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S.B. 196\*  
135<sup>th</sup> General Assembly

## Bill Analysis

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**Version:** As Reported by Senate Health

**Primary Sponsor:** Sen. Roegner

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### SUMMARY

- Makes changes to various provisions of the Revised Code, often, to include references to certain advanced practice registered nurses.

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\* This analysis was prepared before the report of the Senate Health Committee appeared in the Senate Journal. Note that the legislative history may be incomplete.

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## DETAILED ANALYSIS

S.B. 196, a bill regarding the authority of advanced practice registered nurses (APRNs), in particular, certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners, revises various provisions of the Revised Code, often, to include references to such APRNs. The bill addresses many topics, with changes to each topic described briefly below. Note that many of the bill's changes fall under more than one topic.

Before highlighting by topic area the revisions made by the bill, this analysis focuses first on two of the bill's main changes to the law governing APRNs.

### **Standard care arrangements and physician collaboration**

Current law unchanged by the bill requires an APRN who is a certified nurse practitioner, clinical nurse specialist, or certified nurse-midwife to practice in collaboration with a physician or podiatrist, meaning that the physician or podiatrist is continuously available to communicate with the nurse either in person or by electronic communication. The APRN also must enter into a standard care arrangement with one or more collaborating physicians or podiatrists and practice in accordance with it. A standard care arrangement is a written, formal guide for planning and evaluating a patient's health care that is developed by one or more collaborating physicians or podiatrists and the APRN.<sup>1</sup>

The bill states that it does not prohibit a standard care arrangement from also specifying actions that a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner is authorized to take, or is prohibited from taking, as part of the nurse's practice in collaboration with a physician or podiatrist. In specifying such actions, the standard care arrangement must not authorize the nurse to take any action that is otherwise prohibited by statutory law or through rules adopted by the Ohio Board of Nursing.<sup>2</sup>

### **Scope of practice – certified nurse-midwives**

Several of the bill's provisions authorize an APRN to sign certain documents and take related actions. Under some of those provisions, however, an APRN who is a certified nurse-midwife is permitted to sign and take the related action only if the nurse-midwife's scope of practice, as determined in accordance with statutory law outlining that scope of practice and standards established by the Ohio Board of Nursing, allows the nurse-midwife to practice in the manner described in those provisions.<sup>3</sup> The provisions at issue relate to the following subjects:

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<sup>1</sup> R.C. 4723.01 and 4723.43, not in the bill, and 4723.431.

<sup>2</sup> R.C. 4723.431.

<sup>3</sup> R.C. 4723.438. See also R.C. 4723.43(A), not in the bill.

- Determining and documenting medical conditions for purposes of Home First components of the PASSPORT Program and Assisted Living Program, each administered by the Ohio Department of Aging;<sup>4</sup>
- Receiving diphtheria antitoxin without charge for use in treating indigent persons;<sup>5</sup>
- Providing instructions necessary for the preparation of special diets for residents of nursing homes and residential care facilities;<sup>6</sup>
- Determining whether a residential care facility resident is capable of self-administering medication;<sup>7</sup>
- Determining whether vaccination against influenza or pneumococcal pneumonia is medically inappropriate for a hospital patient or nursing home or residential care facility resident;<sup>8</sup>
- Examining lead abatement workers and reporting lead poisoning;<sup>9</sup>
- Approving care provided in a setting other than a hospital for purposes of the law governing kidney dialysis benefits provided by sickness and accident insurers;<sup>10</sup>
- Providing statements regarding the medical conditions of applicants for commercial driver's licenses, driver's licenses, hearing-impaired identification cards, identification cards, and probationary driver's licenses.<sup>11</sup>

## Nursing practice

- For purposes of the law governing anatomical gifts, prohibits a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner who attends the decedent at death or determines the time of death from participating in removal and transplant procedures (mirrors physicians under current law) (*R.C. 2108.16*).
- Removes the current law conditions on a certified nurse practitioner or clinical nurse specialist determining and pronouncing death, including that the nurse may do so only for deaths occurring in a nursing home, residential care facility, or hospice or palliative care program. Also, authorizes a certified nurse-midwife to determine and pronounce death, regardless of the decedent's location (*R.C. 4723.36*).

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<sup>4</sup> R.C. 173.521 and 173.542.

<sup>5</sup> R.C. 3701.162.

<sup>6</sup> R.C. 3721.01.

<sup>7</sup> R.C. 3721.011.

<sup>8</sup> R.C. 3721.041 and 3727.19.

<sup>9</sup> R.C. 3742.03, 3742.04, and 3742.07.

<sup>10</sup> R.C. 3923.25.

<sup>11</sup> R.C. 4506.07, 4507.06, 4507.08, 4507.081, and 4507.141.

- Requires a certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to provide certain information to a woman experiencing a fetal death who presents herself to the nurse outside of a hospital setting (*R.C. 4723.437*). (Mirrors a provision that applies to physicians under current law (*R.C. 4731.82, not in the bill*).)
- Allows a certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to authorize one or more pharmacists to dispense nicotine replacement therapy under a protocol established by the nurse (*R.C. 4723.4812(A) and 4729.284*). (Mirrors physicians' current law (*R.C. 4731.90, not in the bill*).)
- Allows a certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to authorize a pharmacist or pharmacy intern to dispense epinephrine under a protocol developed by the nurse (*R.C. 4723.4812(D) and 4729.47*). (Mirrors physicians' current law (*R.C. 4731.961, not in the bill*).)

## Education

- With respect to the law granting a child with a medical condition that may require emergency medical attention the right to attend school in the district in which either of the child's parents is employed, specifies that – for purposes of the requirement that the child's parent submit certification of the child's medical condition – the certification may be from a physician (current law) or a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 3313.64*).
- With respect to the law authorizing a student to possess and use an asthma inhaler in school if the student's physician approves, also allows for the student's clinical nurse specialist or certified nurse practitioner to approve inhaler possession and use (*R.C. 3313.716*).
- Includes a specific reference to a clinical nurse specialist or certified nurse practitioner in the law authorizing a school district to enter into a contract with a health district for the purpose of providing the services of a school physician, dentist, or nurse (*R.C. 3313.72*).
- Permits clinical nurse specialists and certified nurse practitioners to certify a child's physical or mental condition under the law governing excuses for attendance, in the same manner that current law permits physicians and certain mental health professionals to provide the certification (*R.C. 3321.04*).

## Elections

- For purposes of the law governing voter disability, including the inability to sign election documents, provides for attestations from not only physicians (current law), but also clinical nurse specialists and certified nurse practitioners (*R.C. 3501.382*).

## Health care facilities

- Adds specific references to APRNs in the law authorizing patient access to medical records (*R.C. 3701.74*).

- When special diets are provided in nursing homes and residential care facilities as a type of personal care service, permits certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners, in addition to the currently authorized physicians and dietitians, to provide the instructions necessary for preparing the diets (*R.C. 3721.01*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing the circumstances when medication administration and skilled nursing care may be provided in residential care facilities, including provisions relating to a physician's (current law) or nurse's written determination that an individual is capable of self-administering medications (*R.C. 3721.011*).
- With respect to the law requiring a nursing home, residential care facility, and hospital to offer each resident and patient vaccination against influenza and pneumococcal pneumonia unless the resident's or patient's physician determines it medically inappropriate, also allows for a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner to make that determination (*R.C. 3721.041 and 3727.19*).
- Adds specific references to APRNs to the definitions for the law governing (1) mandatory reporters of abuse, neglect, exploitation, or misappropriation occurring in long-term care facilities and (2) certification of nurse aides (*R.C. 3721.21; see also R.C. 3721.22(A)(1), not in the bill*).
- Includes references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the law governing hospital trauma care protocols. Also, when hospitals develop trauma care protocols, requires them to consider guidelines established by the American Academy of Emergency Nurse Practitioners, in addition to those established by other entities that are currently specified (*R.C. 3727.09*).

## Health care professionals

- Authorizes a pharmacist to administer certain vaccines under a protocol established by a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (mirrors existing law for physicians) (*R.C. 4729.41*).
- Authorizes a pharmacist to administer a specified drug by injection as long as the drug has been prescribed by a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner and the patient has an ongoing nurse-patient relationship with the nurse (*R.C. 4723.4812(C) and 4729.45*). (Mirrors existing law for physicians, except for the adoption of rules (*see also R.C. 4731.057, not in the bill*.)

## Human services

- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners as permitted recipients of referrals from a rape crisis program for purposes of the law governing the Rape Crisis Program Trust Fund, which is administered by the Ohio Attorney General (mirrors physicians) (*R.C. 109.921*).
- Adds clinical nurse specialists and certified nurse practitioners to the law governing eligibility for the Ohio Department of Aging's Home First component of the PASSPORT

Program, in particular, in determining and documenting certain aspects of an individual's medical condition (mirrors physicians) (*R.C. 173.521*).

- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing eligibility for the Ohio Department of Aging's Home First component of the Assisted Living Program, in particular, in determining and documenting certain aspects of an individual's medical condition (mirrors physicians) (*R.C. 173.542*).

## Insurance

- Includes APRNs as permitted members of the pharmacy and therapeutics committees that consult with health insuring corporations when developing prescription drug formularies, thereby potentially reducing the number of physician members who must be included under current law (*R.C. 1753.21*).
- For purposes of the law governing wellness or health improvement programs offered by health insurers, when an insured is required to provide verification of a medical condition, specifies that the verification may include a statement from the insured's certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner, in addition to the insured's physician as under current law (*R.C. 3901.56*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing viatical settlements, in a manner that corresponds to provisions that apply to physicians, thereby recognizing such nurses as health professionals who can (1) provide written statements demonstrating that a person has the mental capacity necessary to enter into a viatical settlement contract, (2) certify that a person has a terminal illness, and (3) determine that a person cannot maintain full-time employment due to physical or mental disability (*R.C. 3916.01, 3916.07, and 3916.16*).
- With respect to the law governing kidney dialysis benefits provided by sickness and accident insurers and the law's provision specifying that the benefits apply equally to dialysis that is performed on an outpatient basis, for purposes of the definition of "outpatient basis," refers to the approval of care outside of a hospital by a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioners, in addition to a physician's approval as under current law (*R.C. 3923.25*).
- Requires autism spectrum disorder benefits, which under current law sickness and accident insurers and health insuring corporations must provide, to include services rendered by clinical nurse specialists and certified nurse practitioners. Also, permits the required prescription or order for services to be issued by a clinical nurse specialist or certified nurse practitioner specializing in pediatric health (*R.C. 1751.84 and 3923.84*).
- Adds references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing medical liability insurance, in particular provisions recognizing that such nurses may apply for this type of insurance. Also, makes such nurses eligible to serve as one of the required members of a board of governors for

a medical liability underwriting association. (*R.C. 3929.62, 3929.63, 3929.64, and 3929.67.*)

## **Labor and employment; workers' compensation**

- Expressly includes references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the law governing employee access to medical reports pertaining to employees that are maintained by employers (*R.C. 4113.23*).
- Generally authorizes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to act in the same capacity as physicians for purposes of the Workers' Compensation Law; for example, (1) completing medical reports to support payment or nonpayment of disability compensation (each report must be reviewed, approved, and signed by a physician), (2) performing claimant medical examinations when requested by employers, (3) making statements for Bureau of Workers' Compensation (BWC) investigations concerning injury or occupational disease, (4) giving depositions for use in appeal proceedings, (5) being recognized as authorized prescribers of drugs, (6) ordering chemical tests to determine whether an employee is under the influence, (7) determining that an employee is in need of an artificial appliance following loss of a limb or other body part, (8), diagnosing and reporting suspected occupational diseases to BWC, and (9) serving as a BWC staff member for whom the Administrator of Workers' Compensation establishes the member's pay (removing the staff member from the state job classification plan and statutory salary schedules) (*R.C. 4121.121, 4121.31, 4121.32, 4121.36, 4121.38, 4121.45, 4123.19, 4123.511, 4123.512, 4123.54, 4123.56, 4123.57, 4123.651, 4123.71, 4123.84, and 4123.85*).

## **Legal**

- Authorizes a court to appoint clinical nurse specialists and certified nurse practitioners, in addition to physicians and other qualified persons under current law, to examine an alleged incompetent in order to assist the court in deciding whether a guardianship is necessary (*R.C. 2111.031*).
- With respect to the guardianship reports that must be submitted biennially, recognizes evaluations and examinations of the ward that are conducted by clinical nurse specialists and certified nurse practitioners (*R.C. 2111.49*).
- Adds references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law requiring the Ohio Department of Health (ODH) to adopt a standardized method of procedure for withholding CPR (a do-not-resuscitate order). Also includes the Ohio Association of Advanced Practice Nurses in a related ODH advisory committee (*R.C. 2133.25*).
- Authorizes a psychiatric APRN to take any action that a designated physician or psychiatrist may take for purposes of the law governing the creation of declarations for mental health treatment and the actions that may be taken when a person no longer

has the capacity to consent to his or her own treatment (*R.C. 2135.01 and 2135.15; see also 2135.04, not in the bill*).

- Under the law authorizing a juvenile court to order emergency medical care for a child, permits the court to proceed when a certificate has been provided by one or more certified nurse-midwives, certified nurse practitioners, or clinical nurse specialists, in addition to the current authority to proceed on the certificate of one or more physicians (*R.C. 2151.33*).
- With respect to newborn safety incubators that may be used under the law governing desertion of a child, includes an APRN with hospital practice privileges as one of the persons who may supervise the incubators or authorize other hospital employees under the APRN's direction to supervise the incubators (*R.C. 2151.3515; see also 2151.3532, not in the bill*).
- For purposes of the law governing mandatory reports of child abuse and neglect, recognizes the APRN-patient privilege (*R.C. 2151.421*).
- Under the law granting immunity from civil liability to physicians who provide prescriptions for automated external defibrillators, recognizes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners as prescribers of the devices and extends the immunity provisions to the prescribing nurses (*R.C. 2305.235*).
- For purposes of the law regarding identity and paternity determinations as part of legal proceedings, specifically includes clinical nurse specialists and certified nurse practitioners as persons qualified to perform court-ordered blood testing (*R.C. 2317.47*).
- With respect to the law authorizing a probate court judge to grant a marriage license even when a party is unable to appear in court by reason of illness or disability, provides that the required affidavit may be from a clinical nurse specialist or certified nurse practitioner, just like a physician under current law (*R.C. 3101.05*).
- For purposes of the law governing divorce-related conciliation procedures ordered by a court, adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the list of professionals who may be named as conciliators (*R.C. 3105.091*).
- In the case of paternity actions, specifies that the testimony of a certified nurse-midwife, like a physician under current law, is not privileged when it concerns the medical circumstances of a pregnancy or the condition and characteristic of a child at birth (*R.C. 3111.12*).
- For purposes of the law governing court authority to calculate child support, in particular, when determining if a parent is unable to work based on a medical condition, specifies that the documentation necessary for this determination may include the diagnosis of a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner in addition to a physician as under current law (*R.C. 3119.05*).



- Under the law that requires a party to a child support order to notify the child's medical service provider of the child's health insurance coverage, expressly refers to a medical provider who is the child's clinical nurse specialist or certified nurse practitioner, just as current law expressly refers to the child's physician or hospital (*R.C. 3119.54*).
- With respect to the law granting specified types of health care professionals immunity from liability when accepting or dispensing drugs that are donated under the State Board of Pharmacy's Drug Repository Program, expressly includes references to APRNs, in addition to the current reference to registered nurses (*R.C. 3715.872*).

## Motor vehicles

- For purposes of the law governing applications for commercial driver's licenses, driver's licenses, hearing-impaired identification cards, identification cards, and probationary driver's licenses, adds references to certified nurse-midwives, clinical nurse specialists, or certified nurse practitioners, in particular, to provisions governing statements from physicians regarding applicant medical conditions (*R.C. 4506.07, 4507.06, 4507.08, 4507.081, 4507.141, and 4507.30*).
- With respect to the law exempting a child with a physical impairment from complying with the requirement to wear a seat belt, specifies that an affidavit of physical impairment may be signed by a clinical nurse specialist or certified nurse practitioner, just like a physician or chiropractor under current law (*R.C. 4511.81*).

## Public health

- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law authorizing ODH to (1) maintain registries of health care practitioners and facilities for purposes of referrals for tuberculosis care and (2) appoint individuals as tuberculosis care consultants (*R.C. 3701.146*).
- With respect to the law governing the administration of federal funds to monitor, study, and prevent pregnancy loss, includes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the provisions authorizing the ODH Director to adopt rules specifying reporting requirements, which currently apply only to physicians (*R.C. 3701.031*).
- For purposes of the law governing ODH's administration of women's health services grants, includes specific references to APRNs in provisions that currently refer to registered nurses and other health care service providers (*R.C. 3701.046*).
- Revises the eligibility criteria for participation in the Ohio Breast and Cervical Cancer Project, by specifying that a woman is eligible if she has been determined to need cancer screening by a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner, just like a physician under current law (*R.C. 3701.144*).
- Authorizes a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner to receive without charge diphtheria antitoxin needed for the treatment or

prevention of diphtheria in the indigent, just like a physician under current law (*R.C. 3701.162*).

- Authorizes the disclosure of HIV test results to a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner, just like a physician under current law (*R.C. 3701.243*).
- Specifies that an individual's refusal to consent to HIV testing or to disclose test results does not prevent a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner from referring the individual who may have AIDS or an AIDS-related condition to another health care provider, as long as the individual's refusal is not the only grounds for making the referral (mirrors physicians and dentists under current law) (*R.C. 3701.245*).
- Requires a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner to report cancer cases to ODH as part of the Ohio Cancer Incidence Surveillance System, just like a physician or dentist under current law (*R.C. 3701.262*).
- When testing for certain sexually transmitted infections is required by law, directs ODH to conduct the testing without charge on the request of a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner submitting the specimen, just like a physician under current law (*R.C. 3701.47, 3701.48, and 3701.50*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law requiring hearing screenings for newborns, thereby authorizing these nurses to receive screening results and to direct or collaborate with persons conducting the screenings (mirrors physicians under current law) (*R.C. 3701.505*).
- Includes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the law requiring heart defect screenings for newborns, thereby authorizing these nurses to receive screening results (mirrors physicians under current law) (*R.C. 3701.5010*).
- Includes specific references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the law requiring health care professionals, including physicians and registered nurses, who attend to pregnant women to encourage participation in drug treatment if the professional has reason to believe the woman is using drugs (*R.C. 3701.59*).
- Adds specific references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in provisions relating to ODH's registry of health care providers for purposes of the law governing ODH's synthetic estrogen effects public information campaign (*R.C. 3701.76*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing ODH's statewide birth defects information system, including any requirements to report congenital anomalies or abnormal conditions (mirrors physicians under current law) (*R.C. 3705.30, 3705.33, and 3705.35*).

- Includes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the law governing local board of health authority to isolate and quarantine, in particular, requiring such nurses to use precautionary measures, just like physicians under current law, when attending individuals under isolation or quarantine (*R.C. 3707.08*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law that requires a certificate of recovery or death to be provided to local boards of health regarding cases of yellow fever, typhus, or diphtheria (mirrors physician duties) (*R.C. 3707.10*).
- Includes certified nurse-midwives (or their representatives) as members of local fetal-infant mortality review boards (*R.C. 3707.72*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the list of individuals eligible to serve as the health commissioner for a board of health in a general health district, but only if such a nurse specializes in public health (*R.C. 3709.11*).
- Expressly includes certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners in the list of specified practitioners (currently public health nurses and physicians) who may be appointed by a board of health in a general health district as board staff (*R.C. 3709.13*).
- With respect to the law authorizing a minor to give consent to a physician for treatment of a sexually transmitted infection, also authorizes the minor to give consent to a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 3709.241*).
- For purposes of the law which requires an asbestos hazard abatement contractor to ensure that each of its workers has been examined by a physician and found to be physically capable of working while wearing a respirator, also allows for examinations by clinical nurse specialists and certified nurse practitioners (*R.C. 3710.07*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing ODH's lead abatement regulation, including provisions relating to the examination of lead abatement workers and reporting requirements regarding lead poisoning (mirrors current law for physicians) (*R.C. 3742.03, 3742.04, and 3742.07*).
- Adds to the membership of ODH's child lead poisoning prevention advisory council a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner knowledgeable in lead poisoning prevention (*R.C. 3742.32*).

## **Rehabilitation and correction**

- For purposes of the law authorizing a state correctional institution to transfer an inmate to a psychiatric hospital, includes psychiatric-mental health APRNs in the list of professionals who may (a) determine that an inmate is mentally ill and requires hospital-level care or (b) attend to the inmate at the hospital (*R.C. 5120.17*).

- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing maintenance of and access to inmate medical records, in particular, by authorizing such nurses to request access to the records (*R.C. 5120.21*).
- Adds a clinical nurse specialist or certified nurse practitioner to the law requiring a penitentiary's physician to maintain health-related prisoner records (*R.C. 5145.22*).

## State and local government

- For purposes of the law governing civil servants and sick leave, permits an employee to obtain a required certificate stating the nature of illness that justifies the use of sick leave from not only a physician, as under current law, but also from a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 124.38*).
- For purposes of the law governing health insurance contracts entered into by the Ohio Department of Administrative Services on behalf of state employees, includes references to advanced practice registered nurses in the same manner that current law refers to physicians (*R.C. 124.82*).
- Replaces a reference to a physician's certificate, which must be filed with a board of county commissioners whenever a county officer is absent because of sickness or injury, with a reference to a certificate from a physician, certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 305.03*).
- Replaces a reference to a physician's certificate, which must be filed with a board of township trustees whenever a township officer is absent because of sickness or injury, with a reference to a certificate from a physician, certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 503.241*).
- Under the law that requires the coroner to be notified when there is a suspicious death or the death of any person with a developmental disability, requires a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner called in attendance for the death to notify the coroner (mirrors current law for physicians) (*R.C. 313.12*).
- Adds references to certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing donated sick leave for employees of a soil and water conservation district, in particular, provisions relating to the certification of illness (currently limited to physicians) (*R.C. 940.09*).
- With respect to the law governing personal information systems maintained by state and local government agencies, requires an agency to disclose personal health information unless the disclosure, as determined by a physician or psychologist (under current law) or psychiatric APRN (under the bill), is likely to have an adverse effect (*R.C. 1347.08*).
- For a person seeking specified positions under the jurisdiction of the Division of Mineral Resources Management, expands the list of practitioners who may certify that the applicant is physically capable of performing the position's duties, specifically by

permitting not only a physician to certify the applicant's condition, but also a clinical nurse specialist or certified nurse practitioner (*R.C. 1561.12*).

- For a person seeking a position as a gas storage well inspector for the Division of Oil and Gas Resources Management, permits the certification of the applicant's physical capability to perform the position's duties to be provided by clinical nurse specialists and certified nurse practitioners, in addition to physicians as provided in current law (*R.C. 1571.012*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law regarding documentation of a prospective juror's mental and physical condition for purposes of determining incapability of performing jury service; currently, only physicians may provide any required documentation (*R.C. 2313.14*).
- With respect to the requirement that the Opportunities for Ohioans with Disabilities Agency develop a verification form to be used by individuals diagnosed with communication disabilities and the form's components, specifies that the form's certification of disability may be signed by a clinical nurse specialist or certified nurse practitioner, in addition to a physician (including a psychiatrist) or psychologist as under current law (*R.C. 3304.23*).
- For purposes of the law governing the confidentiality of medical reports and recommendations required by the School Employees Retirement System (SERS), specifies that copies may be made available to a pension fund member's certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner on the member's written release, just as is the case for a physician and attorney under current law (*R.C. 3309.22*).
- Adds certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to the law governing SERS disability benefits, including the disability examinations used for determining eligibility, just as physicians are currently included (*R.C. 3309.41*).
- For purposes of the law governing the authority of a SERS beneficiary to substitute other benefits, specifies, in the law's definition of "physically or mentally incompetent," that such incompetence may be determined by a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner appointed by the School Employees Retirement Board, in addition to current law that authorizes the determination to be made by a court or Board-appointed physician (*R.C. 3309.45*).
- With respect to the requirement that a teacher furnish a written statement to justify the use of sick leave and that the statement list the teacher's attending physician, also specifies that the statement may instead list the teacher's certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 3319.141*).
- With respect to a certificate from a physician stating the nature of a school district employee's disability for purposes of the law governing leave granted following an assault that occurred in the course of employment, specifies that such a certificate also

may be from a certified nurse-midwife, clinical nurse specialist, or certified nurse practitioner (*R.C. 3319.143*).

- For purposes of the statewide emergency alert program for locating missing persons with mental impairment, recognizes psychiatric-mental health clinical nurse specialists and certified nurse practitioners as health care providers who may have certified a person's mental impairment, just like a physician (including a psychiatrist) or psychologist under current law (*R.C. 5502.522*).

## Taxation

- Expressly excludes services provided by certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners from personal care services otherwise subject to the sales and use tax (*R.C. 5739.01*).
- Requires certified nurse-midwives, clinical nurse specialists, and certified nurse practitioners to collect and remit sales taxes on products they sell or dispense in the same manner as physicians under current law (*R.C. 5739.01*).

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## HISTORY

Action	Date
Introduced	11-27-23
Reported, S. Health	---

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