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Substitute Bill Comparative Synopsis

Sub. H.B. 102

135th General Assembly

House Health Provider Services

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This table summarizes how the latest substitute version of the bill differs from the immediately preceding version. It addresses only the topics on which the two versions differ substantively. It does not list topics on which the two bills are substantively the same.

Previous Version (As Introduced)	Latest Version (I_135_0571-3)
Locations where advanced practice respiratory therapists (APRTs) may practice	
<p>For purposes of the APRT law, including for purposes of a provision that authorizes an APRT to practice in any health care facility within which the supervising physician has supervision, control, and direction of the APRT, defines “health care facility” as (1) a hospital, (2) a site where a medical practice is operated and provides direct patient care, (3) an entity owned or controlled, in whole or in part, by a hospital or by an entity that owns or controls, in whole or in part, one or more hospitals, and (4) any other facility designated by the Medical Board in rules (<i>R.C. 4761.01(K) and 4761.39(A)</i>); see also <i>R.C. 4761.37(B)(1)</i>).</p>	<p>For those same purposes, defines “health care facility” as only (1) hospitals and (2) any other hospital-based facilities designated by the Medical Board in rules (i.e., APRTs can practice only in hospitals and hospital-based facilities) (<i>R.C. 4761.01(K) and 4761.39(A)</i>); see also <i>R.C. 4761.37(B)(1)</i>).</p>
Supervising physician physical location	
<p>As an alternative to a supervising physician being physically present at the location where an APRT is practicing, authorizes the supervising physician to be readily available to the APRT through some means of telecommunication and be in a location that is a distance from the location where the APRT is practicing that reasonably allows the</p>	<p>No provision (i.e., the supervising physician must be physically present at the location where the APRT is practicing) (<i>R.C. 4761.39(A)(1)</i>).</p>

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physician to assure proper care of patients (<i>R.C. 4761.39(A)(1)(b)</i>).	
Exercising physician-delegated prescriptive authority	
<p>No provision.</p> <p>Permits an APRT to prescribe a controlled substance under the APRT's physician-delegated prescriptive authority, but only if the drug is to be used by a patient within the health care facility where the APRT is practicing (<i>R.C. 3719.06(A)(4)</i>). (Prescribing controlled substances for a patient's use outside of a health care facility is prohibited.) (<i>R.C. 4761.44(B)(1)(a)</i>.)</p>	<p>During the first 500 hours of an APRT exercising physician-delegated prescriptive authority, requires the APRT's supervising physician to provide on-site supervision of the APRT; requires the supervising physician to maintain records of an APRT's completion of those hours (<i>R.C. 4761.44(A)</i>).</p> <p>Prohibits an APRT from prescribing controlled substances (<i>R.C. 4761.33(H) and 4761.44(D)(1)</i>; <i>numerous sections removed as conforming changes</i>).</p>