis for psychiatric or other behavioral health	152
<u>care services.</u>	153
The documents may include a treatment plan or any	154
medication order that is part of the treatment plan.	155
(B) To be eligible to sign documents described in this	156
section, all of the following must be satisfied:	157
(1) The nurse is employed by the facility in which a	158
patient is receiving psychiatric or other behavioral health care	159
services on an inpatient basis or the nurse has been granted	160
appropriate credentials by the facility;	161

(2) The nurse's collaborating physician is employed by the	162
facility in which a patient is receiving psychiatric or other	163
behavioral health care services on an inpatient basis or the	164
physician is a member of the facility's medical staff.	165
(3) The nurse's collaborating physician has authorized the	166
nurse to sign documents described in this section for the	167
physician's patients.	168
(4) The standard care arrangement entered into pursuant to	169
section 4723.431 of the Revised Code specifies in writing that	170
the nurse is authorized to sign documents described in this	171
section for the collaborating physician's patients.	172
(D) A collaborating physician who authorizes a nurse to	173
sign one or more documents as described in this section is not	174
liable for damages in a civil action for injury, death, or loss	175
to person or property for an act or omission that arises from	176
the nurse signing the document, and is not subject to	177
administrative action or criminal prosecution for an act or	178
omission that arises from the nurse signing the document.	179
Sec. 4730.01. As used in this chapter:	180
(A) "Physician" means an individual who is authorized	181
under Chapter 4731. of the Revised Code to practice medicine and	182
surgery, osteopathic medicine and surgery, or podiatric medicine	183
and surgery.	184
(B) "Health care facility" means any of the following:	185
(1) A hospital registered with the department of health	186
under , as defined in section 3701.07 3722.01 of the Revised	187
Code;	188
(2) A health care facility licensed by the department of	189

health under section 3702.30 of the Revised Code;	190
(3) Any other facility designated by the state medical	191
board in rules adopted pursuant to division (B) of section	192
4730.08 of the Revised Code.	193
(C) "Service" means a medical activity that requires	194
training in the diagnosis, treatment, or prevention of disease.	195
Sec. 4730.204. (A) Subject to division (B) of this	196
section, a physician assistant who is employed by a health care	197
facility that is a hospital may sign one or more documents	198
relating to any of the following:	199
(1) The admission of a patient to the hospital;	200
(2) The discharge of a patient from the hospital;	201
(3) The treatment of a patient while hospitalized.	202
The documents may include a treatment plan or any	203
medication order that is part of the treatment plan.	204
(B) To be eligible to sign documents described in division	205
(A) of this section, all of the following must be satisfied:	206
(1) The physician assistant's supervising physician is	207
employed by the hospital or is a member of the hospital's	208
medical staff.	209
(2) The physician assistant's supervising physician has	210
authorized the physician assistant to sign documents described	211
in division (A) of this section for the physician's patients.	212
(3) The policies of the hospital authorize the physician	213
assistant to sign documents described in division (A) of this	214
section.	215
(C) Notwithstanding section 4730.22 of the Revised Code or	216

any other conflicting provision of this chapter, a supervising	217
physician who authorizes a physician assistant to sign one or	218
more documents as described in division (B) of this section is	219
not liable for damages in a civil action for injury, death, or	220
loss to person or property for an act or omission that arises	221
from the physician assistant signing the document, and is not	222
subject to administrative action or criminal prosecution for an	223
act or omission that arises from the physician assistant signing	224
the document.	225
Section 2. That existing sections 4723.431 and 4730.01 of	226
the Revised Code are hereby repealed.	227
Section 3. That the version of section 4723.431 of the	228
Revised Code that is scheduled to take effect September 30,	229
2024, be amended to read as follows:	230
Sec. 4723.431. (A)(1) An advanced practice registered	231
nurse who is designated as a clinical nurse specialist,	232
certified nurse-midwife, or certified nurse practitioner may	233
practice only in accordance with a standard care arrangement	234
entered into with each physician or podiatrist with whom the	235
nurse collaborates. A copy of the standard care arrangement	236
shall be retained on file by the nurse's employer. Prior	237
approval of the standard care arrangement by the board of	238
nursing is not required, but the board may periodically review	239
it for compliance with this section.	240
A clinical nurse specialist, certified nurse-midwife, or	241
certified nurse practitioner may enter into a standard care	242
arrangement with one or more collaborating physicians or	243
podiatrists. If a collaborating physician or podiatrist enters	244
into standard care arrangements with more than five nurses, the	245
physician or podiatrist shall not collaborate at the same time	246

with more than five nurses in the prescribing component of their practices.

Not later than thirty days after first engaging in the 249 practice of nursing as a clinical nurse specialist, certified 250 nurse-midwife, or certified nurse practitioner, the nurse shall 251 submit to the board the name and business address of each 252 collaborating physician or podiatrist. Thereafter, the nurse 253 shall notify the board of any additions or deletions to the 254 nurse's collaborating physicians or podiatrists. Except as 255 provided in division (D) of this section, the notice must be 256 provided not later than thirty days after the change takes 257 effect. 258

(2) All of the following conditions apply with respect to the practice of a collaborating physician or podiatrist with whom a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may enter into a standard care arrangement:

(a) The physician or podiatrist must be authorized to practice in this state.

(b) Except as provided in division (A) (2) (c) of this
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section, the physician or podiatrist must be practicing in a
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specialty that is the same as or similar to the nurse's nursing
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specialty.

(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

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and the collaborating physician must be practicing in one of the 276 following specialties: 277 (i) Psychiatry; 278 (ii) Pediatrics; 279 (iii) Primary care or family practice. 280 (B) A standard care arrangement shall be in writing and 281 shall contain all of the following: 282 (1) Criteria for referral of a patient by the clinical 283 nurse specialist, certified nurse-midwife, or certified nurse 284 practitioner to a collaborating physician or podiatrist or 285 another physician or podiatrist; 286 (2) A process for the clinical nurse specialist, certified 287 nurse-midwife, or certified nurse practitioner to obtain a 288 consultation with a collaborating physician or podiatrist or 289 another physician or podiatrist; 290 (3) A plan for coverage in instances of emergency or 291 planned absences of either the clinical nurse specialist, 292 certified nurse-midwife, or certified nurse practitioner or a 293 collaborating physician or podiatrist that provides the means 294 295 whereby a physician or podiatrist is available for emergency 296 care; (4) The process for resolution of disagreements regarding 297 298 matters of patient management between the clinical nurse specialist, certified nurse-midwife, or certified nurse 299 practitioner and a collaborating physician or podiatrist; 300 (5) Any other criteria required by rule of the board 301 adopted pursuant to section 4723.07 or 4723.50 of the Revised 302 Code. 303

(C) (1) (C) A standard care arrangement entered into	304
pursuant to this section may permit a clinical nurse specialist,	
certified nurse-midwife, or certified nurse practitioner to	306
supervise do any of the following:	307
(1) Supervise services provided by a home health agency as	308
defined in section 3740.01 of the Revised Code .	309
(2) A standard care arrangement entered into pursuant to	310
this section may permit a clinical nurse specialist, certified	311
nurse-midwife, or certified nurse practitioner to admit;	312
(2) Admit a patient to a hospital;	313
(3) Sign any document relating to the admission,	314
treatment, or discharge of an inpatient receiving psychiatric or	315
other behavioral health care services, but only if the	316
conditions of section 4723.436 of the Revised Code have been	317
<u>met</u> .	318
(D)(1) Except as provided in division (D)(2) of this	319
section, if a physician or podiatrist terminates the	320
collaboration between the physician or podiatrist and a	321
certified nurse-midwife, certified nurse practitioner, or	322
clinical nurse specialist before their standard care arrangement	323
expires, all of the following apply:	324
(a) The physician or podiatrist must give the nurse	325
written or electronic notice of the termination.	326
(b) Once the nurse receives the termination notice, the	327
nurse must notify the board of nursing of the termination as	328
soon as practicable by submitting to the board a copy of the	329
physician's or podiatrist's termination notice.	330

(c) Notwithstanding the requirement of section 4723.43 of 331

the Revised Code that the nurse practice in collaboration with a 332 physician or podiatrist, the nurse may continue to practice 333 under the existing standard care arrangement without a 334 collaborating physician or podiatrist for not more than one 335 hundred twenty days after submitting to the board a copy of the 336 termination notice. 337

(2) In the event that the collaboration between a 338 physician or podiatrist and a certified nurse-midwife, certified 339 nurse practitioner, or clinical nurse specialist terminates 340 because of the physician's or podiatrist's death, the nurse must 341 notify the board of the death as soon as practicable. The nurse 342 may continue to practice under the existing standard care 343 arrangement without a collaborating physician or podiatrist for 344 not more than one hundred twenty days after notifying the board 345 of the physician's or podiatrist's death. 346

(E) Nothing in this section prohibits a hospital from 347 hiring a clinical nurse specialist, certified nurse-midwife, or 348 certified nurse practitioner as an employee and negotiating 349 standard care arrangements on behalf of the employee as 350 necessary to meet the requirements of this section. A standard 351 care arrangement between the hospital's employee and the 352 employee's collaborating physician is subject to approval by the 353 medical staff and governing body of the hospital prior to 354 implementation of the arrangement at the hospital. 355

Section 4. That the existing version of section 4723.431356of the Revised Code that is scheduled to take effect September35730, 2024, is hereby repealed.358

Section 5. Sections 3 and 4 of this act take effect359September 30, 2024.360

Section 6. The version of section 4723.431 of the Revised	361
Code that is scheduled to take effect September 30, 2024, is	362
presented in this act as a composite of the section as amended	363
by both Section 101.01 and Section 130.10 of H.B. 110 of the	364
134th General Assembly. The General Assembly, applying the	365
principle stated in division (B) of section 1.52 of the Revised	366
Code that amendments are to be harmonized if reasonably capable	367
of simultaneous operation, finds that the composite is the	368
resulting version of the section in effect prior to the	369
effective date of the section as presented in this act.	370

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