STATE MEDICAL BOARD

Summary suspensions

- Revises the law authorizing the State Medical Board to issue summary suspensions against its license holders, including by specifying that a summary suspension is not a final appealable order and is not an adjudication that may be appealed under the Administrative Procedure Act.

Certified mental health assistants

- Revises the law governing certified mental health assistants to correspond with the law governing other health care professionals licensed by the Board.

Medical Quality Assurance Fund

- Establishes procedures for transferring money in the Medical Quality Assurance Fund to the Board's monitoring organization under contract to operate the Confidential Monitoring Program for impaired practitioners.
- Requires the monitoring organization, in collaboration with the Ohio State Medical Association and Ohio Hospital Association, to create a foundation to be operated solely for supporting programs for impaired practitioners.
- Requires the monitoring organization to transfer the money it receives from the Medical Quality Assurance Fund to the foundation's governing board.
- Requires the foundation's governing board to approve an annual plan for disbursement of funds held by the foundation, with the initial disbursement to occur by January 1, 2026.

Summary suspensions

(R.C. 4730.25, 4731.22, 4759.07, 4760.13, 4761.09, 4762.13, 4772.20, 4774.13, and 4778.14)

The act revises in the following ways the law authorizing the State Medical Board, in limited circumstances, to issue summary suspensions against its license holders:

- It eliminates provisions specifying that an order is not subject to suspension by a court before the Board issues its final adjudicative order and, instead, specifies:
  - That a summary suspension is not a final appealable order and is not an adjudication that may be appealed under the Administrative Procedure Act (R.C. Chapter 119); and
  - That once a final adjudicative order has been issued, any party adversely affected by it may file an appeal in accordance with the requirements of the Administrative Procedure Act.
- It eliminates law specifying that a summary suspension remains in effect unless reversed on appeal.

- In the case of acupuncturists, anesthesiologist assistants, certified mental health assistants, genetic counselors, and radiologist assistants, it extends to 75 days (from 60) the number of days by which the Board must issue its final adjudicative order after its hearing regarding the summary suspension. (The 75-day timeline corresponds with that for other practitioners regulated by the Board.)

Certified mental health assistants

(R.C. 4731.2210, 4772.20, 4772.21, 4772.23, and 4772.99; conforming changes in R.C. 4759.99, 4760.99, 4761.99, 4762.99, 4772.99, and 4774.99)

The act revises in the following ways the law governing certified mental health assistants (CMHAs) in order to correspond with recently enacted changes to the law governing other health care professionals also licensed by the Board:

- It authorizes the Board to recommend that a CMHA's license be suspended without a prior hearing if the Board receives verifiable information that the CMHA has been charged with a felony and the conduct charged constitutes grounds for Board disciplinary action.
- It requires a CMHA who has reasonable cause to suspect that a licensee of the Board has committed or participated in criminal conduct or sexual misconduct to report that information to the Board.
- It requires a CMHA to self-report criminal charges regarding criminal conduct, sexual misconduct, or any conduct involving the use of a motor vehicle while under the influence of drugs or alcohol.
- It reduces from 60 to 30 the number of days by which a health facility must report various conduct of a CMHA to the Board.
- It authorizes the Board to require a CMHA subject to a probationary order related to sexual misconduct or patient harm to provide a written disclosure to each patient, the patient's guardian, or a key third party.

Regarding the description of criminal penalties under the CMHA law as well as other laws administered by the Board, the act makes adjustments to conform with standard bill drafting conventions.

Medical Quality Assurance Fund

(R.C. 4731.256 (primary) and 113.78; Sections 105.30, 620.40, and 620.41)

The act establishes a process for transferring the money in the Medical Quality Assurance Fund, which is a custodial fund, to the monitoring organization that contracts with the Board to operate the Confidential Monitoring Program for impaired practitioners. The fund was created to receive money that the Ohio Medical Quality Foundation was required to transfer to it by April 1, 2025.[116]

[116] See Section 14 of H.B. 238 of the 135th General Assembly.

The following steps apply to the fund-transfer process:

1. By October 30, 2025, the monitoring organization must create a foundation to be operated for the sole purpose of supporting monitoring programs for impaired practitioners. The foundation must be created in collaboration with the Ohio State Medical Association and Ohio Hospital Association. It must include a three-member governing board consisting of one individual appointed by the chief executive officer of each of the creating entities.

2. Once the foundation is created, the monitoring organization must notify the Treasurer of State.

3. Within 30 days after receiving the notice, the Treasurer of State must transfer all unencumbered money in the fund to the monitoring organization. Until the transfer occurs, all investment earnings are to be credited to the fund.

4. Within 30 days after receiving the money, the monitoring organization must submit the money to the governing board of the foundation created as described above.

5. On January 1, 2026, or the 30th day after the governing board receives the money, whichever is later, the governing board must complete its initial disbursement.

6. On July 1, 2026, the Medical Quality Assurance Fund is abolished.

Annual disbursement plan

The foundation's governing board must hold at least one meeting each year to approve an annual plan for disbursing funds held by the foundation. In determining the amount to be disbursed, the governing board must consider factors related to the cost of providing monitoring services, the revenue generated from participants who receive services from the monitoring organization, and the extent to which the monitoring organization's services are being used, particularly by individuals under the Board's jurisdiction as practitioners and license applicants. Only the governing board is given the power and duty to determine the amount to be disbursed.