

BOARD OF NURSING (NUR)

General information (NUR)

Duties

The mission and purpose of the Board is to actively safeguard the health of the public through the effective regulation of nursing care. The Board addresses the need for public protection and safe nursing care. The Board regulates about 303,000 licenses and certificates, an increase from 233,000 in 2009. The Board regulates registered nurses (RNs); licensed practical nurses (LPNs); advanced practice registered nurses (APRNs) who are designated as certified nurse practitioners, clinical nurse specialists, certified nurse midwives, certified registered nurse anesthetists; dialysis technicians; community health workers; medication aides; nursing education programs; and training programs.

The public expects nurses to obtain an adequate level of educational preparation, follow established practice standards, and provide competent nursing care. They also expect the Board to address unsafe practitioners, so vulnerable populations, who nurses serve, are protected. Board operations are designed to meet these public expectations.

The Board issues and renews licenses only to those who meet the requirements; establishes and interprets scopes of practice; determines regulatory requirements and practice standards; approves pre-licensure nursing education programs; approves training programs for dialysis technicians, community health workers, and medication aides; and, if licensees violate the Nurse Practice Act or administrative rules, imposes discipline and monitors their practice.

Membership *(Current members, chairperson and other officers, and selection process.)*

At full capacity, 13 Board members and 70 full-time, permanent staff administer and enforce the provisions of Revised Code Chapter 4723. to regulate the practice of nursing for the safety of the public.

Budget *(Current budget, description of budgeting process, sources of funding, and expected increases or decreases in budget or funding in future years.)*

The Board is funded solely on its license fees and receives no General Revenue Funds. Based on the LSC Report on Occupational Licensing and Regulatory Boards, the Board consistently contributes a surplus to the 4K90 Fund. The Board has not requested an increase in fees since 2004.

Revenues vary based on the differences in the number of LPNs and RN/APRNs and their renewal cycles. The RN/APRN renewal cycle occurs in odd-numbered calendar years and the LPN renewal cycle occurs in even-numbered calendar years.

The Board submits a proposed biennial budget every two years which is subsequently reviewed/approved by OBM, the Governor's Office, and the legislature. The legislature has final approval of the appropriations for the Board.

Workload *(Assess current, past, and anticipated workload. Has the workload increased or decreased significantly in the preceding six years?)*

- Regulated 302,823 licenses in FY20 as compared to 281,000 in FY15.
- Added 21,738 newly licensed RNs and LPNs to the nursing workforce in FY20, as compared to 20,019 in FY15.
- Expedited licensure for 2,579 veterans, service members, or spouses, as compared to 1,144 in FY15.
- Renewed over 223,911 licenses during the last RN and APRN renewal cycle, as compared to 202,454 in FY15.
- Issued temporary permits to practice for out-of-state nurses within one (1) business day as compared to 7-10 days in FY15.
- Licensed 5,468 and extended 1,500 licenses through June 30, 2020 based on HB 197 provisions to increase the nursing workforce during COVID-19 declared emergency.
- Regulated 20,734 advanced practice licenses in FY20 as compared with 13,756 in FY15 2015.
- Regulated 2,308 dialysis technicians and dialysis technician interns (1,723 in FY15); 772 community health workers (190 in FY15); and 346 medication aides in FY20 (184 in FY15).
- Investigated 8,350 complaints in 2019 (9,221 in FY15), including 2,071 (2,012 in FY15) applicants with criminal histories. Complaints are investigated for criminal activity, substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules. This includes large numbers of individuals with criminal histories who apply to become licensed nurses.
- Provided monitoring and oversight to assure licensees fulfilled the terms and conditions of their disciplinary agreements, Board Orders, or Participant Agreements. In FY20, the monitoring caseload was 6,055 (4,066 in FY15).

Workload *(Assess current, past, and anticipated workload. Has the workload increased or decreased significantly in the preceding six years?)*

- Reviewed and took Board action on about 300-400 disciplinary cases at each Board meeting.
- Approved training programs for various types of certifications: 21 dialysis technician programs (24 in FY15); 17 community health worker training programs (9 in FY15); and 14 medication aide programs in FY20 (16 in FY15).
- Assisted the Ohio Department of Health (ODH) with surge planning workforce efforts for COVID-19. ODH reported that 7,495 of those responding indicated they had a nursing license, and the Board provided the identifying information for the records.
- Processed 23,221 applications for licensure in FY20 (23,897 in FY15) and 25,082 service requests from licensees requesting a change in their license record or information relating to licensure.

Staffing *(How many staff are currently employed by the board? What are their roles? Are staffing levels proportionate to the board's current and anticipated workload?)*

At full capacity, the Board has 70 full-time employees. The Board is a highly productive agency, even with service demands that increase each year. As you may know, this Board regulates more licenses than any other professional regulatory board in Ohio, while maintaining staffing levels significantly lower than other Boards. Board staff is responsible for regulating about 303,000 licenses; during the last RN and APRN renewal cycle, we renewed 223,911 licenses. To determine that nursing programs and various training programs maintain educational/training standards to educate entry level health care workers for safe practice, Board staff oversee 189 nursing education programs, and 52 training programs. For practice, the staff respond to an average of 475 individual practice questions a month. Staff respond to an average of over 1,200 public records requests per year and prepare and file administrative rules as required by Chapter 119., ORC. The Board receives and Board staff investigate about 8,350 complaints annually; staff coordinate administrative hearings in compliance with Chapter 119., ORC requirements; prepare Board Orders, settlement agreements, no request for hearing evidence materials; monitor compliance with terms and conditions of Board Orders and settlement agreements that licensees must meet for safe care; and administer two alternative to discipline programs.

Administrative hearings and public complaints *(Describe the Board's processes for administering discipline and addressing complaints. Assess the efficiency of the processes.)*

8,350 complaints were received in FY20. The Board has adopted protocols to efficiently triage and process complaints based on patient safety and other factors. Administrative hearings are held in accordance with Chapter 119., ORC. The Board works with the Attorney General's Office which represents the Board in all administrative hearings. The Board also convenes a Board Hearing Committee which hears multiple disciplinary cases in one day to expedite cases and reduce costs.

Registered nurse license

Survey responses (NUR)

Description

RNs provide nursing care requiring specialized knowledge, judgment, and skill derived from principles of biological, physical, behavioral, social, and nursing sciences. To obtain a RN license in Ohio, applicants must complete a pre-licensure RN education program, pass a national examination known as the NCLEX-RN, complete criminal records checks, and meet other regulatory requirements. RNs licensed in another state may be licensed in Ohio through reciprocity.

Type *(See R.C. 4798.01 for relevant definitions.)*

License

If the regulation is a registration, certification, or license requirement, please complete the following:	
Number issued annually	14,895 in FY20
Number renewed annually	222,635 active licenses FY20
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	222,635 active licenses as of June 30, 2020 as compared to 201,373 active licenses as of June 30, 2015.
Education or training requirements	Completion of a Board approved pre-licensure registered nursing education program, or a registered nursing program approved by another state or jurisdiction.
Experience requirements	For entry level practice, clinical experience is required as part of the individual's nursing education.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)	Individuals are required to take the NCLEX, a national examination used by all states. The NCLEX is a high-stake legally defensible and psychometrically sound exam developed by the National Council of State Boards of Nursing (NCSBN) and administered in Pearson VUE testing centers. Pearson VUE charges \$200 for the NCLEX and the Board does not receive any part of that fee.
Continuing education requirements (<i>Including a description of the curriculum and the process of setting it.</i>)	For the period immediately following licensure by NCLEX examination, the nurse is not required to complete CE for the first license renewal. Otherwise, nurses must complete at least 24 contact hours of CE that includes at least one contact hour of Category A (Ohio law and rules) CE for each renewal. A nurse who has been licensed in Ohio by reciprocity for less than or equal to one year prior to the first Ohio license renewal must complete at least 12 contact hours, rather than 24. The Board does not establish CE curriculum. CE providers establish the content for CE events and the CE events are approved by OBN Approvers.

If the regulation is a registration, certification, or license requirement, please complete the following:	
Initial fee	\$75.00
Duration	Licenses are renewed every 2 years.
Renewal fee <i>(If different from initial fee, please explain why.)</i>	\$65.00.
Does the Board recognize uniform licensure requirements or allow for reciprocity?	The Board issues licenses based on reciprocity. Through reciprocity nurses can obtain temporary permits within 1-3 days to practice nursing in Ohio until the license is issued.
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	There are no similar national registrations, certifications, or licenses that could substitute for state regulation of RNs.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	No. All aspects of RN practice are regulated to protect a vulnerable population from criminal activity, substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.

If the regulation is a registration, certification, or license requirement, please complete the following:

Other information (*Significant attributes or prerequisites to licensure not addressed in this chart.*)

N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated from license and certification fees, including renewal. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus generated by the Board remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

Federal laws do not regulate the practice of RN nursing in Ohio. Chapter 4723., ORC authorizes the Board to regulate registered nursing.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe nursing care/practice can result in serious bodily harm or death to vulnerable populations seeking health care. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harm that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective for public protection. Through the disciplinary processes, the Board considers mitigating factors, reviews all issues on a case-by-case basis, incorporates the principles of Just Culture in decision-making, and offers alternative to discipline programs. The Alternative Program for Substance Use Disorder is a confidential program offered in lieu of discipline that encourages treatment and monitoring to assist the nurse in recovery and to return to practice. The Practice Intervention and Improvement Program is a confidential program offered in lieu of discipline that offers educational remediation to address sub-standard nursing practice.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states (*How many other states regulate the occupation? How do Ohio’s regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?*)

All other states and U.S. jurisdictions regulate RNs. Overall, Ohio law is comparable, and Ohio’s law generally falls “in-between.”

Surrounding state comparison (LSC)

Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes (<i>R.C. 4723.03</i>)	Yes (<i>Ind. Code Ann. 25-23-1-1.1</i>)	Yes (<i>Ky. Rev. Stat. Ann. 314.031 and 314.041</i>)	Yes (<i>Mich. Comp. Laws 333.17201</i>)	Yes (<i>63 Pa. Cons. Stat. 213</i>)	Yes (<i>W. Va. Code Ann. 30-7-2</i>)
Education or training	Education program approved by the	State accredited program of registered nursing	Complete curriculum and meet graduation	Registered professional nurse education	Professional nursing education	Accredited program of registered

Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
	Board or another state's board (R.C. 4723.09)	(Ind. Code Ann. 25-23-1-11)	requirements of an approved school of nursing (Ky. Rev. Stat. Ann. 314.041)	program approved by the Board (Mich. Admin. Code R. 338.10204)	program (49 Pa. Code 21.21)	professional nursing education (W. Va. Code Ann. 30-7-6)
Experience	No	No	No	No	No	No
Exam	Yes (R.C. 4723.10)	Yes (Ind. Code Ann. 25-23-1-11)	Yes (Ky. Rev. Stat. Ann. 314.041)	Yes (Mich. Admin. Code R. 338.10204)	Yes (49 Pa. Code 21.21 and 21.24)	Yes (W. Va. Code Ann. 30-7-6)
Continuing education	24 hours every two years (R.C. 4723.24)	No	14 hours every year (201 Ky. Admin. Regs. 20:215)	25 hours every two years (Mich. Admin. Code R. 338.10601)	30 hours every two years (49 Pa. Code 21.131)	12 hours every year (W. Va. Code R. 19-11-3)
Initial licensure fee	\$75 (R.C. 4723.08)	\$50 (848 Ind. Admin. Code 1-1-14)	\$125 (application by examination) or \$165 (application by endorsement) (201 Ky. Admin. Regs. 20:240)	\$208.80 (Michigan Licensing and Regulatory Affairs Bureau of Professional Licensing, Nursing Licensing Guide)	\$95 (application by examination) or \$120 (application by endorsement) (49 Pa. Code 21.5)	\$40 (W. Va. Code Ann. 30-7-6)
License duration	Two years (R.C. 4723.24)	Two years (Ind. Code Ann. 25-23-1-16.1)	One year (201 Ky. Admin. Regs. 20:085)	Two years (Mich. Admin. Code R. 338.10601 and 338.10602)	Two years (49 Pa. Code 21.29)	One year (W. Va. Code Ann. 30-7-8)

Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
Renewal fee	\$65 (<i>R.C. 4723.08</i>)	\$50 (<i>848 Ind. Admin. Code 1-1-14</i>)	\$55 (<i>201 Ky. Admin. Regs. 20:240</i>)	\$128.50 (<i>Michigan Licensing and Regulatory Affairs Bureau of Professional Licensing, Nursing Licensing Guide</i>)	\$122 (<i>49 Pa. Code 21.5</i>)	\$25 (<i>W. Va. Code Ann. 30-7-8</i>)

Practical nurse license

Survey responses (NUR)

Description
<p>LPNs provide nursing care requiring the application of basic knowledge of the biological, physical, behavioral, social, and nursing sciences at the direction of a RN or physician, physician assistant, dentist, podiatrist, optometrist, or chiropractor. To be licensed, applicants must complete a pre-licensure PN education program, pass a national examination known as NCLEX-PN, complete criminal records checks, and meet regulatory requirements. LPNs licensed in another state, may be licensed in Ohio through reciprocity.</p>

Type (See R.C. 4798.01 for relevant definitions.)

Choose an item.

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually	3,556 in FY20
Number renewed annually	56,028 total active licenses n FY20
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	56,028 active licenses as of June 30, 2020 as compared to 55,060 active licenses as of June 30, 2015.
Education or training requirements	Completion of a Board approved pre-licensure practical nursing education program, or a nursing program approved by another state or jurisdiction.
Experience requirements	For entry level practice, clinical experience is part of the individual's nursing education.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any</i>	Individuals are required to pass the NCLEX, a national examination used by all states. The NCLEX is a high-stake legally defensible and psychometrically sound exam developed by the National Council of State Boards of Nursing (NCSBN) and administered in Pearson VUE testing centers. Pearson VUE charges \$200 for the NCLEX and the Board does not receive any part of that fee.

If the regulation is a registration, certification, or license requirement, please complete the following:	
<i>proceeds of those fees? If so, how are the proceeds used?)</i>	
Continuing education requirements <i>(Including a description of the curriculum and the process of setting it.)</i>	For the period immediately following licensure by NCLEX examination, the nurse is not required to complete CE for the first license renewal. Otherwise, nurses must complete at least 24 contact hours of CE that includes at least one contact hour of Category A (Ohio law and rules) CE for each renewal. A nurse who has been licensed in Ohio by reciprocity for less than or equal to one year prior to the first Ohio license renewal must complete at least 12 contact hours, rather than 24. The Board does not establish CE curriculum. CE providers establish the content for CE events and the CE events are approved by OBN Approvers.
Initial fee	\$75.00.
Duration	Licenses are renewed every 2 years.
Renewal fee <i>(If different from initial fee, please explain why.)</i>	\$65.00.
Does the Board recognize uniform licensure requirements or allow for reciprocity?	The Board issues licenses based on reciprocity. Through reciprocity nurses can obtain temporary permits within 1-3 days to practice nursing in Ohio until the license is issued.
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	There are no similar national registrations, certifications, or licenses that could substitute for state regulation.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	All aspects of LPN practice are regulated to protect a vulnerable population from criminal activity, substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules.

If the regulation is a registration, certification, or license requirement, please complete the following:

Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?

After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.

Other information (*Significant attributes or prerequisites to licensure not addressed in this chart.*)

N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated from license and certification fees, including renewal. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

Federal laws do not regulate the practice of LPN nursing in Ohio. Chapter 4723., ORC requires the Board to regulate licensed practical nursing.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe nursing care/practice can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective for public protection. Through the disciplinary processes, the Board considers mitigating factors, reviews all issues on a case-by-case basis, incorporates the principles of Just Culture in decision-making, and offers alternative to discipline programs. The Alternative Program for Substance Use Disorder is a confidential program offered in lieu of discipline that encourages treatment and monitoring to assist the nurse in recovery and to return to practice. The Practice Intervention and Improvement Program is a confidential program offered in lieu of discipline that offers educational remediation to address sub-standard nursing practice.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states (*How many other states regulate the occupation? How do Ohio’s regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?*)

All other states and U.S. jurisdictions regulate LPNs. Overall, Ohio law is comparable, and Ohio’s law generally falls “in-between.”

Surrounding state comparison (LSC)

Licensed Practical Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes (<i>R.C. 4723.03</i>)	Yes (<i>Ind. Code Ann. 25-23-1-1.2</i>)	Yes (<i>Ky. Rev. Stat. Ann. 314.031 and 314.051</i>)	Yes (<i>Mich. Comp. Laws 333.17211</i>)	Yes (<i>63 Pa. Cons. Stat. Ann. 651 to 667.8</i>)	Yes (<i>W. Va. Code Ann. 30-7A-1 to 30-7A-12</i>)
Education or training	Nursing education program approved by the	State accredited program of practical nursing	Practical nursing education program from an	Education program approved by the	Approved practical nursing education	Course of study in an accredited school for

Licensed Practical Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
	Board, another state's board, or certain branches of the U.S. military (R.C. 4723.09)	or a nursing education program in another country approved by the Board (Ind. Code Ann. 25-23-1-12)	approved school of nursing (Ky. Rev. Stat. Ann. 314.051)	Board or one that is substantially similar to a Board-approved program (Mich. Admin. Code R. 338.10210)	program (49 Pa. Code 21.151)	practical nurses as defined by the Board (W. Va. Code Ann. 30-7A-3)
Experience	No	No	No	No	No	No
Exam	Yes (R.C. 4723.09)	Yes (Ind. Code Ann. 25-23-1-12)	Yes (Ky. Rev. Stat. Ann. 314.051)	Yes (Mich. Admin. Code R. 338.10209)	Yes (49 Pa. Code 21.152)	Yes (W. Va. Code Ann. 30-7A-6)
Continuing education	24 hours every two years (R.C. 4723.24)	No	14 hours every year (201 Ky. Admin. Regs. 20:215)	25 hours every two years (Mich. Admin. Code R. 338.10601 and 338.10602)	No	No
Initial licensure fee	\$75 (R.C. 4723.08)	\$50 (848 Ind. Admin. Code 1-1-14)	\$125 (application by examination) or \$165 (application by endorsement) (201 Ky. Admin. Regs. 20:240)	\$208.80 (Michigan Licensing and Regulatory Affairs Bureau of Professional Licensing, Nursing Licensing Guide)	\$95 (application by examination) or \$120 (application by endorsement) (49 Pa. Code 21.147)	\$75 (application by examination) or \$50 (application by endorsement) (W. Va. Code R. 10-4-2)

Licensed Practical Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License duration	Two years (<i>R.C. 4723.24</i>)	Two years (<i>Ind. Code Ann. 25-23-1-16.1</i>)	One year (<i>201 Ky. Admin. Regs. 20:085</i>)	Two years (<i>Mich. Admin. Code R. 338.10601</i>)	Two years (<i>63 Pa. Cons. Stat. 663.1</i>)	One year (<i>W. Va. Code Ann. 30-7A-7, W. Va. Code R. 10-2-9</i>)
Renewal fee	\$65 (<i>R.C. 4723.08</i>)	\$50 (<i>848 Ind. Admin. Code 1-1-14</i>)	\$55 (<i>201 Ky. Admin. Regs. 20:240</i>)	\$128.50 (<i>Michigan Licensing and Regulatory Affairs Bureau of Professional Licensing, Nursing Licensing Guide</i>)	\$76 (<i>49 Pa. Code 21.147</i>)	\$40 (<i>W. Va. Code R. 10-4-2</i>)

Advanced practice registered nurse

Survey responses (NUR)

Description
<p>APRNs provide nursing care that requires knowledge and skill obtained from advanced formal education, training, and clinical experience. To become a licensed advanced practice registered nurse (APRN) in Ohio, applicants must be licensed as a RN; hold a master’s or doctoral degree in a nursing specialty or related field; pass a national certification examination and meet other national certification requirements of an approved national certification organization. If APRNs are licensed in another state, they may be licensed in Ohio through reciprocity.</p>

Type (See R.C. 4798.01 for relevant definitions.)

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually	2,192 in FY20
Number renewed annually	20,734 active licenses in FY20
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	20,734 active licenses as of June 30, 2020 as compared to 13,756 as of June 30, 2015.
Education or training requirements	Completion of a pre-licensure RN program; master's or doctoral degree in a nursing specialty or related field.
Experience requirements	Clinical experience is part of the individual's graduate education.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)	National Certification Organizations administer various types of examinations for APRNs. The fees vary as determined by the national organization. The Board does not receive any proceeds of the fees.

If the regulation is a registration, certification, or license requirement, please complete the following:	
Continuing education requirements <i>(Including a description of the curriculum and the process of setting it.)</i>	APRNs must complete 24 hours of CE, and as applicable, at least 12 of the 24 hours must include CE in advanced pharmacology. The 24 hours required to renew the APRN license are in addition to the 24 hours of CE required to renew the RN license. The APRN can use CE hours that are awarded by the national certifying organization. The Board does not establish CE curriculum.
Initial fee	\$150.00
Duration	Licenses are renewed every 2 years.
Renewal fee <i>(If different from initial fee, please explain why.)</i>	\$135.00.
Does the Board recognize uniform licensure requirements or allow for reciprocity?	The Board issues licenses based on reciprocity. Through reciprocity nurses can obtain temporary permits to practice nursing in Ohio until the license is issued.
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	If the applicant passes the national certification examination, the individual becomes nationally certified as an APRN, but it does not substitute for state licensure.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	No. All aspects of APRN practice are regulated to protect a vulnerable population from criminal activity, substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules. In addition, APRNs have the authority to prescribe controlled drugs, including opioids and other Schedule II drugs, so regulations establish requirements that address opioid diversion and abuse.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant

If the regulation is a registration, certification, or license requirement, please complete the following:	
	licensure under terms and conditions that address the applicant’s criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.
Other information (<i>Significant attributes or prerequisites to licensure not addressed in this chart.</i>)	N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

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Board revenue is generated from license and certification fees, including renewal. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

In general, federal laws do not regulate the practice of APRN nursing in Ohio. However, APRNs are required to follow the requirements of the DEA and other federal regulations, if applicable, based on the APRN's authority to prescribe drugs.

What is the "harm" that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe nursing care/practice resulting in serious bodily harm or death; substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective for public protection. Through the disciplinary processes, the Board considers mitigating factors, reviews all issues on a case-by-case basis, incorporates the principles of Just Culture in decision-making, and offers alternative to discipline programs. The Alternative Program for Substance Use Disorder is a confidential program offered in lieu of discipline that encourages treatment and monitoring to assist the nurse in recovery and to return to practice. The Practice Intervention and Improvement Program is a confidential program offered in lieu of discipline that offers educational remediation to address sub-standard nursing practice.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states *(How many other states regulate the occupation? How do Ohio’s regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)*

All states regulate APRNs. Ohio’s regulations for APRN licensure are consistent with National Consensus Model for APRN Regulation, and in comparison with other states are “in between.”

Surrounding state comparison (LSC)

Advanced Practice Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes (<i>R.C. 4723.44</i>)	No, but authorizes an APRN to seek prescriptive authority (<i>848 Ind. Admin. Code 5-1-1</i>)	Yes (<i>201 Ky. Admin. Regs. 20:056</i>)	No, but a registered nurse may obtain specialty certification (<i>Mich. Admin. Code R.</i>)	No, but certification is available for nurse practitioners and clinical nurse specialists (<i>49 Pa.</i>)	Yes (<i>W. Va. Code Ann. 30-7-2, W. Va. Code R. 19-7-3</i>)

Advanced Practice Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
				338.10401 to 338.10406)	Code 21.251 to 21.377)	
Education or training	Master's or doctoral degree in nursing or a related field (R.C. 4723.41)	Bachelor's or higher degree in nursing (848 Ind. Admin. Code 5-1-1)	Complete an accredited education program that prepares RNs for one of four APRN roles (Ky. Rev. Stat. Ann. 314.042)	N/A	Master's or other advanced degree (49 Pa. Code 21.271)	Graduate education program (W. Va. Code R. 19-7-3)
Experience	No	No	No	N/A	No	No
Exam	Yes (R.C. 4723.41)	Yes (848 Ind. Admin. Code 5-1-1)	Yes (Ky. Rev. Stat. Ann. 314.042)	N/A	No	Yes (W. Va. Code R. 19-7-3)
Continuing education	24 hours every two years (R.C. 4723.24)	30 hours every two years (848 Ind. Admin. Code 5-1-3)	14 hours every year (201 Ky. Admin. Regs. 20:085)	N/A	Yes, but the number of hours is not specified (49 Pa. Code 21.332)	24 hours every two years (W. Va. Code R. 19-7-6)
Initial licensure fee	\$150 (R.C. 4723.08)	\$50 (848 Ind. Admin. Code 5-3-1)	\$165 (201 Ky. Admin. Regs. 20:215)	\$40.55 (Michigan Licensing and Regulatory Affairs Bureau of Professional	\$100 or \$140 (application by endorsement) (49 Pa. Code 21.253)	\$70 (W. Va. Code R. 19-12-2)

Advanced Practice Registered Nurses						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
				<i>Licensing, Nursing Licensing Guide</i>		
License duration	Two years (R.C. 4723.24)	Two years (848 Ind. Admin. Code 5-1-3)	One year (201 Ky. Admin. Regs. 20:085)	N/A	Two years (49 Pa. Code 21.331)	One year (W. Va. Code Ann. 30-7-8)
Renewal fee	\$135 (R.C. 4723.08)	\$10 (848 Ind. Admin. Code 5-3-1)	\$55 (201 Ky. Admin. Regs. 20:240)	\$40.20 (Michigan Licensing and Regulatory Affairs Bureau of Professional Licensing, Nursing Licensing Guide)	\$81 (49 Pa. Code 21.253)	\$65 (W. Va. Code R. 19-12-2)

Volunteer's certificate

Survey responses (NUR)

Description
<p>The volunteer's certificate was established for retired nurses to provide nursing services to indigent and uninsured persons. A volunteer's certificate is issued for a person with a lapsed (retired) RN, LPN, or APRN license to provide nursing services to indigent and uninsured persons, as defined in Section 2305.234, ORC, without remuneration for providing nursing services.</p>

Type (See R.C. 4798.01 for relevant definitions.)

Choose an item.

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually	0
Number renewed annually	0
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	N/A
Education or training requirements	Evidence of the applicant's completion of RN, PN, or APRN nursing education.
Experience requirements	10 years of nursing practice and evidence of the most recent license to practice nursing as a RN, LPN, or APRN.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)	No examination is required for a volunteer's certificate.

If the regulation is a registration, certification, or license requirement, please complete the following:	
Continuing education requirements <i>(Including a description of the curriculum and the process of setting it.)</i>	24 hours of CE completed in the 24-month period immediately before the application date.
Initial fee	No fee.
Duration	Renewable every 2 years.
Renewal fee <i>(If different from initial fee, please explain why.)</i>	No fee.
Does the Board recognize uniform licensure requirements or allow for reciprocity?	No.
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	No.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	No.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past

If the regulation is a registration, certification, or license requirement, please complete the following:

	discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.
Other information (<i>Significant attributes or prerequisites to licensure not addressed in this chart.</i>)	Click or tap here to enter text.

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

No revenue is generated from Volunteer Certificates. Board revenue is generated from other license and certification fees, including renewal. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

Federal laws do not regulate the practice or require the regulation of volunteers in Ohio.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe nursing care/practice can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective for public protection.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states *(How many other states regulate the occupation? How do Ohio’s regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)*

Other states may issue Volunteer Certificates, but their regulations may be different in scope. Ohio’s legislation was established to provide services to indigent populations.

Surrounding state comparison (LSC)

Volunteer’s Certificate						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes, a volunteer’s certificate authorizes its holder, a retired LPN, RN, or APRN, to provide nursing services without	No	No	Yes, but the license is available to any retired health professional who seeks to practice in underserved	Yes, a license authorizes a retired LPN, RN, or APRN to practice only in a community-based clinic without	Yes, but only for retired RNs and APRNs (<i>W. Va. Code Ann. 30-7-6a and 30-7-6b</i>)

Volunteer's Certificate

	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
	remuneration to the indigent and uninsured (<i>R.C. 4723.26</i>)			areas (<i>Mich. Comp. Laws 333.16184</i>)	remuneration (<i>35 Pa. Cons. Stat. Ann. 449.41 to 449.53; 49 Pa. Code 21.601 to 21.607</i>)	
Education or training	Yes (<i>R.C. 4723.26</i>)	N/A	N/A	No	No	No
Experience	No	N/A	N/A	No	No	No
Exam	No	N/A	N/A	No	No	No
Continuing education	Yes, 24 hours every two years (<i>R.C. 4723.26</i>)	N/A	N/A	May be required as part of the license application	No	May be required by the Board of Examiners for Registered Professional Nurses
Initial licensure fee	None (<i>O.A.C. 4723-7-10</i>)	N/A	N/A	None	None	None
License duration	Two years (<i>R.C. 4723.26</i>)	N/A	N/A	Not specified	Two years	Not specified
Renewal fee	None (<i>O.A.C. 4723-7-10</i>)	N/A	N/A	None	None	None

Dialysis technician certificate

Survey responses (NUR)

Description

Dialysis technicians provide dialysis care such as performing and monitoring dialysis procedures which include initiating or discontinuing dialysis, drawing blood, administering limited medications, and responding to complications that arise in conjunction with dialysis.

Type *(See R.C. 4798.01 for relevant definitions.)*

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually

172 issued in FY20.

Number renewed annually

1,854 active certificates as of June 30, 2020.

If the regulation is a registration, certification, or license requirement, please complete the following:	
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	1,854 active certificates as of June 30, 2020 as compared to 1,390 as of June 30, 2015.
Education or training requirements	Completion of a dialysis technician training program approved by the Board.
Experience requirements	Experience is provided as part of the dialysis technician training program and the applicant must have not less than 6 months experience prior to the date of the application for certification.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)	Applicants must pass a standardized national dialysis (nephrology) certification examination administered by an approved testing organization approved by the Board. The exam fee is approximately \$220.00, and the Board does not receive any part of the fee.
Continuing education requirements (<i>Including a description of the curriculum and the process of setting it.</i>)	Complete at least 15 contact hours of CE. At least 10 of the 15 contact hours must be directly related to dialysis care, and one of the 15 contact hours must be Category A (Ohio law and rules).
Initial fee	\$35.00
Duration	Renewable every 2 years.
Renewal fee (<i>If different from initial fee, please explain why.</i>)	\$35.00

If the regulation is a registration, certification, or license requirement, please complete the following:	
Does the Board recognize uniform licensure requirements or allow for reciprocity?	Dialysis Technicians may be licensed by reciprocity by recognizing national certification from an approved national certifying organization and documentation of recent dialysis care experience in another jurisdiction.
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	Not all states regulate dialysis technicians. Federal Centers of Medicaid and Medicare (CMS) regulations govern dialysis facilities and dialysis technicians.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	Not all states regulate dialysis technicians so in many states, dialysis technicians are not certified by the state. However, dialysis technicians must meet federal CMS regulations that govern qualifications and training requirements for dialysis technicians and dialysis facilities.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception of statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.
Other information (<i>Significant attributes or prerequisites to licensure not addressed in this chart.</i>)	N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law. conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated from certification fees, including renewal. For initial certification, the application fee is \$35.00 and for renewal, \$35.00. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

Federal CMS laws, administered by the Ohio Department of Health, regulate dialysis facilities across the country. Federal law does not require the state to regulate dialysis technicians.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe dialysis care/practice can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

While the CMS regulations apply to dialysis centers and dialysis technician training/experience, Ohio law requires the Board to investigate complaints regarding individual dialysis technicians for violations of the Nurse Practice Act and/or administrative rules, and therefore provides additional public protection.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states (How many other states regulate the occupation? How do Ohio's regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)

Not all states regulate dialysis technicians so in many states, dialysis technicians are not certified by the state. However, dialysis technicians must meet federal CMS regulations that govern qualifications and training requirements for dialysis technicians and dialysis facilities.

Surrounding state comparison (LSC)

Dialysis Technicians ²						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes – dialysis technician certificate (<i>R.C. 4723.73</i>)	No	Yes – dialysis technician credential (<i>201 Ky. Admin. Regs. 20:470</i>)	No	No	Yes – dialysis technician certificate (<i>W. Va. Code Ann. 30-7C-3</i>)
Education or training	Complete an approved training program (<i>R.C. 4723.75</i>)	N/A	Complete a training program (<i>201 Ky. Admin. Regs. 20:470</i>)	N/A	N/A	Complete an approved training program (<i>W. Va. Code Ann. 30-7C-3</i>)

² Current federal Centers for Medicare and Medicaid Services regulations require dialysis technicians to have completed an approved training program and meet all applicable state requirements for education, training, certification, or licensure in order for dialysis services and treatment provided to individuals with end stage renal disease in approved facilities to be covered under Medicare. See 42 Code of Federal Regulations 494.140(e).

Dialysis Technicians ²						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
Experience	Six months of experience (<i>R.C. 4723.75</i>)	N/A	No	N/A	N/A	No
Exam	Yes (<i>R.C. 4723.75</i>)	N/A	No, unless an applicant attended an out-of-state training program (<i>201 Ky. Admin. Regs. 20:470</i>)	N/A	N/A	No, but applicant must have achieved national certification, which requires passing an examination (<i>W. Va. Code Ann. 30-7C-3</i>)
Continuing education	15 hours every two years (<i>O.A.C. 4723-23-06</i>)	N/A	No	N/A	N/A	No
Initial licensure fee	\$35 (<i>O.A.C. 4723-23-03</i>)	N/A	\$70 (<i>201 Ky. Admin. Regs. 20:470</i>)	N/A	N/A	\$200 (<i>W. Va. Code R. 19-13-12</i>)
License duration	Two years (<i>R.C. 4723.77</i>)	N/A	Two years (<i>201 Ky. Admin. Regs. 20:470</i>)	N/A	N/A	One year (<i>W. Va. Code R. 19-13-15</i>)
Renewal fee	\$35 (<i>O.A.C. 4723-23-05</i>)	N/A	\$70 (<i>201 Ky. Admin. Regs. 20:470</i>)	N/A	N/A	\$100 (<i>W. Va. Code R. 19-13-12</i>)

Dialysis technician intern certificate

Survey responses (NUR)

Description	
Dialysis technician intern certificates are issued to an individual who has not passed the dialysis technician certification examination, but meets certain requirements authorizing the technician to provide dialysis care under supervision prior to taking a national certification examination and applying for a dialysis technician certificate.	
Type <i>(See R.C. 4798.01 for relevant definitions.)</i>	
License	
If the regulation is a registration, certification, or license requirement, please complete the following:	
Number issued annually	312 issued in FY20.
Number renewed annually	454 active certificates as of June 30, 2020.

If the regulation is a registration, certification, or license requirement, please complete the following:	
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	454 active certificates as of June 30, 2020 as compared to 333 as of June 30, 2015.
Education or training requirements	Completion of an approved dialysis technician training program, and a written attestation by the applicant's employer that the applicant is competent to perform dialysis care.
Experience requirements	Completion of the clinical experience is part of the dialysis technician training program.
Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)	None.
Continuing education requirements (<i>Including a description of the curriculum and the process of setting it.</i>)	N/A
Initial fee	\$35.00
Duration	18-months from the date the applicant successfully completed a dialysis training program.
Renewal fee (<i>If different from initial fee, please explain why.</i>)	N/A

If the regulation is a registration, certification, or license requirement, please complete the following:	
Does the Board recognize uniform licensure requirements or allow for reciprocity?	N/A
Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?	No.
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	No.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.
Other information (Significant attributes or prerequisites to licensure not addressed in this chart.)	N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated certification fees. For initial certification, the fee is \$35.00. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

Federal CMS laws, administered by the Ohio Department of Health, regulate dialysis facilities across the country. Federal law does not require the state to regulate dialysis technicians

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe dialysis care/practice can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

While the CMS regulations apply to dialysis centers and dialysis technician training/experience, Ohio law requires the Board to investigate complaints regarding individual dialysis technician interns for violations of the Nurse Practice Act and/or administrative rules and therefore provides additional public protection.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states *(How many other states regulate the occupation? How do Ohio's regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)*

Not all states regulate dialysis technician interns so in many states, dialysis technician interns are not certified by the state. However, dialysis technician interns must meet federal CMS regulations that govern qualifications and training requirements for dialysis technicians and dialysis facilities.

Surrounding state comparison (LSC)

See "dialysis technician certificate."

Medication aide certificate

Survey responses (NUR)

Description

Medication aides administer certain prescription medications at the delegation of a nurse to residents of nursing homes, residential care facilities, or ICF/IID facilities.

Type (See R.C. 4798.01 for relevant definitions.)

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually	69 issued for FY20.
Number renewed annually	346 active certificates as of June 30, 2020.
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	346 active certificates as of June 30, 2020 as compared to 184 as of June 30, 2015.
Education or training requirements	High school diploma or high school equivalence diploma; if working in a nursing home, must be a state-tested nurse aide; if working in a residential care facility, must have one year of direct care experience in a residential care facility or be a state-tested nurse aide; the applicant must complete a Board approved training program.
Experience requirements	See education or training requirements.

If the regulation is a registration, certification, or license requirement, please complete the following:

<p>Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)</p>	<p>A Board approved written and skills examination is provided by D&S Diversified Technologies, LLC, which charges \$30.00 for the written exam and \$80.00 for the skills exam. The Board does not receive any portion of these fees.</p>
<p>Continuing education requirements (<i>Including a description of the curriculum and the process of setting it.</i>)</p>	<p>Medication Aides must complete at least 15 contact hours of CE. A minimum of 10 of the 15 contact hours must be related to medications or medication administration consistent with the function of the Medication Aides; one of the 15 contact hours must be directly related to establishing and maintaining professional boundaries, and one of the 15 contact hours must be Category A (Ohio law and rules).</p>
<p>Initial fee</p>	<p>\$50.00.</p>
<p>Duration</p>	<p>Renewed every 2 years.</p>
<p>Renewal fee (<i>If different from initial fee, please explain why.</i>)</p>	<p>\$50.00.</p>
<p>Does the Board recognize uniform licensure requirements or allow for reciprocity?</p>	<p>No.</p>
<p>Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?</p>	<p>No.</p>

If the regulation is a registration, certification, or license requirement, please complete the following:

<p>Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?</p>	<p>No.</p>
<p>Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?</p>	<p>After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant’s criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.</p>
<p>Other information (<i>Significant attributes or prerequisites to licensure not addressed in this chart.</i>)</p>	<p>N/A</p>

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated from certification fees, including renewal. The certification fee and the renewal fee are \$50.00. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

There are no federal regulations that apply to or regulate the occupation.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe practice and errors in medication administration can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective at preventing harm and is needed to assure safety in the administration of medications by Medication Aides.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states *(How many other states regulate the occupation? How do Ohio's regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)*

Not all states regulate the occupation.

Surrounding state comparison (LSC)

Medication Aides						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	Yes, a certificate is required to be eligible to administer medication in a nursing home, assisted living facility, or intermediate care facility for individuals with intellectual disabilities (<i>R.C. 4723.64</i>)	Yes – qualified medication aide registration (<i>Ind. Code. Ann. 16-28-1-11; Indiana Department of Health, Qualified Medication Aide (QMA) Registration</i>)	No	No	No	No, but West Virginia, in a bill effective May of 2020, recognizes approved medication assistive personnel and repealed a pilot program that provided for the certification of medication aides (<i>West Virginia S.B. 560</i>)
Education or training	Course of instruction from an approved training program (<i>R.C. 4723.651</i>)	100-hour qualified medication aide training program	N/A	N/A	N/A	Yes, unspecified
Experience	No	Yes	N/A	N/A	N/A	Yes
Exam	No	Yes	N/A	N/A	N/A	Yes

Medication Aides						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
Continuing education	15 hours every two years (<i>O.A.C. 4723-27-06</i>)	Six hours of in-service training every year	N/A	N/A	N/A	No, but medication assistive personnel must undergo retraining every two years
Initial licensure fee	\$50 (<i>O.A.C. 4723-27-10</i>)	None	N/A	N/A	N/A	Yes, unspecified
License duration	Two years (<i>R.C. 4723.651</i>)	Two years	N/A	N/A	N/A	N/A
Renewal fee	\$50 (<i>O.A.C. 4723-27-10</i>)	None	N/A	N/A	N/A	Yes, unspecified

Community health worker certificate

Survey responses (NUR)

Description
Community Health Workers advocate for clients in the community by assisting them in accessing community health and supportive resources through the provision of such services as education, role modeling, outreach, home visits, or referrals. Community Health Workers perform certain nursing tasks under nurse supervision and delegation.

Type (See R.C. 4798.01 for relevant definitions.)

License

If the regulation is a registration, certification, or license requirement, please complete the following:

Number issued annually	162 issued in FY20
Number renewed annually	772 active certificates as of June 30, 2020.
Have there been significant increases or decreases in active registrations, certifications or licenses in the preceding six years?	772 active certificates as of June 30, 2020 as compared to 190 active certificates as of June 30, 2015.
Education or training requirements	A high school diploma or equivalent is required; completion of a Board approved community health worker training program and an affidavit from the program that the applicant is competent to provide care as a community health worker.
Experience requirements	Experience is included in the community health worker training program.

If the regulation is a registration, certification, or license requirement, please complete the following:

<p>Examination requirements (<i>Who administers the exam? How is the exam and administrator selected? What fees are charged? Does the Board receive any proceeds of those fees? If so, how are the proceeds used?</i>)</p>	<p>No examination.</p>
<p>Continuing education requirements (<i>Including a description of the curriculum and the process of setting it.</i>)</p>	<p>At least 15 hours of CE is required to renew a certificate. A minimum of one of the 15 contact hours must be directly related to establishing and maintaining professional boundaries, and one of the 15 contact hours must be Category A (Ohio law and rules).</p>
<p>Initial fee</p>	<p>\$35.00.</p>
<p>Duration</p>	<p>Renewed every 2 years.</p>
<p>Renewal fee (<i>If different from initial fee, please explain why.</i>)</p>	<p>\$35.00.</p>
<p>Does the Board recognize uniform licensure requirements or allow for reciprocity?</p>	<p>No.</p>
<p>Are there any similar national registrations, certifications, or licenses? Could they be used as a substitute for the state regulation?</p>	<p>No.</p>

If the regulation is a registration, certification, or license requirement, please complete the following:	
Are there any circumstances in which an individual may practice elements of the occupation without being regulated by the board?	Ohio law allows for community health workers to work as a community health worker in Ohio without being certified by the Board.
Is the Board permitted to exercise discretion in determining whether to register, certify, or license an individual?	After meeting the licensure requirements, unless there is a statutory basis to deny licensure, the Board does not exercise discretion. If a statutory basis exists to deny licensure, the Board is required to conduct an investigation, and, with the exception statutorily barred crimes (see Section 4723.092, ORC) or sex-offender registration status, the Board has discretion to grant licensure under terms and conditions that address the applicant's criminal history, past discipline on other licenses, substance use disorder, or other violations of the Nurse Practice Act as specified in Section 4723.28, ORC.
Other information (Significant attributes or prerequisites to licensure not addressed in this chart.)	N/A

Oversight and disciplinary authority of the Board respecting individuals engaged in the occupation.

Chapter 4723., ORC, authorizes the disciplinary authority of the Board. The Board efficiently handles complaints, investigations, and adjudications to safeguard the health of the public and, in cases involving substance use disorder or practice issues, provides alternatives to discipline programs, if determined appropriate. The Compliance Unit conducts investigations; processes disciplinary cases; holds administrative hearings; prepares Notices of Opportunity for Hearings (Notices) including statutory Notices for immediate, automatic, or summary suspensions and no hearing requested evidence materials for Board action; negotiates settlement conferences; monitors post-discipline cases; and reports all disciplinary actions to the national practitioner databank as required by federal law.

How much revenue is derived from fees charged by the Board to individuals engaged in the occupation (such as license and renewal fees)? How is that revenue used?

Board revenue is generated from certification fees, including renewal. The certification fee and the renewal fee are \$35.00. All revenue is deposited into the State 4K90 Fund. A portion is appropriated to the Board each biennium, and the surplus in funds remains in the 4K90 Fund. In FY19, the LSC Report on Occupational Licensing and Regulatory Boards, specified that the Board contributed \$7.2 million surplus to the fund.

Describe any federal regulations that apply to the occupation. Does federal law require the state to regulate the occupation?

No federal regulations apply to or require the state to regulate the occupation.

What is the “harm” that the regulation seeks to prevent? (See, R.C. 4798.02(B).)

Unsafe practice can result in serious bodily harm or death. Other issues such as substance use abuse, prescription drug theft, sub-standard practice, patient abuse and neglect, and other violations of the Nurse Practice Act and administrative rules can cause significant, and substantiated harms that threaten public health, safety, or welfare of Ohioans.

Is the regulation effective at preventing the harm described above? Are there other, less restrictive ways to prevent the harm?

The regulation is effective at preventing harm, however if Community Health Workers choose not to be certified, there is no regulation that applies to their work.

Are there any changes the Board would like to see implemented?

N/A

Comparison to other states *(How many other states regulate the occupation? How do Ohio's regulations compare to those others states? Is Ohio more restrictive? Less restrictive? Or somewhere in between?)*

It is unknown if other states regulate community health workers.

Surrounding state comparison (LSC)

Community Health Workers						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
License required?	No, Ohio law does not require a license or certification to practice as a community health worker, but it does authorize the Board to certify community health workers (<i>R.C. 4723.81</i>)	No	No	No	No	No
Education or training	Yes, an applicant must complete a Board-approved community health worker training program (<i>R.C. 4723.84</i>)	N/A	N/A	N/A	N/A	N/A
Experience	No	N/A	N/A	N/A	N/A	N/A
Exam	No	N/A	N/A	N/A	N/A	N/A
Continuing education	15 hours every two years (<i>O.A.C. 4723-26-05</i>)	N/A	N/A	N/A	N/A	N/A

Community Health Workers						
	Ohio	Indiana	Kentucky	Michigan	Pennsylvania	West Virginia
Initial licensure fee	\$35 (<i>O.A.C. 4723-26-02</i>)	N/A	N/A	N/A	N/A	N/A
License duration	Two years (<i>R.C. 4723.85</i>)	N/A	N/A	N/A	N/A	N/A
Renewal fee	\$35 (<i>O.A.C. 4723-26-04</i>)	N/A	N/A	N/A	N/A	N/A