

Executive	As Passed By House	As Passed By Senate	As Enacted
MEDCD3 Personally furnishing drugs at employer-based clinics			
No provision.	No provision.	<p>R.C. 4730.43 Permits a physician assistant to personally furnish supplies of specified drugs and therapeutic devices at an employer-based clinic.</p> <p>Fiscal effect: None.</p>	<p>R.C. 4730.43 Same as the Senate.</p> <p>Fiscal effect: Same as the Senate.</p>
MEDCD1 Massage Therapy Advisory Council			
No provision.	<p>R.C. 4731.152 Creates the Massage Therapy Advisory Council to make recommendations to the State Medical Board regarding issues affecting the practice of massage therapy.</p>	No provision.	<p>R.C. 4731.152 Same as the House.</p>
No provision.	<p>Requires the Board to appoint the Council's members, a majority of whom must be licensed and active in the practice of massage therapy. Authorizes associations of massage therapy professionals to nominate individuals for appointment.</p> <p>Fiscal effect: While members will not receive compensation, they could receive reimbursements for related expenses. Thus, there could be minimal costs associated with this.</p>	No provision.	<p>Same as the House.</p> <p>Fiscal effect: Same as the House.</p>

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MEDCD2 State Medical Board One-Bite Program			
No provision.	No provision.	<p>R.C. 4731.254, 4730.26, 4731.22, 4731.224, 4731.251, 4759.05, 4760.14, 4761.03, 4762.14, 4774.14, and 4778.18</p> <p>Specifies, for purposes of the State Medical Board's One-Bite Program for impaired practitioners, that a practitioner or applicant for licensure who discloses to the Board a previous impairment is not subject to Board discipline for that impairment, if the practitioner or applicant has completed treatment and complies with aftercare or remains in good standing with another state's version of the One-Bite Program. The program applies to physicians, podiatrists, massage therapists, physician assistants, dietitians, anesthesiologist assistants, respiratory therapists, acupuncturists, radiologist assistants, and genetic</p> <p>Fiscal effect: None.</p>	No provision.
MEDCD7 Use of light-based medical devices for hair removal			
No provision.	No provision.	No provision.	<p>R.C. 4731.33</p> <p>Allows a physician to delegate the use of light-based medical devices for hair removal to specified persons, including cosmetic therapists, under certain circumstances and specifies the training that physicians and delegates are required to document and retain.</p>

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			Fiscal effect: None, this provision largely mirrors a rule proposed by the Board.
MEDCD4 Out-of-state physician consultation with Ohio physicians			
No provision.	No provision.	<p>R.C. 4731.36</p> <p>Modifies a provision of existing law, which allows a physician licensed in another state or territory to provide consultation to a physician licensed in Ohio, by eliminating the specification that the Ohio-licensed physician who received the consultation from the out-of-state physician must also be responsible for the examination, diagnosis, and treatment of the patient who is the subject of the consultation.</p> <p>Fiscal effect: None.</p>	No provision.
MEDCD6 Medical practitioner conscience clause			
No provision.	No provision.	<p>R.C. 4743.10</p> <p>Recognizes the authority of a medical practitioner, health care institution, or health care payer to decline to perform, participate in, or pay for any health care service that violates the practitioner's, institution's, or payer's conscience as informed by the moral, ethical, or religious beliefs or principles held by the practitioner, institution, or payer.</p>	<p>R.C. 4743.10</p> <p>Same as the Senate, but specifies that in the case of a health care payer such provisions apply only to contracts for the payment of health care services that are entered into on or after the bill's effective date.</p>
No provision.	No provision.	<p>Requires a medical practitioner, when the practitioner becomes aware of a health care service's conflict with or violation of the</p>	Same as the Senate.

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No provision.	No provision.	practitioner's beliefs or principles, to notify the practitioner's supervisor (if applicable), request to be excused from the service, and, if willing, seek a colleague to perform the service.	Same as the Senate.
No provision.	No provision.	Requires a patient, in the event that a medical practitioner does not participate in a transfer of care or a colleague is unwilling to perform the service, to be notified and provided an opportunity to find an alternative medical practitioner and upon request, receive the patient's medical records.	Same as the Senate.
No provision.	No provision.	Specifies that a medical practitioner, health care institution, or health care payer is not subject to civil, criminal, or administrative liability for declining to participate in or pay for a health care service.	Same as the Senate.
		Authorizes a medical practitioner, health care institution, or health care payer to bring a civil action in the event of a violation of the bill's provisions and, if the practitioner, institution, or payer prevails, provides for treble damages, injunctive relief, costs, and attorney's fees.	

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MEDCD5 Exceptions to dietetics licensure			
No provision.	No provision.	<p data-bbox="1365 337 1607 362">R.C. 4759.10</p> <p data-bbox="1365 386 1948 686">Exempts from dietetics licensure a person who provides wellness and lifestyle recommendations, individualized nutritional guidance or counseling, or individualized food and diet assessment or education, so long as the person does not use the title "dietitian" or any other title indicating that the person is practicing dietetics.</p> <p data-bbox="1365 711 1661 735">Fiscal effect: Minimal.</p>	No provision.
MEDCD8 Operating Expenses			
No provision.	No provision.	No provision.	<p data-bbox="2013 813 2241 837">Section: 335.20</p> <p data-bbox="2013 862 2596 1122">Requires the Board to use up to \$5,000 in FY 2022 in DPF Fund 5C60 appropriation item 883609, Operating Expenses, to create a brochure or other educational materials regarding the right of conscience described above. Requires the Board to post any developed materials on its web site.</p>

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DOHCD52 Variances from written transfer agreements			
No provision.	No provision.	R.C. 3702.304, Section 291.80 Adds the following requirements to existing law governing variances from written transfer agreements for ambulatory surgical facilities (ASF):	R.C. 3702.304, Section 291.80 Same as the Senate.
(1) No provision.	(1) No provision.	(1) The local hospital at which the consulting physician has admitting privileges must be within a 25-mile radius of the ASF;	(1) Same as the Senate.
(2) No provision.	(2) No provision.	(2) The consulting physician cannot teach or provide instruction at a medical school, osteopathic medical school, any state hospital, or other public institution;	(2) No provision.
(3) No provision.	(3) No provision.	(3) The consulting physician cannot be employed by, compensated pursuant to a contract with, or otherwise provide instruction or consultation to, a medical school, osteopathic medical school, any state hospital, or other public institution;	(3) No provision.
(4) No provision.	(4) No provision.	(4) The consulting physician must actively practice clinical medicine within a 25-mile radius of the ASF; and	(4) Same as the Senate.
(5) No provision.	(5) No provision.	(5) An ASF with an existing variance must demonstrate compliance with the new requirements within 90 days of the provisions' effective date, or the variance is rescinded.	(5) Same as the Senate.
		Fiscal effect: ODH could experience costs to review variance applications.	Fiscal effect: Same as the Senate.

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JFSCD54 Streamlining County Level-Information Access Task Force			
No provision.	<p>Section: 751.10 Creates the Task Force on Streamlining County Level-Information Access to make recommendations on streamlining information access across information technology systems for county departments of job and family services, child support enforcement agencies, public children services agencies, and county OhioMeansJobs centers.</p>	<p>Section: 751.10 Same as the House.</p>	<p>Section: 751.10 Same as the House.</p>
No provision.	<p>Requires the Task Force to do all of the following:</p>	Same as the House.	Same as the House.
(1) No provision.	<p>(1) Identify barriers to efficient operations between information technology systems that affect both department and agency operations and client services.</p>	(1) Same as the House.	(1) Same as the House.
(2) No provision.	<p>(2) For each identified barrier, explore the feasibility of allowing county employee access to more than one information technology system.</p>	(2) Same as the House.	(2) Same as the House.
(3) No provision.	<p>(3) Prioritize which barriers should be addressed first.</p>	(3) Same as the House.	(3) Same as the House.
No provision.	<p>Provides for the appointment of Task Force's 16 members and establishes requirements for the first meeting, the provision of subject matter experts, and the submission of a report to the General Assembly.</p>	<p>Same as the House, but increases the membership to 21 members.</p>	Same as the Senate.

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Fiscal effect: Minimal.

Fiscal effect: Same as the House.

Fiscal effect: Same as the House.

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PRXCD1 Dispensing tobacco cessation drugs without a prescription			
R.C. 4729.42, 4731.90	R.C. 4729.42, 4731.90	R.C. 4729.42, 4731.90	R.C. 4729.42, 4731.90
(1) Permits a pharmacist or pharmacy intern to dispense tobacco cessation drugs without a prescription in accordance with a physician-established protocol that meets specified requirements and establishes recordkeeping and notice requirements.	(1) Same as the Executive.	(1) Same as Executive, but removes the authority for pharmacy interns to dispense the drugs, and limits the dispensing authority to nicotine replacement therapy, as opposed to all tobacco cessation drugs.	(1) Same as the Senate.
(2) Requires a pharmacist or pharmacy intern to provide notice to the individual's primary care provider within 30 days after a screening is conducted.	(2) Same as the Executive.	(2) Same as the Executive, but requires a pharmacist to notify an individual's primary care provider within 72-hours, as opposed to 30 days.	(2) Same as the Senate.
(3) Requires a pharmacy to keep records for an unspecified period of time.	(3) Same as the Executive	(3) Same as the Executive, but requires a pharmacy to keep records for three years	(3) Same as the Senate.
(4) No provision.	(4) No provision.	(4) Requires the individual to whom the nicotine replacement therapy is dispensed to be 18 years old or older.	(4) Same as the Senate.
(5) Requires the State Board of Pharmacy to adopt rules in consultation with the State Medical Board and the Department of Health regarding dispensing tobacco cessation drugs.	(5) Same as the Executive.	(5) Same as Executive.	(5) Same as Executive.
(6) No provision.	(6) No provision.	(6) Provides qualified immunity for physicians who authorize dispensing of nicotine replacement therapy in accordance with a protocol.	(6) Same as Senate.

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Fiscal effect: Potential increase in administrative expenses for the State Board of Pharmacy to promulgate rules and regulate additional pharmacist and pharmacy intern duties.

Fiscal effect: Same as the Executive.

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Fiscal effect: Same as the Executive.