



Am. Sub. S.B. 86
125th General Assembly
(As Passed by the General Assembly)

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Effective date: April 13, 2004; all sections, except Section 7, effective July 12, 2004

ACT SUMMARY

- Modifies the qualified civil immunity of volunteer health care professionals to cover medical, dental, or other health-related diagnosis, care, or treatment provided by them to indigent and uninsured persons regardless of where the diagnosis, care, or treatment is provided.
- Expands the requirements that a health care professional must comply with prior to providing diagnosis, care, or treatment in order for the qualified immunity to apply to include notice to an indigent and uninsured person that by giving informed consent the person cannot hold the health care professional liable for damages unless the professional's action or omission constitutes willful or wanton misconduct.
- Expands the health care professionals to whom the qualified civil immunity applies by including occupational therapists, occupational therapy assistants, physical therapist assistants, respiratory care professionals, speech-language pathologists, and audiologists, licensed under Ohio law, and specifies that individuals holding a certificate of authority that authorizes the practice of nursing as a certified registered

nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner are health care professionals.

- Modifies the qualified civil immunity of volunteer health care workers to cover medical, dental, or other health-related care or treatment provided by them to indigent and uninsured persons regardless of where the diagnosis, care, or treatment is provided.
- Replaces "nonprofit shelter or health care facility" with "health care facility or location" in the civil immunity and related provisions, and extends the qualified civil immunity to cover specified health care facilities, including any hospital, clinic, ambulatory surgical facility, health care professional's office, training institution for health care professionals, or any other place where medical, dental, or other health-related diagnosis, care, or treatment is provided, that is associated with a volunteer health care professional or worker covered by the immunity.
- Establishes qualified immunity from civil liability for nonprofit health care referral organizations and the health care facilities or locations associated with them.
- Expands the number of indigent and uninsured persons who may be served by the health care facilities or locations and health care professionals and workers acting under the civil immunity or referred by nonprofit health care referral organizations acting under the civil immunity, by specifying that the persons cannot have incomes exceeding 200%, rather than 150%, of the federal poverty line.
- Allows retired physicians and dentists with volunteers' licenses to provide care to the expanded number of indigent and uninsured persons at any location.
- Requires the current Ohio Medical Malpractice Commission to perform additional duties pertaining to medical malpractice insurance and related matters applicable to volunteer health care professionals or workers and nonprofit health care referral organizations under the Good Samaritan Law.
- Changes the date by which the State Board of Pharmacy must establish the drug repository program from April 7, 2004, to January 1, 2004.

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CONTENT AND OPERATION

Preexisting law

Prior law established immunity from civil liability, except in cases of willful or wanton misconduct, for health care professionals who provided certain health services without compensation to persons who had incomes not greater than 150% of the federal poverty line, were without private health coverage, and were not eligible for assistance under a governmental health program. This immunity extended to health care workers who acted under a health care professional's direction in providing the volunteer care to these indigent and uninsured persons.

For the immunity to apply, the health services were required to be provided at a nonprofit shelter or health care facility that was registered with the Ohio Department of Health. Expressly excluded from the immunity provisions were hospitals, nursing homes, residential care facilities, and medical facilities that operated for profit.

Immunity similar to that which applied to health care professionals and workers was also available to the nonprofit shelters or health care facilities associated with the volunteer providers. In no case, however, was the immunity available with respect to the performance of an operation or delivery of a baby.

Definitions

Former law

Prior law defined the following terms, among others, for purposes of the qualified civil immunity of volunteer health care professionals, volunteer health care workers, and nonprofit shelters or health care facilities (former R.C. 2305.234(A)(4), (6), (8), and (10)):

(1) "Health care professional" meant any of the following who provide medical, dental, or other health-related diagnosis, care, or treatment and are authorized to practice or are licensed or certified under the applicable chapters of the Revised Code: physicians, registered nurses, *advanced practice nurses*, licensed practical nurses, physician assistants, dentists, dental hygienists, physical therapists, chiropractors, optometrists, podiatrists, dietitians, pharmacists, emergency medical technicians-basic, emergency medical technicians-intermediate, and emergency medical technicians-paramedic.

(2) "Indigent and uninsured person" meant a person who meets all of the following requirements:

(a) The person's income is not greater than 150% of the current poverty line as defined by the United States Office of Management and Budget and revised in accordance with section 673(2) of the "Omnibus Budget Reconciliation Act of 1981," 42 U.S.C. 9902, as amended.

(b) The person is not eligible to receive medical assistance under R.C. Chapter 5111., disability assistance medical assistance under R.C. Chapter 5115., or assistance under any other governmental health care program.

(c) Either of the following applies:

(i) The person is not a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan.

(ii) The person is a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan, but the insurer, policy, contract, or plan denies coverage or is the subject of insolvency or bankruptcy proceedings in any jurisdiction.

(3) "*Nonprofit shelter or health care facility*" meant a charitable nonprofit corporation organized and operated pursuant to R.C. Chapter 1702. (*Nonprofit Corporation Law*) or any charitable organization not organized and not operated

for profit, that provides shelter, health care services, or shelter and health care services to indigent and uninsured persons, except that "shelter or health care facility" did not include a hospital as defined in R.C. 3727.01 of the Revised Code, a facility licensed under R.C. Chapter 3721. (nursing homes and residential care facilities), or a medical facility that is operated for profit.

(4) "Volunteer" meant an individual who provides any medical, dental, or other health-care related diagnosis, care, or treatment without the expectation of receiving and without receipt of any compensation or other form of remuneration from: (a) an indigent and uninsured person, (b) another person on behalf of an indigent and uninsured person, (c) any *shelter or health care facility*, or (d) any other person or government entity.

Operation of the act

Poverty level. The act modifies the income requirement in the above definition of "indigent and uninsured person" to require that the person's income be not greater than 200% (instead of 150%) of the current poverty line as defined by the United States Office of Management and Budget and revised in accordance with section 673(2) of the "Omnibus Budget Reconciliation Act of 1981," 42 U.S.C. 9902, as amended (R.C. 2305.234(A)(7)(a)). (See **COMMENT 1.**)

Health care professional. The act expands the types of professionals to whom the qualified immunity provisions apply by defining "health care professional" to additionally include physical therapist assistants, occupational therapists, and occupational therapy assistants licensed under R.C. Chapter 4755.; respiratory care professionals licensed under R.C. Chapter 4761.; and speech-language pathologists and audiologists licensed under R.C. Chapter 4753. The act removes the inclusion of *advanced practice nurses* in the definition of "health care professional" and, instead, includes in that definition individuals who hold a certificate of authority issued under R.C. Chapter 4723. that authorizes the practice of nursing as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner. (R.C. 2305.234(A)(5)(b), (e), (l), and (m).)

Health care facility or location. The act replaces the term "nonprofit shelter or health care facility" with "health care facility or location" for purposes of the qualified immunity provisions described in this analysis, and defines "health care facility or location" as a hospital, clinic, ambulatory surgical facility, office of a health care professional or associated group of health care professionals, training institution for health care professionals, or any other place where medical, dental, or other health-related diagnosis, care, or treatment is provided to a person. In effect, the act expands the types of facilities in regard to which the qualified immunity provisions apply and includes *any place* where medical, dental, or other

health-related diagnosis, care, or treatment is provided to a person. (R.C. 2305.234(A)(4).)

Nonprofit health care referral organization. The act extends the applicability of the qualified immunity provisions to "nonprofit health care referral organizations" and defines that term as an entity that is not operated for profit and refers patients to, or arranges for the provision of, health-related diagnosis, care, or treatment by a health care professional or health care worker (R.C. 2305.234(A)(8)).

Volunteer. The act modifies the definition of "volunteer" to mean an individual who provides any medical, dental, or other health-care related diagnosis, care, or treatment without the expectation of receiving and without receipt of any compensation or other form of remuneration from: (a) an indigent and uninsured person, (b) another person on behalf of an indigent and uninsured person, (c) any *health care facility or location*, (d) *any nonprofit health care referral organization*, or (e) any other person or government entity (R.C. 2305.234(A)(11)).

Civil immunity of volunteer health care professionals

Former law

Under prior law, subject to specified exceptions and qualifications described below under "**Exceptions**" and paragraph (3) under "**Qualifications**," a "health care professional" who was a "volunteer" and complied with certain conditions described in the following paragraph was not liable in damages to any person or government entity in a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, for injury, death, or loss to person or property that allegedly arose from an action or omission of the volunteer in the provision *at a "nonprofit shelter or health care facility"* to an "indigent and uninsured person" of medical, dental, or other health-related diagnosis, care, or treatment, including the provision of samples of medicine and other medical products, unless the action or omission constituted willful or wanton misconduct (R.C. 2305.234(B)(1)). (See "**Former law**" under "**Definitions**," above.)

To qualify for the immunity, a health care professional was required to do all of the following prior to providing diagnosis, care, or treatment (R.C. 2305.234(B)(2)):

(1) Determine, in good faith, that the indigent and uninsured person was mentally capable of giving informed consent to the provision of the diagnosis, care, or treatment and not subject to duress or under undue influence;

(2) Inform the person of the provisions of preexisting law regarding the health care professional's qualified immunity;

(3) Obtain the informed consent of the person and a written waiver, signed by the person or by another individual on behalf of and in the presence of the person, that stated that the person was mentally competent to give informed consent and, without being subject to duress or under undue influence, gave informed consent to the provision of the diagnosis, care, or treatment subject to the provisions of preexisting law regarding the immunity.

Operation of the act

The act modifies the qualified civil immunity of volunteer health care professionals by eliminating "at a nonprofit shelter or health care facility" from the above provision in former law. Thus, subject to the exceptions and qualifications as in former law as modified by the act, if the other elements of the qualified civil immunity of volunteer health care professionals as described in "**Former law**," above, as modified by the act, are present, the immunity applies *regardless of where* the medical, dental, or other health-related diagnosis, care, or treatment, including the provision of medicine samples and other medical products, to an indigent and uninsured person, occurs. (R.C. 2305.234(B)(1).)

The act expands the conditions described in paragraphs (2) and (3) under "**Former law**," above, that a health care professional must comply with prior to providing diagnosis, care, or treatment in order for the immunity to apply. Under the act, a health care professional must inform the indigent and uninsured person of the provisions of the law (see paragraph (2) under "**Former law**," above), as modified by the act, including notifying the person that, by giving informed consent to the provision of the diagnosis, care, or treatment, the person cannot hold the health care professional liable for damages in a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, unless the action or omission of the health care professional constitutes willful or wanton misconduct. Regarding the written waiver described in paragraph (3) under "**Former law**," above, the act requires that the waiver state clearly and in conspicuous type that the person or other individual who signs the waiver is signing it with full knowledge that, by giving informed consent to the provision of the diagnosis, care, or treatment, the person cannot bring a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, against the health care professional unless the action or omission of the health care professional constitutes willful or wanton misconduct. (R.C. 2305.234(B)(2)(b) and (c).)

Civil immunity of volunteer health care workers

Under former law, subject to specified exceptions and qualifications described below under "*Exceptions*" and paragraph (3) under "*Qualifications*," "health care workers"¹ who were volunteers were not liable in damages to any person or government entity in a tort or other civil action, including an action upon a medical, dental, chiropractic, optometric, or other health-related claim, for injury, death, or loss to person or property that allegedly arose from an action or omission of the health care worker in the provision *at a nonprofit shelter or health care facility* to an indigent and uninsured person of medical, dental, or other health-related diagnosis, care, or treatment, unless the action or omission constituted willful or wanton misconduct (R.C. 2305.234(C)).

The act modifies the qualified civil immunity of health care workers by eliminating "at a nonprofit shelter or health care facility" from the above provision in former law. Thus, subject to the exceptions and qualifications as in former law as modified by the act, if the other elements of the qualified civil immunity of volunteer health care workers as described in the preceding paragraph are present, the immunity would apply *regardless of where* the medical, dental, or other health-related diagnosis, care, or treatment is provided (R.C. 2305.234(C)). (See **COMMENT 2**.)

Civil immunity of health care facilities or locations

Former law provided that subject to specified exceptions described below under "*Exceptions*" and paragraph (3) under "*Qualifications*," and subject to registration with the Ohio Department of Health under R.C. 3701.071, a *nonprofit shelter or health care facility* associated with a volunteer health care professional or volunteer health care worker who provides medical, dental, or other health-related diagnosis, care, or treatment at a nonprofit shelter or health care facility to an indigent or uninsured person were not liable in damages to any person or government entity in a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, for injury, death, or loss to person or property that allegedly arose from an action or omission of the health care professional or worker in providing *for the shelter or facility* medical, dental, or other health-related diagnosis, care, or treatment to an indigent and

¹ Under continuing law, "health care worker" means a person other than a health care professional who provides medical, dental, or other health-related care or treatment under the direction of a health care professional with the authority to direct that individual's activities, including medical technicians, medical assistants, dental assistants, orderlies, aides, and individuals acting in similar capacities (R.C. 2305.234(A)(6)).

uninsured person, unless the action or omission constituted willful or wanton misconduct (R.C. 2305.234(D)).

The act provides that subject to specified exceptions described below under "**Exceptions**" and paragraph (3) under "**Qualifications**," and to the extent that the requirements for registration with the Ohio Department of Health under R.C. 3701.071 apply (see following paragraph), a "health care facility or location," as defined in the act, that is associated with: (1) a volunteer health care professional who provides medical, dental, or other health-related diagnosis, care, or treatment *anywhere* to an indigent and uninsured person, (2) a volunteer health care worker who provides medical, dental, or other health-related diagnosis, care, or treatment *anywhere* to an indigent or uninsured person, *or* (3) *a nonprofit health care referral organization described in R.C. 2305.234(D)* (see "**Civil immunity of nonprofit health care referral organizations**," below) (added by the act) is not liable in damages to any person or government entity in a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, for injury, death, or loss to person or property that allegedly arises from an action or omission of the health care professional or worker *or nonprofit health care referral organization relative to the* medical, dental, or other health-related diagnosis, care, or treatment provided to an indigent and uninsured person *on behalf of or at the health care facility or location*, unless the action or omission constitutes willful or wanton misconduct (R.C. 2305.234(E)).

The act continues the requirement that a "nonprofit shelter or health care facility," defined in the same manner as in former law (see "**Former law**" under "**Definitions**," above, at paragraph (3)), be registered with the Ohio Department of Health as a condition for making the civil immunity available to the entity (R.C. 3701.071).² The act does not provide for the registration of the other entities to which it extends the immunity provisions (see the definition of "health care facility or location" in "**Operation of the act**" under "**Definitions**," above). For purposes of the registration provisions, the act defines "indigent and uninsured person" as having the same meaning as in R.C. 2305.234 (see "**Operation of the act**" under "**Definitions**," above) (R.C. 3701.071(A)(1)).

Civil immunity of nonprofit health care referral organizations

The act provides that subject to specified exceptions and qualifications described below under "**Exceptions**" and paragraph (3) under "**Qualifications**," a

² *Since the act eliminates the use of the term "nonprofit shelter or health care facility" for purposes of R.C. 2305.234 (civil immunity provisions), R.C. 3701.071(A)(2), instead of referring to the definition in R.C. 2305.234, provides a new definition of "nonprofit shelter or health care facility," which is the same as the definition in former law.*

"nonprofit health care referral organization" is not liable in damages to any person or government entity in a tort or other civil action, including an action on a medical, dental, chiropractic, optometric, or other health-related claim, for injury, death, or loss to person or property that allegedly arises from an action or omission of the nonprofit health care referral organization in referring indigent and uninsured persons to, or arranging for the provision of, medical, dental, or other health-related diagnosis, care, or treatment by a volunteer health care professional or a volunteer health care worker covered by the civil immunity provisions, unless the action or omission constitutes willful or wanton misconduct (R.C. 2305.234(D)).

Exceptions

Generally, the above-described civil immunities in former law were not available to an *individual* or to a *nonprofit shelter or health care facility* if, at the time of an alleged injury, death, or loss to person or property, the *individuals* involved are providing one of the following: (1) any medical, dental, or other health-related diagnosis, care, or treatment pursuant to a community service work order entered by a court as a condition of probation or other suspension of a term of imprisonment or imposed by a court as a community control sanction, (2) performance of an operation, or (3) delivery of a baby. These exceptions did not apply to an *individual who provides, or a nonprofit shelter or health care facility* at which the individual provides, diagnosis, care, or treatment that is necessary to preserve the life of a person in a medical emergency. (R.C. 2305.234(E).)

Under the act, generally, the civil immunities provided in former law, as modified by the act, are not available to a *health care professional, health care worker, nonprofit health care referral organization, or health care facility or location* if, at the time of an alleged injury, death, or loss to person or property, the *health care professionals or health care workers* involved are providing one of the services described in (1), (2), and (3) in the preceding paragraph. These exceptions do not apply *when a health care professional or health care worker* provides *medical, dental, or other health-related* diagnosis, care, or treatment that is necessary to preserve the life of a person in a medical emergency. (R.C. 2305.234(F).)

Qualifications

The qualified immunity provisions of former law did not do the following (R.C. 2305.234(F)):

(1) Create a new cause of action or substantive legal right against a health care professional, health care worker, or *nonprofit shelter or health care facility*;

(2) Affect any immunities from civil liability or defenses established by another section of the Revised Code or available at common law to which an *individual* or a *nonprofit shelter or health care facility* may be entitled in connection with the provision of emergency or other diagnosis, care, or treatment;

(3) Grant an immunity from tort or other civil liability to an *individual* or a *nonprofit shelter or health care facility* for actions that are outside the scope of authority of health care professionals or health care workers;

(4) Affect any legal responsibility of a health care professional or health care worker to comply with any applicable law of Ohio or rule of an agency of this state;

(5) Affect any legal responsibility of a *nonprofit shelter or health care facility* to comply with any applicable Ohio law, rule of an agency of this state, or local code, ordinance, or regulation that pertains to or regulates building, housing, air pollution, water pollution, sanitation, health, fire, zoning, or safety.

The act provides that the qualified immunity provisions in former law, as modified by the act, do not do the following (R.C. 2305.234(G)):

(1) Create a new cause of action or substantive legal right against a health care professional, health care worker, *nonprofit health care referral organization*, or *health care facility or location*;

(2) Affect any immunities from civil liability or defenses established by another section of the Revised Code or available at common law to which a *health care professional, health care worker, nonprofit health care referral organization, or health care facility or location* may be entitled in connection with the provision of emergency or other *medical, dental, or other health-related* diagnosis, care, or treatment;

(3) Grant an immunity from tort or other civil liability to a *health care professional, health care worker, nonprofit health care referral organization, or health care facility or location* for actions that are outside the scope of authority of health care professionals or health care workers;

(4) Affect any legal responsibility of a health care professional, health care worker, or *nonprofit health care referral organization* to comply with any applicable law of Ohio or rule of an agency of this state;

(5) Affect any legal responsibility of a *health care facility or location* to comply with any applicable Ohio law, rule of an agency of this state, or local code, ordinance, or regulation that pertains to or regulates building, housing, air pollution, water pollution, sanitation, health, fire, zoning, or safety.

Volunteer's licenses for retired physicians and dentists

Prior law provided for the issuance of "volunteer's certificates" to retired physicians and dentists so that they could provide their services to indigent and uninsured persons at *nonprofit shelters or health care facilities*. The act expands the number of persons who may be served by including persons with incomes not greater than 200% of the federal poverty line. The act also eliminates the provisions specifying that the volunteer medical or dental services may be provided only in a nonprofit shelter or health care facility. (R.C. 4715.42 and 4731.295.)

Additional duties of Medical Malpractice Commission

Continuing law

Section 4 of Am. Sub. S.B. 281 of the 124th General Assembly created the Ohio Medical Malpractice Commission consisting of nine members appointed as follows: (1) three appointed by the President of the Senate, (2) three appointed by the Speaker of the House of Representatives, (3) one appointed by the minority leader of the Senate and one appointed by the minority leader of the House of Representatives, and (4) one who is the Director of the Department of Insurance or the Director's designee. Of the six members appointed by the Senate President and the House Speaker, one represents the Ohio State Bar Association, one represents the Ohio State Medical Association, and one represents the insurance companies in Ohio, and all of them are required to have expertise in medical malpractice insurance issues. The duties of the Commission are the following: (1) to study the effects of Am. Sub. S.B. 281, (2) to investigate the problems posed by, and the issues surrounding, medical malpractice, and (3) to submit a report of its findings to the General Assembly not later than two years after that act's effective date.

Any vacancy in the membership of the Commission must be filled in the same manner in which the original appointment was made. The members of the Commission, by majority vote, are required to elect a chairperson from among themselves. The Department of Insurance provides any technical, professional, and clerical employees that are necessary for the Commission to perform its duties.

Operation of the act

The act requires the Ohio Medical Malpractice Commission created by Section 4 of Am. Sub. S.B. 281 of the 124th General Assembly to have the following duties, in addition to the other duties provided by law for the Commission (Section 3(B)):

(1) To study the affordability and availability of medical malpractice insurance for health care professionals and health care workers who are volunteers and for nonprofit health care referral organizations;

(2) To study the feasibility of whether the state of Ohio should provide catastrophic claims coverage, or an insurance pool of any kind, for health care professionals and health care workers to utilize as volunteers in providing medical, dental, or other health-related diagnosis, care, or treatment to indigent and uninsured persons;

(3) To study the feasibility of whether the state of Ohio should create a fund to provide compensation to indigent and uninsured persons who receive medical, dental, or other health-related diagnosis, care, or treatment from health care professionals or health care workers who are volunteers, for any injury, death, or loss to person or property as a result of the negligence or other misconduct by those health care professionals or workers;

(4) To study whether the Good Samaritan laws of other states offer approaches that are materially different from the Ohio Good Samaritan Law as amended by this act, as contained in R.C. 2305.234.

The Commission must submit a report of its findings regarding all of the matters described in clauses (1) to (4), above, to the members of the General Assembly not later than two years after the effective date of this act. The Department of Insurance must provide any technical, professional, and clerical employees that are necessary for the Commission to perform its duties under the act. (Section 3(C) and (D).)

For purposes of the above provisions regarding the Ohio Medical Malpractice Commission, the act defines "health care professional," "health care worker," "indigent and uninsured person," "nonprofit health care referral organization," and "volunteer" as having the same meanings as in R.C. 2305.234, as amended by this act (see "Definitions," above) (Section 3(A)).

Drug repository program--effective date

Sub. H.B. 221 of the 124th General Assembly enacted R.C. 3715.87, 3715.871, 3715.872, and 3715.873 to establish under the direction of the State Board of Pharmacy a drug repository program to accept and dispense donated prescription drugs. Former Section 2 of Sub. H.B. 221 provided that R.C. 3715.87, 3715.871, and 3715.872 as enacted by Sub. H.B. 221 take effect *one year after the effective date of that section*. That effective date was April 7, 2003, and the one-year effective date for those R.C. sections would have been April 7, 2004.

This act amends Section 2 of Sub. H.B. 221 of the 124th General Assembly to provide that R.C. 3715.87, 3715.871, and 3715.872 as enacted by Sub. H.B. 221 take effect on *January 1, 2004* (Section 4).

COMMENT

1. Under R.C. 3715.87 to 3715.873 (not in the act) and Section 4 of the act, the State Board of Pharmacy is required to establish by January 1, 2004, a drug repository program under which prescription drugs can be donated for distribution through participating pharmacies, hospitals, and nonprofit clinics. For purposes of the program, a "nonprofit clinic" is described, in part, as a clinic that serves indigent and uninsured persons, as those persons are described in the laws providing immunity from civil liability to volunteer health providers. As a consequence, the act's increase in the income level that identifies a person as being indigent extends to the description of nonprofit clinics that are permitted to participate in the drug repository program. In this context, the specification that a nonprofit clinic serves persons who are considered to be indigent does not limit the clinics to serving only those persons who meet the standard for being indigent. Therefore, the act's inclusion of more persons within the meaning of being indigent appears to have no substantive effect on the drug repository program.

2. Under the act, the qualified civil immunity of a health care worker applies only if the health care worker is a volunteer and provides the medical, dental, or other health-related diagnosis, care, or treatment to an indigent or uninsured person *under the direction of a health care professional with authority to direct that health care worker's activities*. (See R.C. 2305.234(A)(6) and (C).)

HISTORY

ACTION	DATE	JOURNAL ENTRY
Introduced	05-13-03	p. 335
Reported, S. Health, Human Services, & Aging	06-05-03	pp. 412-413
Passed Senate (32-0)	06-10-03	pp. 437-438
Reported, H. Civil & Commercial Law	11-06-03	p. 1155
Passed House (87-9)	12-10-03	pp. 1288-1294
Senate concurred in House amendments (33-0)	12-10-03	pp. 1283-1284

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