Health

Sub. H.B. 101

Reps. Merrin, Becker, Thompson, Seitz, Stein, West, Roegner, Sheehy, Sprague, Hood, R. Smith, Anielski, Antani, Antonio, Arndt, Boyd, Brenner, Brinkman, Butler, Carfagna, Celebrezze, Clyde, Conditt, Craig, Cupp, Dever, DeVitis, Duffey, Edwards, Galonski, Gavarone, Ginter, Goodman, Greenspan, Hagan, Hambley, Hill, Holmes, Hughes, T. Johnson, Keller, Kick, Koehler, Landis, Leland, Lepore-Hagan, Lipps, Manning, McColley, O'Brien, Patterson, Patton, Pelanda, Perales, Ramos, Reineke, Retherford, Rogers, Ryan, Schaffer, Slaby, K. Smith, Strahorn, Sweeney, Wiggam, Young

Sens. Beagle, Bacon, Brown, Coley, Hackett, Hoagland, Hottinger, Jordan, Kunze, LaRose, Obhof, Peterson, Uecker, Wilson, Yuko

Effective date: April 8, 2019

Epinephrine

- Authorizes a pharmacist to dispense epinephrine under a physician-established protocol, rather than a prescription, to (1) individuals experiencing or likely to experience anaphylaxis and (2) entities where allergens capable of causing anaphylaxis may be present.
- Authorizes a pharmacist filling a prescription for an epinephrine autoinjector identified by a specific name to substitute it with another autoinjector if the drugs in each are equivalent.
- Designates investigatory information and certain disciplinary information received or maintained by the State Board of Pharmacy as not being a public record.
- Clarifies that the authority to dispense drugs is generally limited to pharmacists, but continues the authority of pharmacy interns to dispense drugs in limited circumstances while also permitting them to dispense epinephrine under a protocol.
- Names the act's epinephrine provision the "Epinephrine Accessibility Act."

Other provisions

- Permits the Board to approve basic life-support training courses for pharmacists and pharmacy interns seeking authority to administer immunizations and drugs by injection.
- Exempts the following facilities from the licensing requirement that must be met to provide office-based opioid treatment: federally qualified health centers and their look-alikes, state or local correctional facilities, and other facilities specified by the Board in rule.

 Allows an office-based opioid treatment facility to employ a person with a criminal record if (1) the disqualifying offense was committed more than ten years before the person applied or (2) the Board grants the facility a waiver permitting the person to be employed despite having a disqualifying offense within the preceding ten years.

Am. Sub. H.B. 111

Reps. Carfagna and Ryan, Brenner, Butler, Cupp, Dever, Duffey, Goodman, Hambley, LaTourette, Riedel, Schaffer, Seitz, Stein, Wiggam, Young, Holmes, O'Brien, Bishoff, Anielski, Antonio, Arndt, Blessing, Boccieri, Boyd, Celebrezze, Clyde, Craig, Edwards, Fedor, Gavarone, Ginter, Green, Greenspan, Householder, Howse, Huffman, Ingram, Keller, Kent, Kick, Landis, Leland, Lepore-Hagan, Manning, Miller, Patton, Pelanda, Perales, Ramos, Reece, Reineke, Rogers, Scherer, Sprague, Strahorn, Sweeney, West

Sens. Brown, Burke, Eklund, Hackett, Hoagland, Kunze, Lehner, O'Brien, Schiavoni, Sykes, Tavares, Thomas, Yuko

Effective date: Emergency, but most sections effective September 28, 2018; APRN exemptions effective June 29, 2018; opioid treatment licensure requirement effective June 29, 2019; alcohol and drug addiction services certification requirement effective September 29, 2019

Alcohol and drug addiction services

- Beginning September 29, 2019, requires the following alcohol and drug addiction services be certified by the Ohio Department of Mental Health and Addiction Services: (1) withdrawal management addiction services provided in a setting other than an acute care hospital, (2) addiction services provided in a residential treatment setting, and (3) addiction services provided on an outpatient basis.
- Creates an exception to the certification requirement for services provided by an authorized health care professional or an employee or contractor of an accredited hospital outpatient clinic.
- Makes failure to meet the certification requirement a crime.

Opioid treatment programs

- Beginning June 29, 2019, requires that opioid treatment programs be licensed by the Department, in place of a licensing requirement that applies only to methadone treatment.
- Makes failure to meet the opioid treatment program licensing requirement a crime.
- Modifies methadone licensing requirements during the period before June 29, 2019, by requiring that methadone license applicants be in good standing and by adjusting location requirements.
- Applies methadone licensing requirements, including the act's changes, to opioid treatment program licensing.

Advanced practice registered nurses

- Permits an advanced practice registered nurse (APRN) who is a clinical nurse specialist or certified nurse practitioner and is certified as a psychiatric-mental health nurse to have an individual involuntarily hospitalized for mental health treatment in an emergency.
- Requires a standard care arrangement between an APRN and a collaborating physician or podiatrist to include (1) criteria for referral of patients to any physician or podiatrist, rather than just the collaborating physician or podiatrist, and (2) a process for obtaining a consultation with any physician or podiatrist, rather than just the collaborating physician or podiatrist.
- Permits an APRN who specializes in mental health to have a standard care arrangement with a physician who does not practice the same or a similar specialty only if the APRN has certain credentials and the physician practices (1) psychiatry, (2) pediatrics, or (3) primary care or family practice.
- Permits an APRN to obtain an Ohio license without meeting certain licensing requirements if alternative requirements are met.

Dialysis technicians

Reduces to six months (from 12) the time an applicant for a certificate to practice as a
dialysis technician must have practiced before applying.

Orthotists, prosthetists, and pedorthists

• Extends to two years (from one) the licensing period for orthotists, prosthetists, and pedorthists.

Health professionals regulated by State Medical Board

- Eliminates the requirement that each physician assistant supervision agreement be submitted to and reviewed by the State Medical Board.
- Increases to not more than \$5,000 (from not more than \$1,000) the penalty for a physician or physician assistant's failure to comply with a supervision agreement and also applies the penalty to a physician's failure to enter into a supervision agreement before initiating supervision of a physician assistant.
- Authorizes the Board to issue a training certificate to a person seeking to participate
 in Ohio in a clinical rotation offered to interns, residents, or clinical fellows
 participating in programs located outside the state.
- Permits professional disciplinary action against a physician who has been suspended or terminated from participation in Medicare or Medicaid for any reason.

• Revises law governing issuance or renewal of certain licenses, certificates, and permits by the Board and its authority to investigate respiratory care professionals.

Charter county hospitals

 Authorizes a board of county hospital trustees of a charter county hospital to purchase, acquire, lease, construct, own, operate, or manage hospital facilities in a county contiguous to a charter county.

Children's crisis care facilities

 Modifies criteria for distribution of FY 2019 funds allocated for children's crisis care facilities.

Sub. H.B. 286

Reps. LaTourette, Arndt, Schaffer, Schuring, Anielski, Antonio, Ashford, Barnes, Blessing, Boggs, Boyd, Brenner, Brown, Carfagna, Celebrezze, Cera, Clyde, Craig, Cupp, Dean, DeVitis, Edwards, Faber, Fedor, Galonski, Gavarone, Ginter, Green, Greenspan, Hagan, Hambley, Hill, Holmes, Howse, Huffman, Hughes, Ingram, Kick, Landis, Lang, Leland, Lepore-Hagan, Lipps, Manning, McColley, Miller, O'Brien, Patterson, Patton, Pelanda, Perales, Ramos, Reece, Reineke, Rezabek, Riedel, Rogers, Ryan, Scherer, Seitz, Sheehy, K. Smith, R. Smith, Sprague, Stein, M. Sweeney, Sykes, Thompson, West, Young, Rosenberger

Sens. Beagle, Burke, Coley, Eklund, Gardner, Hackett, Huffman, Kunze, Lehner, Manning, Oelslager, Peterson, Schiavoni, Tavares, Terhar, Thomas, Yuko

Effective date: March 20, 2019

Palliative care

- Requires specified health care facilities and providers to establish a system for identifying patients or residents who could benefit from palliative care and to provide information about palliative care.
- Authorizes a hospice care program to provide palliative care to a patient who is not a
 hospice patient, if it is provided on a short-term, inpatient basis and is medically
 necessary.
- Exempts inpatient palliative care provided to patients with life-threatening illnesses from pain management clinic licensing requirements when the care is provided by a hospice care program to nonhospice patients or by any palliative care inpatient facility or unit that was not previously exempt.
- Specifies that Medicaid is not required to cover palliative care beyond that provided on the act's effective date.
- Creates the Palliative Care and Quality of Life Interdisciplinary Council to advise the Department of Health on matters related to palliative care initiatives.

• Establishes the Palliative Care Consumer and Professional Information and Education Program in the Department and requires the Department to publish on its website certain information regarding palliative care.

Certificate of Need – relocation of beds

• Authorizes the Director of Health to approve relocation of certain county home beds or county nursing home beds to a long-term care facility in a contiguous county.

Sub. H.B. 332

Reps. Antani, Leland, West, Ingram, Kent, Keller, Lipps, Zeltwanger, Vitale, Romanchuk, Riedel, Becker, Huffman, LaTourette, Anielski, Antonio, Arndt, Ashford, Barnes, Boccieri, Boyd, Brenner, Brown, Butler, Carfagna, Celebrezze, Craig, Dean, Edwards, Galonski, Gavarone, Ginter, Greenspan, Hagan, Hambley, Henne, Hill, Holmes, Hoops, Householder, Hughes, T. Johnson, Kick, Koehler, Landis, Lanese, Lepore-Hagan, McClain, Miller, O'Brien, Patterson, Patton, Perales, Rezabek, Rogers, Ryan, Schaffer, Sheehy, Slaby, R. Smith, Sprague, Stein, Strahorn, Thompson, Wiggam, Young

Sens. Hackett, Balderson, Burke, Coley, Dolan, Eklund, Gardner, Hoagland, Huffman, Kunze, LaRose, Lehner, Manning, Obhof, O'Brien, Oelslager, Peterson, Schiavoni, Sykes, Tavares, Terhar, Thomas, Uecker, Yuko

Effective date: September 28, 2018; appropriation effective June 29, 2018

- Prohibits physicians, hospitals, and other covered entities from discriminating against potential transplant recipients solely on the basis of disability.
- Generally, requires each covered entity to make reasonable modifications to allow individuals with disabilities access to transplantation-related treatment and services.
- Authorizes an individual who has been adversely affected by a violation of the act's
 provisions to seek an injunction to stop the violation, but prohibits a court from
 awarding compensatory or punitive damages.
- Prohibits a health plan issuer from denying coverage for anatomical gifts, transplantation, or related treatment and services solely on the basis of disability.
- Appropriates \$2.5 million from GRF to the Department of Medicaid in FY 2019 for the Positive Education Program Connections in Cuyahoga County.

Am. Sub. H.B. 464

Reps. Lipps and Antonio, Huffman, West, Seitz, Rezabek, Carfagna, LaTourette, Leland, Lang, T. Johnson, Reece, Clyde, Gavarone, DeVitis, Schuring, Green, Thompson, Boggs, Koehler, Ingram, Romanchuk, Kent, Keller, Manning, Blessing, Lepore-Hagan, Anielski, Ashford, Boccieri, Boyd, Brown, Butler, Craig, Cupp, Dean, Dever, Faber, Fedor, Galonski, Ginter, Greenspan, Hambley, Holmes, Hoops, Howse, Hughes, Kelly, Kick, Landis, Lanese, McClain, Miller, O'Brien, Patterson, Patton, Pelanda, Perales, Reineke, Riedel, Rogers, Ryan, Schaffer, Scherer, Sheehy, K. Smith, Stein, Strahorn, Sykes, Young

Sens. Beagle, Bacon, Brown, Burke, Dolan, Eklund, Gardner, Hackett, Hottinger, Huffman, Jordan, Kunze, Lehner, Manning, Obhof, O'Brien, Oelslager, Peterson, Schiavoni, Skindell, Sykes, Tavares, Terhar, Thomas, Williams, Wilson

Effective date: March 20, 2019

- Creates a process for state recognition of hospitals as comprehensive stroke centers, primary stroke centers, or acute stroke ready hospitals.
- Prohibits a hospital from representing itself as a comprehensive or primary stroke center or acute stroke ready hospital unless it is recognized as such by the Ohio Department of Health.
- Requires the establishment of written protocols for emergency medical service personnel when assessing, treating, and transporting stroke patients.

Sub. H.B. 541

Reps. Patterson and LaTourette, Becker, Brown, Riedel, O'Brien, Seitz, Huffman, T. Johnson, Lepore-Hagan, Anielski, Antonio, Arndt, Boggs, Boyd, Celebrezze, Clyde, Craig, Dean, Faber, Gavarone, Ginter, Green, Greenspan, Hambley, Hood, Koehler, Lang, Leland, Manning, Miller, Patton, Perales, Ramos, Rezabek, Roegner, Rogers, Ryan, Sheehy, Slaby, K. Smith, Stein, M. Sweeney, Thompson, West, Wiggam, Young, R. Smith

Sens. Gardner, Hottinger, Hackett, Beagle, Tavares, Brown, Burke, Eklund, Hoagland, Huffman, Manning, O'Brien, Peterson, Schiavoni, Sykes, Terhar, Thomas, Uecker, Yuko

Effective date: March 22, 2019

Out-of-state practitioners and volunteer services

- Authorizes health care professionals licensed in other states to provide volunteer health services in Ohio during charitable events.
- Limits an out-of-state professional's scope of practice during the charitable event if the professional has a more limited scope in the other state.
- Requires the out-of-state professional or the event's organizer to notify the relevant board of the intent to practice at least seven calendar days before the event begins.

Pharmacist administration of immunizations

- Replaces the Pharmacy Board's duty to approve individual immunization administration courses and protocols for pharmacists and pharmacy interns with a requirement to adopt rules specifying requirements for the courses and protocols.
- Authorizes a pharmacist or pharmacy intern to complete a course in basic life-support that is approved by the Board as an alternative to a course certified by the American Red Cross or American Heart Association.

Home medical equipment

 Eliminates differences between how the Board is to regulate home medical equipment providers and other professionals.

Hyperbaric oxygen therapy

For the law governing podiatrist supervision of hyperbaric oxygen therapy, clarifies
that a physician is readily available to consult with the podiatrist if the physician is
able to communicate with the podiatrist in a timely fashion either in person or by oral,
written, or electronic means.

Kinship Caregiver Child Care Program

• Modifies an earmark to the Kinship Caregiver Child Care Program in the main budget act for the 132nd General Assembly (H.B. 49).

Sub. S.B. 119

Sens. Hackett and Hottinger, Beagle, Balderson, Brown, Burke, Dolan, Eklund, Gardner, Hoagland, Kunze, LaRose, Lehner, Manning, O'Brien, Oelslager, Peterson, Schiavoni, Terhar, Uecker, Wilson

Reps. Gavarone, Antani, Butler, Duffey, Edwards, Ginter, T. Johnson, Lepore-Hagan, Anielski, Arndt, Barnes, Blessing, Brenner, Brown, Carfagna, Craig, Cupp, Dean, Dever, DeVitis, Faber, Fedor, Galonski, Green, Greenspan, Hagan, Hambley, Hill, Holmes, Householder, Howse, Hughes, Kent, Kick, Landis, Lanese, Leland, Manning, McClain, Merrin, Miller, Patterson, Patton, Pelanda, Ramos, Reece, Riedel, Roegner, Rogers, Romanchuk, Ryan, Schaffer, Scherer, Schuring, Seitz, Sheehy, Slaby, K. Smith, T. Smith, Sprague, Stein, Strahorn, B. Sweeney, Sykes, Thompson, West, Wilkin, Young, Zeltwanger, R. Smith

Effective date: March 20, 2019

- Authorizes a pharmacist to dispense or, in some cases, administer by injection an emergency refill of naltrexone if certain conditions are met.
- Grants immunity to each of the following for administering naltrexone by injection under specified circumstances: the person who administers the drug, the person's employer, and the facility at which the drug is administered.

- Requires the dispensing or furnishing of naltrexone to be reported to the State Board of Pharmacy's Ohio Automated Rx Reporting System.
- Requires the Ohio Department of Public Safety, if it collects certain information concerning the administration of naloxone by emergency medical service personnel, to report that information to the Ohio Department of Health monthly.
- Names the act "Daniel's Law" and the "Opioid Data and Communication Expansion Act."

Sub. S.B. 144

Sens. Burke, Yuko, Coley, Bacon, Beagle, Eklund, Hackett, Hite, Hoagland, Huffman, Lehner, Manning, Obhof, O'Brien, Tavares, Terhar, Wilson

Reps. Anielski, Hambley, Carfagna, Perales, Antonio, Ashford, Brown, Craig, Dean, Dever, Galonski, Holmes, Howse, T. Johnson, Kent, Lang, LaTourette, Lepore-Hagan, Lipps, Manning, Miller, O'Brien, Patterson, Patton, Pelanda, Reineke, Rogers, Romanchuk, Ryan, Scherer, Seitz, Sheehy, R. Smith, Sweeney, West, Wiggam, Young

Effective date: June 1, 2018

Opportunities for Ohioans with Disabilities Council

- Creates the Opportunities for Ohioans with Disabilities (OOD) Council, a state rehabilitation services council, to replace the OOD Commission, the Consumer Advisory Committee, and the Governor's Council on People with Disabilities.
- Requires the Governor to appoint 15 members to the OOD Council, a majority of whom must be persons with disabilities who are not employed by the Opportunities for Ohioans with Disabilities Agency (OOD), and specifies the qualifications and terms of members.
- Requires the Executive Director of OOD and any other member of the OOD Council who is an OOD employee to serve as a nonvoting member.
- Requires the OOD Commission to continue to operate until the Governor appoints all of the initial members to the OOD Council, and requires each current member of the Commission to finish the member's term as a member of the Council.
- Limits members of the OOD Council to two consecutive terms, with certain exceptions.
- Requires OOD to provide administrative support and assistance to the Council and to collaborate with it in developing a resource plan in compliance with federal law.
- Prohibits a Council member from participating in discussion or votes on any matter with respect to which the member has a conflict of interest.

- Prohibits any officer or employee of the Council from engaging in certain partisan political activities.
- Lists the Council's duties, which include advising OOD and other agencies about vocational rehabilitation programs and promoting vocational rehabilitation services.

Trauma Committee membership

Adds the American Osteopathic Board of Emergency Medicine to the boards by which
a physician may be certified to be eligible for appointment to the Trauma Committee
of the State Board of Emergency Medical, Fire, and Transportation Services, and
corrects the name of one of those boards.

Employee firefighter board members

 Restores staggered terms of office for the employee members representing firefighters on the Board of Trustees of the Ohio Police and Fire Pension Fund.

Technical change

• Corrects several references to "OHA: The Association for Hospitals and Health Systems" to refer to the Ohio Hospital Association.

Sub. S.B. 229

- **Sens.** Eklund, Lehner, Beagle, Hackett, Brown, Burke, Dolan, Hoagland, Kunze, LaRose, Manning, O'Brien, Schiavoni, Tavares, Terhar, Thomas, Wilson, Yuko
- **Reps.** Huffman, T. Johnson, Anielski, Antonio, Blessing, Brenner, Carfagna, Craig, Galonski, Ginter, Holmes, Koehler, Landis, Lang, Leland, Lepore-Hagan, Lipps, Manning, Miller, Perales, Reineke, Scherer, T. Smith, Sprague, Young, R. Smith

Effective date: March 22, 2019; scheduling controlled substances by rule effective March 22, 2020; one provision effective June 29, 2019

Controlled substance schedules by rule

- Effective March 22, 2020, eliminates the statutory lists of drugs designated as controlled substance schedules I, II, III, IV, and V and, in their place, requires the State Board of Pharmacy to adopt and periodically update rules incorporating the schedules that have been established under federal law.
- Until March 22, 2020, adds to schedule V certain cannabidiol drugs that have been approved by the U.S. Food and Drug Administration.
- Beginning March 22, 2019, requires the Board to adopt emergency rules that add a
 previously unscheduled compound, mixture, preparation, or substance to schedule I
 if the Board determines that the drug has no accepted medical use in treatment and
 poses an imminent hazard to public health, safety, or welfare.

Regulation of controlled substances

- Requires certain records pertaining to controlled substances to be maintained for five years, instead of three years.
- Authorizes the dispensing of a schedule II controlled substance pursuant to an electronic prescription.
- Modifies the general prohibition against dispensing or selling an opioid analysis if
 the drug is to be used on an outpatient basis and more than 14 days have elapsed since
 the prescription was issued.

Office-based opioid treatment

- Exempts the following facilities from the licensing requirement that must be met to provide office-based opioid treatment: federally qualified health centers and their look-alikes, state or local correctional facilities, and other facilities specified by the Board in rule.
- Allows an office-based opioid treatment facility to employ a person with a criminal record if (1) the disqualifying offense was committed more than ten years before the person applied or (2) the Board grants the facility a waiver permitting the person to be employed despite having a disqualifying offense within the preceding ten years.

Drug take-back program

- Specifies persons that may participate in the drug take-back program administered by the Board and modifies the information that must be included in the Board's report on the program.
- Requires the Board to publish on its website certain information about the drug take-back program and permits the Board to otherwise promote public awareness of the program.

Licensing, regulatory, and administrative provisions

- Requires certain persons to submit to criminal background checks as a condition of licensure as a manufacturer, outsourcing facility, third-party logistics provider, repackager, or wholesale distributor of dangerous drugs.
- Authorizes a licensed terminal distributor of dangerous drugs that is not a pharmacy
 to make occasional sales of dangerous drugs at wholesale if the drugs being sold are
 in shortage.
- Requires an emergency medical service organization satellite to be licensed separately from its associated headquarters, and establishes a reduced license fee for the satellite.
- Modifies the proof of education and training that is required as part of an application for registration as a registered pharmacy technician or certified pharmacy technician.

- Excludes from the Public Records Law various residential, familial, and other
 personal information about (1) Board employees and (2) medical directors or
 members of cooperating physician advisory boards of emergency medical service
 organizations.
- Specifies that the authority to possess a controlled substance through a prescription applies only if the prescription is for a legitimate medical purpose, is not altered or forged, and was not obtained through deception or theft.
- Requires designated Board investigators to complete continuing professional training each year through the Ohio Peace Officer Training Commission.

Boards of health

- Permits a board of health to authorize an officer or employee of the board to use a credit card account held by the board.
- Requires boards of health to adopt written policies for the use of credit card accounts.
- Specifies that the use of a credit card account for expenses beyond those authorized by a board of health constitutes the crime of misuse of credit cards.
- Permits a board of health to select the titles it uses to refer to itself, including use of the term "public health."

Online posting of supervising physicians

• Eliminates a requirement that the State Medical Board maintain on its website the name of each supervising physician authorized to grant prescriptive authority to a physician assistant.

Emergency medical services data

- Expands the authority of the State Board of Emergency Medical, Fire, and Transportation Services to transmit data from its Emergency Medical Services Incident Reporting System by allowing (1) transmission of data identifying recipients of care, rather than only providers, and (2) data transmission to any research and monitoring information system, rather than only the National Emergency Medical Services Information System.
- Authorizes the Board to transmit data identifying trauma care recipients and providers from its State Trauma Registry to eligible research and monitoring information systems, including the National Trauma Data Bank.

Medicaid criminal records checks

 Permits certain Medicaid providers to employ persons who otherwise cannot be employed because of criminal records check requirements so long as Medicaid claims are not submitted for the employees' services.