

**As Introduced**

**133rd General Assembly**

**Regular Session**

**2019-2020**

**H. B. No. 700**

**Representatives Holmes, A., Crossman**

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**A BILL**

To amend sections 1751.91, 3719.063, 3923.89, 1  
4723.52, 4729.283, 4729.45, 4729.75, 4729.80, 2  
4729.84, 4730.56, 4731.83, 5119.363, and 3  
5164.14; to amend, for the purpose of adopting a 4  
new section number as indicated in parentheses, 5  
section 3719.064 (3719.067); and to enact new 6  
section 3719.064 and sections 3719.065, 3727.27, 7  
3727.61, 4729.791, 4731.92, and 5119.441 of the 8  
Revised Code regarding making addiction 9  
treatment widely available. 10

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That sections 1751.91, 3719.063, 3923.89, 11  
4723.52, 4729.283, 4729.45, 4729.75, 4729.80, 4729.84, 4730.56, 12  
4731.83, 5119.363, and 5164.14 be amended; section 3719.064 13  
(3719.067) be amended for the purpose of adopting a new section 14  
number as indicated in parentheses; and new section 3719.064 and 15  
sections 3719.065, 3727.27, 3727.61, 4729.791, 4731.92, and 16  
5119.441 of the Revised Code be enacted to read as follows: 17

**Sec. 1751.91.** A health insuring corporation may provide 18  
payment or reimbursement to a pharmacist for providing a health 19

care service to a patient if both of the following are the case: 20

(A) The pharmacist provided the health care service to the 21  
patient in accordance with Chapter 4729. of the Revised Code, 22  
including any of the following services: 23

(1) Managing drug therapy under a consult agreement with a 24  
physician pursuant to section 4729.39 of the Revised Code; 25

(2) Administering immunizations in accordance with section 26  
4729.41 of the Revised Code; 27

(3) Administering drugs in accordance with section 4729.45 28  
or 4731.92 of the Revised Code. 29

(B) The patient's individual or group health insuring 30  
corporation policy, contract, or agreement provides for payment 31  
or reimbursement of the service. 32

**Sec. 3719.063.** In the absence of gross negligence or 33  
intentional misconduct, a person who administers the drug 34  
naltrexone by injection, the person's employer, and the facility 35  
at which the drug is administered are not liable in any civil 36  
action or subject to criminal prosecution or professional 37  
discipline for any injury or damage caused by the injection or 38  
drug if all of the following conditions are met: 39

(A) The individual to whom the drug is administered is 40  
unable to have it administered as follows: 41

(1) By a person who routinely administers the drug to the 42  
individual; 43

(2) At the facility at which the drug is routinely 44  
administered to the individual; 45

(3) Under the direction of the drug's prescriber. 46

(B) The person who administers the drug under this section 47  
is legally authorized to administer it by injection but is not 48  
the prescriber of the drug or one who routinely administers it 49  
to the individual. 50

(C) The drug is provided to the person who administers it 51  
under this section in either of the following ways: 52

(1) By the individual to whom it is administered; 53

(2) By the pharmacy that has a record of a prescription 54  
for the drug in the name of the individual to whom it is 55  
administered. 56

(D) The person who administers the drug under this section 57  
is authorized to do so by that person's employer or the facility 58  
at which the drug is administered. 59

(E) This section does not apply in the case of an 60  
individual who administers an injectable long-acting or 61  
extended-release form of naltrexone in accordance with a 62  
protocol as authorized by section 4731.92 of the Revised Code. 63

**Sec. 3719.064.** (A) As used in this section and in section 64  
3719.065 of the Revised Code, "prescriber" means any of the 65  
following: 66

(1) An advanced practice registered nurse who holds a 67  
current, valid license issued under Chapter 4723. of the Revised 68  
Code and is designated as a clinical nurse specialist, certified 69  
nurse-midwife, or certified nurse practitioner; 70

(2) A physician authorized under Chapter 4731. of the 71  
Revised Code to practice medicine and surgery or osteopathic 72  
medicine and surgery; 73

(3) A physician assistant who is licensed under Chapter 74

4730. of the Revised Code, holds a valid prescriber number 75  
issued by the state medical board, and has been granted 76  
physician-delegated prescriptive authority. 77

(B) To the extent permitted by federal law, a prescriber 78  
who prescribes opioid analgesics shall offer, during business 79  
hours at the location where the prescriber practices, 80  
administration of injectable long-acting or extended-release 81  
forms of naltrexone. The administration may be delegated in 82  
accordance with rules adopted under section 4723.48, 4730.203, 83  
or 4731.053 of the Revised Code, as applicable. 84

A prescriber who delegates the administration of 85  
injectable long-acting or extended-release forms of naltrexone 86  
is not liable in damages to any person or government entity in a 87  
civil action for injury, death, or loss to person or property 88  
that allegedly arises from an act or omission of the delegate in 89  
administering naltrexone, if the prescriber delegates in 90  
accordance with this chapter and rules adopted under Chapter 91  
4723., 4730., or 4731. of the Revised Code, as applicable. 92

Sec. 3719.065. (A) A prescriber who prescribes methadone 93  
or noninjectable forms of buprenorphine shall taper the patient 94  
off the drug within sixty days. If such tapering is not 95  
possible, only daily doses of those drugs may be personally 96  
furnished by the prescriber thereafter. 97

(B) Any prescriber who has obtained a waiver to treat 98  
opioid addiction as provided under the federal Drug Addiction 99  
Treatment Act of 2000 (DATA 2000), 21 U.S.C. 823(g), is required 100  
to have completed training regarding injectable long-acting or 101  
extended-release forms of naltrexone and burprenorphine. The 102  
state board of pharmacy shall review training programs, 103  
including training programs provided by organizations identified 104

in DATA 2000, and approve, for purposes of this section, those 105  
it determines meet the requirement of providing the training as 106  
specified in this division. 107

**Sec. ~~3719.064~~ 3719.067.** (A) As used in this section: 108

(1) "Medication-assisted treatment" has the same meaning 109  
as in section 340.01 of the Revised Code. 110

(2) "Prescriber" means any of the following: 111

(a) An advanced practice registered nurse who holds a 112  
current, valid license issued under Chapter 4723. of the Revised 113  
Code and is designated as a clinical nurse specialist, certified 114  
nurse-midwife, or certified nurse practitioner; 115

(b) A physician authorized under Chapter 4731. of the 116  
Revised Code to practice medicine and surgery or osteopathic 117  
medicine and surgery; 118

(c) A physician assistant who is licensed under Chapter 119  
4730. of the Revised Code, holds a valid prescriber number 120  
issued by the state medical board, and has been granted 121  
physician-delegated prescriptive authority. 122

(3) "Qualifying practitioner" has the same meaning as in 123  
section 303(g) (2) (G) (iii) of the "Controlled Substances Act of 124  
1970," 21 U.S.C. 823(g) (2) (G) (iii), as amended. 125

(B) Before initiating medication-assisted treatment, a 126  
prescriber shall give the patient or the patient's 127  
representative information about all drugs approved by the 128  
United States food and drug administration for use in 129  
medication-assisted treatment. The information must be provided 130  
both orally and in writing. The prescriber or the prescriber's 131  
delegate shall note in the patient's medical record when this 132

information was provided and make the record available to 133  
employees of the board of nursing or state medical board on 134  
their request. 135

If the prescriber is not a qualifying practitioner and the 136  
patient's choice is opioid treatment and the prescriber 137  
determines that such treatment is clinically appropriate and 138  
meets generally accepted standards of medicine, the prescriber 139  
shall refer the patient to an opioid treatment program licensed 140  
under section 5119.37 of the Revised Code or a qualifying 141  
practitioner. The prescriber or the prescriber's delegate shall 142  
make a notation in the patient's medical record naming the 143  
program or practitioner to whom the patient was referred and 144  
specifying when the referral was made. 145

Sec. 3727.27. If a hospital fails to treat drug addiction 146  
with at least eight inpatient beds and an outpatient program, as 147  
determined by the director of health, any exemptions or 148  
exclusions from taxation authorized by sections 140.08, 5709.08, 149  
5709.12, 5709.121, division (B)(1) or (12) of section 5739.02, 150  
and division (E)(8) of section 5751.01 of the Revised Code that 151  
otherwise apply to the hospital shall cease to apply to that 152  
hospital on and after the first day of January of the year 153  
following the year in which the determination was made that the 154  
hospital is no longer in compliance, notwithstanding anything to 155  
the contrary in those sections. On and after that date, the real 156  
property owned or held by the hospital shall become subject to 157  
property taxation; purchases of tangible personal property or 158  
services by the hospital shall be subject to sales and use taxes 159  
levied under Chapter 5739. or 5741. of the Revised Code to the 160  
extent otherwise applicable to such transactions; and the 161  
hospital shall become a taxpayer for the purposes of the tax 162  
levied under Chapter 5751. of the Revised Code. Such real 163

property shall continue to be taxable for each tax year until 164  
the tax year preceding the tax year in which the determination 165  
is made that tax-exempt status is restored; such purchases shall 166  
continue to be subject to sales and use taxes levied under 167  
Chapter 5739. or 5741. of the Revised Code until the first day 168  
of the first month that begins after the date that determination 169  
is made; and the hospital shall continue to be a taxpayer for 170  
the purposes of the tax levied under Chapter 5751. of the 171  
Revised Code until the first day of the tax period that begins 172  
after the date that determination is made. 173

Nothing in this section affects the continued exemption 174  
from taxation, under section 140.08 of the Revised Code, of 175  
obligations issued under section 133.08, 140.06, or 339.15 of 176  
the Revised Code or Section 3 of Article XVIII, Ohio 177  
Constitution, to pay costs of hospital facilities or to refund 178  
such obligations, the transfer of such obligations, the interest 179  
and other income from such obligations, or any profit made on 180  
their sale. 181

The director of health may adopt rules as the director 182  
considers necessary to implement this section. 183

**Sec. 3727.61.** Each hospital shall perform, on demand and 184  
regardless of ability to pay or health insurance coverage, a 185  
laboratory test of liver function, the results of which may be 186  
used by a person identified in division (B) of section 4731.92 187  
of the Revised Code to determine whether it is appropriate to 188  
administer to the person tested an injectable long-acting or 189  
extended-release form of naltrexone for treatment of drug 190  
addiction. 191

**Sec. 3923.89.** A sickness and accident insurer or public 192  
employee benefit plan may provide payment or reimbursement to a 193

pharmacist for providing a health care service to a patient if 194  
both of the following are the case: 195

(A) The pharmacist provided the health care service to the 196  
patient in accordance with Chapter 4729. of the Revised Code, 197  
including any of the following services: 198

(1) Managing drug therapy under a consult agreement with a 199  
physician pursuant to section 4729.39 of the Revised Code; 200

(2) Administering immunizations in accordance with section 201  
4729.41 of the Revised Code; 202

(3) Administering drugs in accordance with section 4729.45 203  
or 4731.92 of the Revised Code. 204

(B) The patient's individual or group policy of sickness 205  
and accident insurance or public employee benefit plan provides 206  
for payment or reimbursement of the service. 207

**Sec. 4723.52.** (A) As used in this section: 208

(1) "Community addiction services provider" has the same 209  
meaning as in section 5119.01 of the Revised Code. 210

(2) "Medication-assisted treatment" has the same meaning 211  
as in section 340.01 of the Revised Code. 212

(B) An advanced practice registered nurse shall comply 213  
with section ~~3719.064~~ 3719.067 of the Revised Code and rules 214  
adopted under section 4723.51 of the Revised Code when treating 215  
a patient for addiction with medication-assisted treatment or 216  
proposing to initiate such treatment. 217

(C) An advanced practice registered nurse who fails to 218  
comply with this section shall treat not more than thirty 219  
patients at any one time with medication-assisted treatment even 220



if the facility or location at which the treatment is provided 221  
is either of the following: 222

(1) Exempted by divisions (B) (2) (a) to (d) of section 223  
4729.553 of the Revised Code from being required to possess a 224  
category III terminal distributor of dangerous drugs license 225  
with an office-based opioid treatment classification; 226

(2) A community addiction services provider that provides 227  
alcohol and drug addiction services that are certified by the 228  
department of mental health and addiction services under section 229  
5119.36 of the Revised Code. 230

**Sec. 4729.283.** (A) A pharmacist may dispense naltrexone 231  
without a written or oral prescription from a licensed health 232  
professional authorized to prescribe drugs if all of the 233  
following conditions are met: 234

(1) The pharmacist is able to verify a record of a 235  
prescription for the injectable long-acting or extended-release 236  
form of naltrexone in the name of the patient who is requesting 237  
the drug, but the prescription does not provide for a refill or 238  
the time permitted by rules adopted by the state board of 239  
pharmacy for providing refills has elapsed. 240

(2) The pharmacist is unable to obtain authorization to 241  
refill the prescription from the prescriber who issued it or 242  
another prescriber responsible for the patient's care. 243

(3) In the exercise of the pharmacist's professional 244  
judgment: 245

(a) The drug is necessary to continue the patient's 246  
therapy for substance use disorder. 247

(b) Failure to dispense the drug to the patient could 248

result in harm to the health of the patient. 249

(B) Before dispensing naltrexone under this section, the 250  
pharmacist shall offer the patient the choice of receiving 251  
either the oral form or injectable long-acting or extended- 252  
release form, but only if both forms of the drug are available 253  
for dispensing at the time of the patient's request or within 254  
one day after the request. 255

(C) (1) With respect to naltrexone dispensed in an oral 256  
form under this section, the pharmacist shall not dispense an 257  
amount that exceeds a five-day supply. 258

(2) With respect to naltrexone dispensed in an injectable 259  
long-acting or extended-release form under this section, both of 260  
the following apply: 261

(a) The pharmacist shall exercise professional judgment in 262  
determining the amount of the drug dispensed. 263

(b) The pharmacist may administer the drug by injection to 264  
the patient but only in accordance with section ~~4729.45~~ 4731.92 265  
of the Revised Code. 266

(D) A pharmacist who dispenses naltrexone under this 267  
section shall do all of the following: 268

(1) For one year after the date of dispensing, maintain a 269  
record in accordance with this chapter of the drug dispensed, 270  
including the amount and form dispensed, the original 271  
prescription number, the name and address of the patient and, if 272  
the individual receiving the drug is not the patient, the name 273  
and address of that individual; 274

(2) Notify the prescriber who issued the prescription 275  
described in division (A) (1) of this section or another 276

prescriber responsible for the patient's care not later than 277  
five days after the drug is dispensed; 278

(3) If applicable, obtain authorization for additional 279  
dispensing from one of the prescribers described in division (D) 280  
(2) of this section. 281

(E) A pharmacist shall exercise professional judgment in 282  
determining the number of times naltrexone may be dispensed 283  
under this section to the same patient. 284

(F) This section does not limit the authority of a 285  
pharmacist to dispense a dangerous drug under section 4729.281 286  
of the Revised Code. 287

**Sec. 4729.45.** (A) As used in this section, "physician" 288  
means an individual authorized under Chapter 4731. of the 289  
Revised Code to practice medicine and surgery or osteopathic 290  
medicine and surgery. 291

(B) (1) Subject to division (C) of this section, a 292  
pharmacist licensed under this chapter may administer by 293  
injection any of the following drugs as long as the drug that is 294  
to be administered has been prescribed by a physician and the 295  
individual to whom the drug was prescribed has an ongoing 296  
physician-patient relationship with the physician: 297

(a) ~~An opioid antagonist used for treatment of drug~~ 298  
~~addiction and administered in a long-acting or extended-release~~ 299  
~~form;~~ 300

~~(b)~~ An antipsychotic drug administered in a long-acting or 301  
extended-release form; 302

~~(c)~~ (b) Hydroxyprogesterone caproate; 303

~~(d)~~ (c) Medroxyprogesterone acetate; 304

~~(e)~~—(d) Cobalamin. 305

(2) As part of engaging in the administration of drugs by 306  
injection pursuant to this section, a pharmacist may administer 307  
epinephrine or diphenhydramine, or both, to an individual in an 308  
emergency situation resulting from an adverse reaction to a drug 309  
administered by the pharmacist. 310

(C) To be authorized to administer drugs pursuant to this 311  
section, a pharmacist must do all of the following: 312

(1) Successfully complete a course in the administration 313  
of drugs that satisfies the requirements established by the 314  
state board of pharmacy in rules adopted under division ~~(H)~~(G) 315  
(1) (a) of this section; 316

(2) Receive and maintain certification to perform basic 317  
life-support procedures by successfully completing a basic life- 318  
support training course that is certified by the American red 319  
cross or American heart association or approved by the state 320  
board of pharmacy; 321

(3) Practice in accordance with a protocol that meets the 322  
requirements of division ~~(F)~~—(E) of this section. 323

(D) Each time a pharmacist administers a drug pursuant to 324  
this section, the pharmacist shall do all of the following: 325

(1) Obtain permission in accordance with the procedures 326  
specified in rules adopted under division ~~(H)~~—(G) of this 327  
section and comply with the following requirements: 328

(a) Except as provided in division (D) (1) (c) of this 329  
section, for each drug administered by a pharmacist to an 330  
individual who is eighteen years of age or older, the pharmacist 331  
shall obtain permission from the individual. 332

(b) For each drug administered by a pharmacist to an 333  
individual who is under eighteen years of age, the pharmacist 334  
shall obtain permission from the individual's parent or other 335  
person having care or charge of the individual. 336

(c) For each drug administered by a pharmacist to an 337  
individual who lacks the capacity to make informed health care 338  
decisions, the pharmacist shall obtain permission from the 339  
person authorized to make such decisions on the individual's 340  
behalf. 341

~~(2) In the case of an opioid antagonist described in 342~~  
~~division (B) of this section, obtain in accordance with division 343~~  
~~(E) of this section test results indicating that it is 344~~  
~~appropriate to administer the drug to the individual if either 345~~  
~~of the following is to be administered: 346~~

~~(a) The initial dose of the drug; 347~~

~~(b) Any subsequent dose, if the administration occurs more 348~~  
~~than thirty days after the previous dose of the drug was 349~~  
~~administered. 350~~

~~(3) Observe the individual to whom the drug is 351~~  
administered to determine whether the individual has an adverse 352  
reaction to the drug; 353

~~(4) (3) Notify the physician who prescribed the drug that 354~~  
the drug has been administered to the individual. 355

~~(E) A pharmacist may obtain the test results described in 356~~  
~~division (D) (2) of this section in either of the following ways: 357~~

~~(1) From the physician; 358~~

~~(2) By ordering blood and urine tests for the individual 359~~  
~~to whom the opioid antagonist is to be administered. 360~~

~~If a pharmacist orders blood and urine tests, the~~ 361  
~~pharmacist shall evaluate the results of the tests to determine~~ 362  
~~whether they indicate that it is appropriate to administer the~~ 363  
~~opioid antagonist. A pharmacist's authority to evaluate test~~ 364  
~~results under this division does not authorize the pharmacist to~~ 365  
~~make a diagnosis.~~ 366

~~(F)~~ All of the following apply with respect to the 367  
protocol required by division (C) (3) of this section: 368

(1) The protocol must be established by a physician who 369  
has a scope of practice that includes treatment of the condition 370  
for which the individual has been prescribed the drug to be 371  
administered. 372

(2) The protocol must satisfy the requirements established 373  
in rules adopted under division ~~(H)~~ (G) (1) (b) of this section. 374

(3) The protocol must do all of the following: 375

(a) Specify a definitive set of treatment guidelines; 376

(b) Specify the locations at which a pharmacist may engage 377  
in the administration of drugs pursuant to this section; 378

(c) Include provisions for implementing the requirements 379  
of division (D) of this section, including for purposes of 380  
division (D) ~~(3)~~ (2) of this section provisions specifying the 381  
length of time and location at which a pharmacist must observe 382  
an individual who receives a drug to determine whether the 383  
individual has an adverse reaction to the drug; 384

(d) Specify procedures to be followed by a pharmacist when 385  
administering epinephrine, diphenhydramine, or both, to an 386  
individual who has an adverse reaction to a drug administered by 387  
the pharmacist. 388

~~(G)~~ (F) A pharmacist shall not do either of the following: 389

(1) Engage in the administration of drugs pursuant to this 390  
section unless the requirements of division (C) of this section 391  
have been met; 392

(2) Delegate to any person the pharmacist's authority to 393  
engage in the administration of drugs pursuant to this section. 394

~~(H)~~ (G) (1) The state board of pharmacy shall adopt rules to 395  
implement this section. The rules shall be adopted in accordance 396  
with Chapter 119. of the Revised Code and include all of the 397  
following: 398

(a) Requirements for courses in administration of drugs; 399

(b) Requirements for protocols to be followed by 400  
pharmacists in administering drugs pursuant to this section; 401

(c) Procedures to be followed by a pharmacist in obtaining 402  
permission to administer a drug to an individual. 403

(2) The board shall consult with the state medical board 404  
before adopting rules regarding requirements for protocols under 405  
this section. 406

**Sec. 4729.75.** The state board of pharmacy may establish 407  
and maintain a drug database. The board shall use the drug 408  
database to monitor the misuse and diversion of the following: 409  
controlled substances, as defined in section 3719.01 of the 410  
Revised Code; medical marijuana, as authorized under Chapter 411  
3796. of the Revised Code; and other dangerous drugs the board 412  
includes in the database pursuant to rules adopted under section 413  
4729.84 of the Revised Code. 414

The board also shall use the drug database to monitor 415  
naltrexone, including the administration of injectable long- 416

acting or extended-release forms of naltrexone as authorized 417  
under section 4731.92 of the Revised Code. 418

In establishing and maintaining the database, the board 419  
shall electronically collect information pursuant to sections 420  
4729.77, 4729.771, 4729.772, 4729.78, ~~and 4729.79~~, and 4729.791 421  
of the Revised Code and shall disseminate information as 422  
authorized or required by sections 4729.80 and 4729.81 of the 423  
Revised Code. The board's collection and dissemination of 424  
information shall be conducted in accordance with rules adopted 425  
under section 4729.84 of the Revised Code. 426

**Sec. 4729.791.** (A) (1) If the state board of pharmacy 427  
establishes and maintains a drug database pursuant to section 428  
4729.75 of the Revised Code, the following individuals who 429  
administer injectable long-acting or extended-release forms of 430  
naltrexone shall submit to the board the information identified 431  
in division (A) (2) of this section: 432

(a) A licensed health professional authorized to prescribe 433  
drugs; 434

(b) An individual identified in division (B) of section 435  
4731.92. 436

(2) Each individual identified in division (A) of this 437  
section shall submit the following information to the board: 438

(a) The individual's name and licensing board; 439

(b) The name of the individual receiving the drug by 440  
injection; 441

(c) The date the drug was administered; 442

(d) The name, strength, and national drug code of the drug 443  
furnished; 444



(e) Any other information specified by the board in rules 445  
adopted under section 4729.84 of the Revised Code. 446

(B) If the state board of pharmacy establishes and 447  
maintains a drug database pursuant to section 4729.75 of the 448  
Revised Code, each licensed health professional who receives 449  
test results indicating whether or not it is appropriate to 450  
administer to an individual an injectable long-acting or 451  
extended-release form of naltrexone shall submit to the board 452  
the following: 453

(1) Health professional identification; 454

(2) Patient identification; 455

(3) Date and results of the test; 456

(4) Any other information specified by the board in rules 457  
adopted under section 4729.84 of the Revised Code. 458

(C) Information required by this section shall be 459  
transmitted as specified by the board in rules adopted under 460  
section 4729.84 of the Revised Code. 461

The information shall be submitted electronically in the 462  
format specified by the board, except that the board may grant a 463  
waiver allowing the individual to submit the information in 464  
another format. 465

The information shall be submitted in accordance with any 466  
time limits specified by the board, except that the board may 467  
grant an extension if either of the following occurs: 468

(1) The individual's transmission system suffers a 469  
mechanical or electronic failure or the individual cannot meet 470  
the deadline for other reasons beyond the individual's control. 471

(2) The board is unable to receive electronic submissions. 472

(D) If the board becomes aware of an individual's failure 473  
to comply with this section, the board shall notify the 474  
government entity responsible for licensing the individual. 475

**Sec. 4729.80.** (A) If the state board of pharmacy 476  
establishes and maintains a drug database pursuant to section 477  
4729.75 of the Revised Code, the board is authorized or required 478  
to provide information from the database only as follows: 479

(1) On receipt of a request from a designated 480  
representative of a government entity responsible for the 481  
licensure, regulation, or discipline of health care 482  
professionals with authority to prescribe, administer, or 483  
dispense drugs, the board may provide to the representative 484  
information from the database relating to the professional who 485  
is the subject of an active investigation being conducted by the 486  
government entity or relating to a professional who is acting as 487  
an expert witness for the government entity in such an 488  
investigation. 489

(2) On receipt of a request from a federal officer, or a 490  
state or local officer of this or any other state, whose duties 491  
include enforcing laws relating to drugs, the board shall 492  
provide to the officer information from the database relating to 493  
the person who is the subject of an active investigation of a 494  
drug abuse offense, as defined in section 2925.01 of the Revised 495  
Code, being conducted by the officer's employing government 496  
entity. 497

(3) Pursuant to a subpoena issued by a grand jury, the 498  
board shall provide to the grand jury information from the 499  
database relating to the person who is the subject of an 500

investigation being conducted by the grand jury. 501

(4) Pursuant to a subpoena, search warrant, or court order 502  
in connection with the investigation or prosecution of a 503  
possible or alleged criminal offense, the board shall provide 504  
information from the database as necessary to comply with the 505  
subpoena, search warrant, or court order. 506

(5) On receipt of a request from a prescriber or the 507  
prescriber's delegate approved by the board, the board shall 508  
provide to the prescriber a report of information from the 509  
database relating to a patient who is either a current patient 510  
of the prescriber or a potential patient of the prescriber based 511  
on a referral of the patient to the prescriber, if all of the 512  
following conditions are met: 513

(a) The prescriber certifies in a form specified by the 514  
board that it is for the purpose of providing medical treatment 515  
to the patient who is the subject of the request; 516

(b) The prescriber has not been denied access to the 517  
database by the board. 518

(6) On receipt of a request from a pharmacist or the 519  
pharmacist's delegate approved by the board, the board shall 520  
provide to the pharmacist information from the database relating 521  
to a current patient of the pharmacist, if the pharmacist 522  
certifies in a form specified by the board that it is for the 523  
purpose of the pharmacist's practice of pharmacy involving the 524  
patient who is the subject of the request and the pharmacist has 525  
not been denied access to the database by the board. 526

(7) On receipt of a request from an individual seeking the 527  
individual's own database information in accordance with the 528  
procedure established in rules adopted under section 4729.84 of 529

the Revised Code, the board may provide to the individual the 530  
individual's own prescription history. 531

(8) On receipt of a request from a medical director or a 532  
pharmacy director of a managed care organization that has 533  
entered into a contract with the department of medicaid under 534  
section 5167.10 of the Revised Code and a data security 535  
agreement with the board required by section 5167.14 of the 536  
Revised Code, the board shall provide to the medical director or 537  
the pharmacy director information from the database relating to 538  
a medicaid recipient enrolled in the managed care organization, 539  
including information in the database related to prescriptions 540  
for the recipient that were not covered or reimbursed under a 541  
program administered by the department of medicaid. 542

(9) On receipt of a request from the medicaid director, 543  
the board shall provide to the director information from the 544  
database relating to a recipient of a program administered by 545  
the department of medicaid, including information in the 546  
database related to prescriptions for the recipient that were 547  
not covered or paid by a program administered by the department. 548

(10) On receipt of a request from a medical director of a 549  
managed care organization that has entered into a contract with 550  
the administrator of workers' compensation under division (B) (4) 551  
of section 4121.44 of the Revised Code and a data security 552  
agreement with the board required by section 4121.447 of the 553  
Revised Code, the board shall provide to the medical director 554  
information from the database relating to a claimant under 555  
Chapter 4121., 4123., 4127., or 4131. of the Revised Code 556  
assigned to the managed care organization, including information 557  
in the database related to prescriptions for the claimant that 558  
were not covered or reimbursed under Chapter 4121., 4123., 559

4127., or 4131. of the Revised Code, if the administrator of 560  
workers' compensation confirms, upon request from the board, 561  
that the claimant is assigned to the managed care organization. 562

(11) On receipt of a request from the administrator of 563  
workers' compensation, the board shall provide to the 564  
administrator information from the database relating to a 565  
claimant under Chapter 4121., 4123., 4127., or 4131. of the 566  
Revised Code, including information in the database related to 567  
prescriptions for the claimant that were not covered or 568  
reimbursed under Chapter 4121., 4123., 4127., or 4131. of the 569  
Revised Code. 570

(12) On receipt of a request from a prescriber or the 571  
prescriber's delegate approved by the board, the board shall 572  
provide to the prescriber information from the database relating 573  
to a patient's mother, if the prescriber certifies in a form 574  
specified by the board that it is for the purpose of providing 575  
medical treatment to a newborn or infant patient diagnosed as 576  
opioid dependent and the prescriber has not been denied access 577  
to the database by the board. 578

(13) On receipt of a request from the director of health, 579  
the board shall provide to the director information from the 580  
database relating to the duties of the director or the 581  
department of health in implementing the Ohio violent death 582  
reporting system established under section 3701.93 of the 583  
Revised Code. 584

(14) On receipt of a request from a requestor described in 585  
division (A)(1), (2), (5), or (6) of this section who is from or 586  
participating with another state's prescription monitoring 587  
program, the board may provide to the requestor information from 588  
the database, but only if there is a written agreement under 589

which the information is to be used and disseminated according 590  
to the laws of this state. 591

(15) On receipt of a request from a delegate of a retail 592  
dispensary licensed under Chapter 3796. of the Revised Code who 593  
is approved by the board to serve as the dispensary's delegate, 594  
the board shall provide to the delegate a report of information 595  
from the database pertaining only to a patient's use of medical 596  
marijuana, if both of the following conditions are met: 597

(a) The delegate certifies in a form specified by the 598  
board that it is for the purpose of dispensing medical marijuana 599  
for use in accordance with Chapter 3796. of the Revised Code. 600

(b) The retail dispensary or delegate has not been denied 601  
access to the database by the board. 602

(16) On receipt of a request from a judge of a program 603  
certified by the Ohio supreme court as a specialized docket 604  
program for drugs, the board shall provide to the judge, or an 605  
employee of the program who is designated by the judge to 606  
receive the information, information from the database that 607  
relates specifically to a current or prospective program 608  
participant. 609

(17) On receipt of a request from a coroner, deputy 610  
coroner, or coroner's delegate approved by the board, the board 611  
shall provide to the requestor information from the database 612  
relating to a deceased person about whom the coroner is 613  
conducting or has conducted an autopsy or investigation. 614

(18) On receipt of a request from a prescriber, the board 615  
may provide to the prescriber a summary of the prescriber's 616  
prescribing record if such a record is created by the board. 617  
Information in the summary is subject to the confidentiality 618

requirements of this chapter. 619

(19) (a) On receipt of a request from a pharmacy's 620  
responsible person, the board may provide to the responsible 621  
person a summary of the pharmacy's dispensing record if such a 622  
record is created by the board. Information in the summary is 623  
subject to the confidentiality requirements of this chapter. 624

(b) As used in division (A) (19) (a) of this section, 625  
"responsible person" has the same meaning as in rules adopted by 626  
the board under section 4729.26 of the Revised Code. 627

(20) The board may provide information from the database 628  
without request to a prescriber or pharmacist who is authorized 629  
to use the database pursuant to this chapter. 630

(21) (a) On receipt of a request from a prescriber or 631  
pharmacist, or the prescriber's or pharmacist's delegate, who is 632  
a designated representative of a peer review committee, the 633  
board shall provide to the committee information from the 634  
database relating to a prescriber who is subject to the 635  
committee's evaluation, supervision, or discipline if the 636  
information is to be used for one of those purposes. The board 637  
shall provide only information that it determines, in accordance 638  
with rules adopted under section 4729.84 of the Revised Code, is 639  
appropriate to be provided to the committee. 640

(b) As used in division (A) (21) (a) of this section, "peer 641  
review committee" has the same meaning as in section 2305.25 of 642  
the Revised Code, except that it includes only a peer review 643  
committee of a hospital or a peer review committee of a 644  
nonprofit health care corporation that is a member of the 645  
hospital or of which the hospital is a member. 646

(22) Any personal health information submitted to the 647

board pursuant to section 4729.772 of the Revised Code may be 648  
provided by the board only as authorized by the submitter of the 649  
information and in accordance with rules adopted under section 650  
4729.84 of the Revised Code. 651

(23) On receipt of a request from an individual identified 652  
in division (B) of section 4731.92 of the Revised Code, the 653  
board shall provide to the individual a report of information 654  
from the database pertaining only to a patient's treatment for 655  
drug addiction. 656

(B) The state board of pharmacy shall maintain a record of 657  
each individual or entity that requests information from the 658  
database pursuant to this section. In accordance with rules 659  
adopted under section 4729.84 of the Revised Code, the board may 660  
use the records to document and report statistics and law 661  
enforcement outcomes. 662

The board may provide records of an individual's requests 663  
for database information only to the following: 664

(1) A designated representative of a government entity 665  
that is responsible for the licensure, regulation, or discipline 666  
of health care professionals with authority to prescribe, 667  
administer, or dispense drugs who is involved in an active 668  
criminal or disciplinary investigation being conducted by the 669  
government entity of the individual who submitted the requests 670  
for database information; 671

(2) A federal officer, or a state or local officer of this 672  
or any other state, whose duties include enforcing laws relating 673  
to drugs and who is involved in an active investigation being 674  
conducted by the officer's employing government entity of the 675  
individual who submitted the requests for database information; 676



(3) A designated representative of the department of 677  
medicaid regarding a prescriber who is treating or has treated a 678  
recipient of a program administered by the department and who 679  
submitted the requests for database information. 680

(C) Information contained in the database and any 681  
information obtained from it is confidential and is not a public 682  
record. Information contained in the records of requests for 683  
information from the database is confidential and is not a 684  
public record. Information contained in the database that does 685  
not identify a person, including any licensee or registrant of 686  
the board or other entity, may be released in summary, 687  
statistical, or aggregate form. 688

(D) A pharmacist or prescriber shall not be held liable in 689  
damages to any person in any civil action for injury, death, or 690  
loss to person or property on the basis that the pharmacist or 691  
prescriber did or did not seek or obtain information from the 692  
database. 693

**Sec. 4729.84.** For purposes of establishing and maintaining 694  
a drug database pursuant to section 4729.75 of the Revised Code, 695  
the state board of pharmacy shall adopt rules in accordance with 696  
Chapter 119. of the Revised Code to carry out and enforce 697  
sections 4729.75 to 4729.83 of the Revised Code. The rules shall 698  
specify all of the following: 699

(A) A means of identifying each patient, each terminal 700  
distributor of dangerous drugs, each purchase at wholesale of 701  
dangerous drugs, and each retail dispensary licensed under 702  
Chapter 3796. of the Revised Code about which information is 703  
entered into the drug database; 704

(B) Requirements for the transmission of information from 705

terminal distributors of dangerous drugs, manufacturers of 706  
dangerous drugs, outsourcing facilities, repackagers of 707  
dangerous drugs, wholesale distributors of dangerous drugs, 708  
prescribers, ~~and~~ retail dispensaries, and other individuals 709  
required to transmit information to the board; 710

(C) An electronic format for the submission of information 711  
from persons identified in division (B) of this section; 712

(D) A procedure whereby a person unable to submit 713  
information electronically may obtain a waiver to submit 714  
information in another format; 715

(E) A procedure whereby the board may grant a request from 716  
a law enforcement agency or a government entity responsible for 717  
the licensure, regulation, or discipline of licensed health 718  
professionals authorized to prescribe drugs that information 719  
that has been stored for three years be retained when the 720  
information pertains to an open investigation being conducted by 721  
the agency or entity; 722

(F) A procedure whereby a person identified in division 723  
(B) of this section may apply for an extension to the time by 724  
which information must be transmitted to the board; 725

(G) A procedure whereby a person or government entity to 726  
which the board is authorized to provide information may submit 727  
a request to the board for the information and the board may 728  
verify the identity of the requestor; 729

(H) Standards for determining what information is 730  
appropriate to be provided under division (A) (21) of section 731  
4729.80 of the Revised Code; 732

(I) A procedure whereby the board can use the database 733  
request records required by division (B) of section 4729.80 of 734

the Revised Code to document and report statistics and law 735  
enforcement outcomes; 736

(J) A procedure whereby an individual may request the 737  
individual's own database information and the board may verify 738  
the identity of the requestor; 739

(K) A reasonable fee that the board may charge under 740  
section 4729.83 of the Revised Code for providing an individual 741  
with the individual's own database information pursuant to 742  
section 4729.80 of the Revised Code; 743

(L) The other specific dangerous drugs that, in addition 744  
to controlled substances, must be included in the database; 745

(M) The types of pharmacies licensed as terminal 746  
distributors of dangerous drugs that are required to submit 747  
prescription information to the board pursuant to section 748  
4729.77 of the Revised Code; 749

(N) Additional data fields, recognized by the American 750  
society for automation in pharmacy, that licensed terminal 751  
distributors of dangerous drugs must submit to the board 752  
pursuant to section 4729.77 of the Revised Code; 753

(O) The information regarding medical marijuana dispensed 754  
to a patient that a retail dispensary is required to submit to 755  
the board pursuant to section 4729.771 of the Revised Code; 756

(P) Requirements for the transmission of information 757  
pursuant to section 4729.772 of the Revised Code and 758  
requirements for the release of such information by the board; 759

(Q) Any additional information that must be submitted to 760  
the board pursuant to section 4729.791 of the Revised Code. 761

**Sec. 4730.56.** (A) As used in this section: 762

(1) "Community addiction services provider" has the same 763  
meaning as in section 5119.01 of the Revised Code. 764

(2) "Medication-assisted treatment" has the same meaning 765  
as in section 340.01 of the Revised Code. 766

(B) A physician assistant shall comply with section 767  
~~3719.064~~ 3719.067 of the Revised Code and rules adopted under 768  
section 4730.55 of the Revised Code when treating a patient with 769  
medication-assisted treatment or proposing to initiate such 770  
treatment. 771

(C) A physician assistant who fails to comply with this 772  
section shall treat not more than thirty patients at any one 773  
time with medication-assisted treatment even if the facility or 774  
location at which the treatment is provided is either of the 775  
following: 776

(1) Exempted by divisions (B) (2) (a) to (d) of section 777  
4729.553 of the Revised Code from being required to possess a 778  
category III terminal distributor of dangerous drugs license 779  
with an office-based opioid treatment classification; 780

(2) A community addiction services provider that provides 781  
alcohol and drug addiction services that are certified by the 782  
department of mental health and addiction services under section 783  
5119.36 of the Revised Code. 784

**Sec. 4731.83.** (A) As used in this section: 785

(1) "Medication-assisted treatment" has the same meaning 786  
as in section 340.01 of the Revised Code. 787

(2) "Physician" means an individual authorized by this 788  
chapter to practice medicine and surgery or osteopathic medicine 789  
and surgery. 790

(B) A physician shall comply with section ~~3719.064~~ 791  
3719.067 of the Revised Code and rules adopted under section 792  
4731.056 of the Revised Code when treating a patient with 793  
medication-assisted treatment or proposing to initiate such 794  
treatment. 795

(C) A physician who fails to comply with this section 796  
shall treat not more than thirty patients at any one time with 797  
medication-assisted treatment even if the facility or location 798  
at which the treatment is provided is either of the following: 799

(1) Exempted by divisions (B) (2) (a) to (d) of section 800  
4729.553 of the Revised Code from being required to possess a 801  
category III terminal distributor of dangerous drugs license 802  
with an office-based opioid treatment classification; 803

(2) A community addiction services provider that provides 804  
alcohol and drug addiction services that are certified by the 805  
department of mental health and addiction services under section 806  
5119.36 of the Revised Code. 807

**Sec. 4731.92.** (A) As used in this section, "physician" 808  
means an individual authorized to practice medicine and surgery 809  
or osteopathic medicine and surgery. 810

(B) Notwithstanding any conflicting provision of the 811  
Revised Code or rule adopted under it, any of the following 812  
individuals who comply with division (C) of this section may 813  
administer by injection, in accordance with a protocol that 814  
meets the requirements of division (F) of this section, long- 815  
acting or extended-release forms of naltrexone for treatment of 816  
drug addiction: 817

(1) A pharmacist licensed or otherwise authorized to 818  
practice by the state board of pharmacy under Chapter 4729. of 819

the Revised Code; 820

(2) A psychologist licensed or otherwise authorized to 821  
practice by the state board of psychology under Chapter 4732. of 822  
the Revised Code; 823

(3) An individual licensed or otherwise authorized to 824  
practice by the chemical dependency professionals board under 825  
Chapter 4758. of the Revised Code; 826

(4) An individual licensed or otherwise authorized to 827  
practice by the counselor, social worker, and marriage and 828  
family therapist board under Chapter 4757. of the Revised Code; 829

(5) An individual licensed or otherwise authorized to 830  
practice by the state board of emergency medical, fire, and 831  
transportation services under Chapter 4765. of the Revised Code; 832

(6) A police officer; 833

(7) A licensed health care professional not otherwise 834  
listed in this section that is specifically identified in a 835  
protocol that meets the requirements of division (F) of this 836  
section. 837

(C) To be authorized to administer injectable long-acting 838  
or extended-release forms of naltrexone pursuant to this 839  
section, an individual identified in division (B) of this 840  
section must do all of the following: 841

(1) Successfully complete an online course in the 842  
administration of drugs that satisfies the requirements 843  
established by the state medical board in rules adopted under 844  
division (I) of this section; 845

(2) Receive and maintain certification to perform basic 846  
life-support procedures by successfully completing a basic life- 847

support training course certified by the American red cross or 848  
American heart association; 849

(3) Practice in accordance with a protocol that meets the 850  
requirements of division (F) of this section. 851

(D) Each time an individual administers a drug pursuant to 852  
this section, the individual shall do both of the following: 853

(1) Except as provided in division (E) (2) of this section, 854  
obtain in accordance with division (E) of this section test 855  
results indicating that it is appropriate to administer the 856  
drug; 857

(2) Submit to the state board of pharmacy the information 858  
identified in section 4729.791 of the Revised Code. 859

(E) (1) An individual identified in division (B) of this 860  
section may obtain the test results described in division (D) (1) 861  
of this section in any of the following ways: 862

(a) From a physician; 863

(b) From the drug database established under section 864  
4729.75 of the Revised Code; 865

(c) From a hospital; 866

(d) From the person on whom the test described in division 867  
(D) (1) of this section was performed. 868

(2) If the individual seeking to administer a drug in 869  
accordance with this section is unable to obtain test results 870  
indicating that it is appropriate to administer the drug and the 871  
recipient of the drug declares that the recipient is unable to 872  
get the test, the individual may administer the drug to the 873  
recipient for not more than sixty days. 874

(F) The protocol required by division (C) (3) of this 875  
section must do both of the following: 876

(1) Be established by a physician whose regular practice 877  
includes treatment of the condition for which the recipient is 878  
receiving the drug to be administered; 879

(2) Satisfy the requirements established in rules adopted 880  
under division (I) of this section. 881

(G) An individual identified in division (B) of this 882  
section is not liable for damages in any civil action allegedly 883  
arising from, or subject to prosecution in any criminal 884  
proceeding or professional disciplinary action for, any act or 885  
omission associated with administering injectable long-acting or 886  
extended-release forms of naltrexone under this section, unless 887  
the act or omission constitutes willful or wanton misconduct. 888

(H) Nothing in this section requires an individual 889  
identified in division (B) of this section to administer a drug 890  
by injection. 891

(I) The state medical board shall adopt rules to implement 892  
this section. The rules shall be adopted in accordance with 893  
Chapter 119. of the Revised Code and include at least the 894  
following: 895

(1) Requirements for online courses in the administration 896  
of drugs; 897

(2) Requirements for protocols established under this 898  
section. 899

**Sec. 5119.363.** The director of mental health and addiction 900  
services shall adopt rules governing the duties of boards of 901  
alcohol, drug addiction, and mental health services under 902



section 340.20 of the Revised Code and the duties of community 903  
addiction services providers under section 5119.362 of the 904  
Revised Code. The rules shall be adopted in accordance with 905  
Chapter 119. of the Revised Code. 906

The director shall adopt rules under this section that 907  
authorize the department of mental health and addiction services 908  
to determine an advanced practice registered nurse's, physician 909  
assistant's, or physician's compliance with section ~~3719.064-~~ 910  
3719.067 of the Revised Code if such practitioner works for a 911  
community addiction services provider. 912

Sec. 5119.441. (A) The department of mental health and 913  
addiction services shall procure injectable long-acting or 914  
extended-release forms of naltrexone and buprenorphine directly 915  
from drug manufacturers and coordinate with state, county, and 916  
municipal agencies to distribute the drugs as needed to treat 917  
drug-addicted individuals in this state, including distribution 918  
to individuals identified in division (B) of section 4731.92 of 919  
the Revised Code. The department shall require monitoring and 920  
monthly administration of the drugs by boards of health, boards 921  
of alcohol, drug addiction, and mental health services, courts, 922  
and parole and probation officers. 923

(B) The department shall contract with a licensed terminal 924  
distributor of dangerous drugs to serve as a central pharmacy 925  
that is responsible for obtaining statewide contract pricing and 926  
from which political subdivisions can make direct purchases of 927  
injectable long-acting or extended-release forms of naltrexone 928  
and buprenorphine. 929

(C) In procuring injectable long-acting or extended- 930  
release forms of naltrexone and buprenorphine pursuant to this 931  
section, the department may use rebates to further discount the 932

drug's price. 933

**Sec. 5164.14.** The medicaid program may cover a health care 934  
service that a pharmacist provides to a medicaid recipient in 935  
accordance with Chapter 4729. of the Revised Code, including any 936  
of the following services: 937

(A) Managing drug therapy under a consult agreement with a 938  
physician pursuant to section 4729.39 of the Revised Code; 939

(B) Administering immunizations in accordance with section 940  
4729.41 of the Revised Code; 941

(C) Administering drugs in accordance with section 4729.45 942  
or 4731.92 of the Revised Code. 943

**Section 2.** That existing sections 1751.91, 3719.063, 944  
3719.064, 3923.89, 4723.52, 4729.283, 4729.45, 4729.75, 4729.80, 945  
4729.84, 4730.56, 4731.83, 5119.363, and 5164.14 of the Revised 946  
Code are hereby repealed. 947