



**Rules & Policies Agenda for Board Meeting  
August 14, 2024**

- A. Rule Review Update
- B. Dietetics Rules
- C. Legislative Update



**MEMORANDUM**

TO: Jonathan Feibel, M.D., President  
Members, State Medical Board of Ohio

FROM: Kimberly C. Anderson, Chief Legal Counsel

RE: Rule Review Update

DATE: August 8, 2024

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Attached please find the rule spreadsheet and rule schedule for August 2024.

**Requested Action: No action requested.**

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# Legal Dept. Rules Schedule

As of August 8, 2024

## **Rules Filed with JCARR-Public Hearing 8.29.24**

### **Office-Based Opioid Treatment Rules**

Chapter 4730-4

Chapter 4731-33

## **Rules Proposed for Approval to File with CSI**

### **Dietetics Rules**

4759-2-01      4759-5-03

4759-4-01      4759-5-04

4759-4-02      4759-5-05

4759-4-03      4759-5-06

4759-4-04      4759-6-01

4759-4-08      4759-6-02

4759-4-09      4759-6-03

4759-5-01      4759-9-01

4759-5-02

## **Rules Approved to File with CSI:**

### **Notice of Meetings**

4731-7-01

### **Recordation of Meetings**

4731-9-01

## **Termination of Physician-Patient Relationship**

4731-27-01

4731-27-02

4731-27-03

## **Return of Athlete to Practice of Competition**

4731-31-01

## **Standards for Prescribing Dangerous Drugs for Administration By Injection by a Pharmacist**

4731-34-01

## **Physician Assistant Rules**

4730-1-06      4730-2-04

4731-2-05      4731-2-10

## **Anesthesiologist Assistant Rules**

4731-24-01

4731-24-02

4731-24-03

## **Genetic Counselor Rules**

4778-1-01      4778-1-02

4778-1-03      4778-1-05

4778-1-06

## **Rules Approved for Initial Circulation:**

Respiratory Care Rules (Chapter 4761)

## **Criminal Records Checks**

4731-4-01

4731-4-02

Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4730-1-01	Regulation of Physician Assistants - Definitions		06/12/19	07/16/19	11/07/19	06/18/20	No change rule			09/16/20	06/18/25	
4730-1-05	Quality Assurance System		06/12/19	07/16/19	11/07/19	06/19/20	No change rule			09/17/20	06/19/25	
4730-1-06	Licensure as a physician assistant	04/01/24									03/28/24	Extension given for Review Date
4730-1-07	Miscellaneous Provisions	06/21/23	07/12/23	07/25/23	08/11/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	02/28/28	
4730-2-01	Physician Delegated Prescriptive Authority - Definitions		06/12/19	07/16/19	11/07/19	06/18/20	No change rule	01/30/23	02/08/23	02/28/23	02/28/28	
4730-2-04	Period of on-site supervision of physician-delegated prescriptive authority	04/01/24									11/15/23	
4730-2-05	Addition of valid prescriber number after initial licensure	04/01/24									09/30/23	
4730-2-07	Standards for Prescribing	02/12/22	05/11/22	05/16/22	09/22/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4730-2-10	Standards and Procedures for use of OARRS	04/01/24									03/28/24	Extension given for Review Date
4730-4-01	Definitions	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	
4730-4-02	Standards and procedures for withdrawal management for drug or alcohol addiction	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				10/31/25	
4730-4-03	Office Based Treatment for Opioid addiction	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	
4730-4-04	Medication assisted treatment using naltrexone	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	
4731-1-01	Limited Practitioners - Definition of Terms	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-1-02	Application of Rules Governing Limited Branches of Medicine or Surgery	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	07/31/24	
4731-1-03	General Prohibitions	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-1-04	Scope of Practice: Mechanotherapy	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-1-05	Scope of Practice: Massage Therapy	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	11/05/24	
4731-1-06	Scope of Practice: Naprapathy									08/31/18	08/31/23	
4731-1-07	Eligibility of Electrologists Licensed by the Ohio State Board of Cosmetology to Obtain Licensure as Cosmetic Therapists Pursuant to Chapter 4731 ORC and Subsequent Limitations	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded

Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4731-1-08	Continuing Cosmetic Therapy Education Requirements for Registration or Reinstatement of a License to Practice Cosmetic Therapy	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-09	Cosmetic Therapy Curriculum Requirements	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-10	Distance Education	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-11	Application and Certification for certificate to practice cosmetic therapy	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-12	Examination			09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-1-15	Determination of Standing of School, College or Institution	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-16	Massage Therapy curriculum rule (Five year review)	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-17	Instructional Staff	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-18	Grounds for Suspension, Revocation or Denial of Certificate of Good Standing, Hearing Rights	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-1-19	Probationary Status of a limited branch school	06/17/21		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-2-01	Public Notice of Rules Procedure	05/15/22			10/31/22	09/28/22				09/28/22	09/28/27	
4731-4-01	Criminal Records Checks - Definitions	03/04/24	04/10/24							09/30/19	09/30/24	
4731-4-02	Criminal Records Checks	03/04/24	04/10/24							09/30/19	09/30/24	
4731-5-01	Admission to Examinations	05/15/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-5-02	Examination Failure; Inspection and Regrading	05/15/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-5-03	Conduct During Examinations	05/15/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-5-04	Termination of Examinations	05/15/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-6-01	Medical or Osteopathic Licensure: Definitions				10/31/22					07/31/19	07/31/24	
4731-6-02	Preliminary Education for Medical and Osteopathic Licensure				10/31/22					07/31/19	07/31/24	
4731-6-04	Demonstration of proficiency in spoken English	05/15/22		09/22/22	10/31/22	11/14/22			no change	11/14/22	11/14/27	
4731-6-05	Format of Medical and Osteopathic Examination		09/08/21	09/24/21	10/27/21	10/29/21	12/03/21		01/12/22	01/31/22	01/31/27	
4731-6-14	Examination for physician licensure	09/03/20								07/31/19	07/31/24	
4731-6-15	Eligibility for Licensure of National Board Diplomats and Medical Council of Canada Licentiatees									07/31/19	07/31/24	
4731-6-21	Application Procedures for Certificate Issuance; Investigation; Notice of Hearing Rights									07/31/19	07/31/24	

Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4731-6-22	Abandonment and Withdrawal of Medical and Osteopathic Licensure Applications									07/31/19	07/31/24	
4731-6-30	Training Certificates									07/31/19	07/31/24	
4731-6-31	Limited Preexamination Registration and Limited Certification									07/31/19	07/31/24	
4731-6-33	Special Activity Certificates									07/31/19	07/31/24	
4731-6-34	Volunteer's Certificates									07/31/19	07/31/24	
4731-7-01	Method of Notice of Meetings	03/04/24	04/10/24							07/31/19	07/31/24	
4731-8-01	Personal Information Systems	04/29/20		10/05/20	11/18/20	02/11/21			no change	02/11/21	02/11/26	
4731-8-02	Definitions	04/29/20		10/05/20	11/18/20	02/11/21			no change	02/11/21	02/11/26	
4731-8-03	Procedures for accessing confidential personal information	04/29/20		10/05/20	11/18/20	02/11/21			no change	02/11/21	02/11/26	
4731-8-04	Valid reasons for accessing confidential personal information	04/29/20		10/05/20	11/18/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4731-8-05	Confidentiality Statutes	04/29/20		10/05/20	11/18/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4731-8-06	Restricting & Logging access to confidential personal information	04/29/20		10/05/20	11/18/20	02/11/21			no change	02/11/21	02/11/26	
4731-9-01	Record of Board Meetings; Recording, Filming, and Photographing of Meetings	03/04/24	04/10/24							09/15/19	06/17/24	
4731-10-01	Definitions	10/25/19		05/26/20		Revised filing 11/3/20 10/30/20	12/04/20	12/07/20	05/12/21	05/31/21	05/31/26	
4731-10-02	Requisite Hours of Continuing Medical Education for License Renewal or Reinstatement	10/25/19		05/26/20		Revised filing 11/3/20 10/30/20	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4731-10-03	CME Waiver	10/25/19		05/26/20		Revised filings 11/24 & 11/3 - orig 10/30/20	12/04/20	12/07/20	05/12/21	05/31/21	05/31/26	
4731-10-04	Continuing Medical Education Requirements for Restoration of a License	10/25/19		05/26/20		Revised filings 11/24 & 11/3 - orig 10/30/20	12/04/20	12/07/20	05/12/21	05/31/21	05/31/26	

Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4371-10-08	Evidence of Continuing Medical Education	10/25/19		05/26/20		Revised filings 11/24 & 11/3 - orig 10/30/20	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4731-11-01	Controlled substances; General Provisions Definitions	02/12/22								10/31/20	10/31/25	
4731-11-02	Controlled Substances - General Provisions	07/26/19	11/13/19	10/05/20		05/27/21			no change		05/27/26	
4731-11-03	Schedule II Controlled Substance Stimulants			09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-11-04	Controlled Substances: Utilization for Weight Reduction			09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-11-04.1	Controlled substances: Utilization for chronic weight management			09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	Rescinded	Rescinded
4731-11-07	Research Utilizing Controlled Substances	07/26/19	11/13/19	10/05/20		05/27/21			no change		05/27/26	
4731-11-08	Utilizing Controlled Substances for Self and Family Members	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21			no change		05/27/26	
4731-11-09	Controlled Substance and telehealth prescribing	02/12/22	05/11/22	05/16/22	09/22/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-11-11	Standards and procedures for review of "Ohio Automated Rx Reporting System" (OARRS).	07/26/19	11/13/19	10/05/20		05/27/21	06/28/21		09/08/21	09/30/21	09/30/26	
4731-11-13	Prescribing of Opioid Analgesics for Acute Pain									08/31/17	08/31/22	
4731-11-14	Prescribing for subacute and chronic pain	11/18/22				04/17/23	05/24/23	06/01/23			12/23/23	
4731-12-01	Preliminary Education for Licensure in Podiatric Medicine and Surgery	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-12-02	Standing of Colleges of Podiatric Surgery and Medicine	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/02/23	02/28/28	
4731-12-03	Eligibility for the Examination in Podiatric Surgery and Medicine	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-12-04	Eligibility of Licensure in Podiatric Medicine and Surgery by Endorsement from Another State	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-12-05	Application Procedures for Licensure in Podiatric Medicine and Surgery, Investigation, Notice of Hearing Rights.	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-12-06	Visiting Podiatric Faculty Certificates	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23		Rescinded
4731-12-07	Podiatric Training Certificates	04/18/22		09/22/22	10/31/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-13-01	Conduct of Hearings - Representative; Appearances	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	

Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4731-13-02	Filing Request for Hearing	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	No change				04/12/26	
4731-13-03	Authority and Duties of Hearing Examiners	08/26/20	10/14/20	amended filing 1/6/21 10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-04	Consolidation	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-05	Intervention	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-06	Continuance of Hearing	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-07	Motions	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-07.1	Form and page limitations for briefs and memoranda	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-08	Filing	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-09	Service	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-10	Computation and Extension of Time	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-11	Notice of Hearings	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-12	Transcripts	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-13	Subpoenas for Purposes of Hearing	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-14	Mileage Reimbursement and Witness Fees	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-15	Reports and Recommendations	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-16	Reinstatement or Restoration of Certificate	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-17	Settlements, Dismissals, and Voluntary Surrenders	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-18	Exchange of Documents and Witness Lists	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-20	Depositions in Lieu of Live Testimony and Transcripts in place of Prior Testimony	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-20.1	Electronic Testimony	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-21	Prior Action by the State Medical Board	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-22	Stipulation of Facts	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-23	Witnesses	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-24	Conviction of a Crime	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	



Rule Number	Rule Description	Sent for Initial Comment	Board Approval to File with CSI	CSI filing	CSI recommendation	JCARR filing	Rules Hearing	JCARR Hearing	Board Adoption	New Effective Date	Current Review Date	Notes
4731-13-25	Evidence	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-26	Broadcasting and Photographing Administrative Hearings	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-27	Sexual Misconduct Evidence	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-28	Supervision of Hearing Examiners	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-30	Prehearing Conference	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-31	Transcripts of Prior Testimony	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-32	Prior Statements of the Respondent	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-33	Physician's Desk Physician	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-13-34	Ex Parte Communication	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-35	Severability	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	no change				04/12/26	
4731-13-36	Disciplinary Actions	08/26/20	10/14/20	10/23/20	04/02/21	04/12/21	05/17/21	06/07/21	07/14/21	07/31/21	07/31/26	
4731-14-01	Pronouncement of Death	01/25/21	03/10/21	03/18/21		05/27/21	06/28/21		09/08/21	09/30/21	09/30/26	
4731-15-01	Licensee Reporting Requirement; Exceptions	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-15-02	Healthcare Facility Reporting Requirement	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-15-03	Malpractice Reporting Requirement	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-15-04	Professional Society Reporting	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-15-05	Liability; Reporting Forms; Confidentially and Disclosure	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-16-01	Rules governing impaired physicians and approval of treatments programs - Definitions	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-02	General Procedures in Impairment Cases	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-04	Other Violations	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-05	Examinations	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-06	Consent Agreements and Orders for Reinstatement of Impaired Practitioners	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-07	Treatment Provider Program Obligations	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-16-08	Criteria for Approval	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4731-16-09	Procedures for Approval	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-16-10	Aftercare Contracts	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	

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4731-16-11	Revocation, Suspension, or Denial of Certificate of Good Standing	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-12	Out-of-State Impairment Cases	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-13	Patient Consent; Revocation of Consent	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-14	Caffeine, Nicotine, and Over-The Counter Drugs	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-15	Patient Rights	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-17	Requirements for the one-bite program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28		
4731-16-18	Eligibility for the one-bite program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded		
4731-16-19	Monitoring organization for one-bite program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28		
4731-16-20	Treatment providers in the one-bite program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28		
4731-16-21	Continuing care for the one-bite program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/24	Rescinded		
4731-17-01	Exposure-Prone Invasive Procedure Precautions - Definitions	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26		
4731-17-02	Universal Precautions	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21			no change		02/11/26		
4731-17-03	Hand Washing	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21			no change		02/11/26		
4731-17-04	Disinfection and Sterilization	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26		
4731-17-05	Handling and Disposal of Sharps and Wastes	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26		
4731-17-06	Barrier Techniques	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21			no change		02/11/26		
4731-17-07	Violations	08/26/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26		
4731-18-01	Definitions			09/22/22	12/22/22	03/06/23	02/10/23	03/06/23	04/12/23	04/30/23	04/30/28		
4731-18-02	Use of Light Based Medical Devices			09/22/22	12/22/22	03/06/23	02/10/23	03/06/23	04/12/23	04/30/23	04/30/28		
4731-18-03	Delegation of the Use of Light Based Medical Devices			09/22/22	12/22/22	03/06/23	02/10/23	03/06/23	04/12/23	04/30/23	04/30/28		
4731-18-04	Delegation of phototherapy and photodynamic therapy	01/10/18	01/20/20	05/12/20	04/05/21	04/09/21	refiled 6-9-21 5/17/2021		06/25/21	07/14/21	07/31/21	07/31/26	
4731-20-01	Surgery Privileges of Podiatrist - Definition of Foot	10/16/23	11/08/23	11/09/23		01/23/24		04/15/24			01/23/29		
4731-20-02	Surgery: Ankle Joint	10/16/23	11/08/23	11/09/23		01/23/24		04/15/24			01/23/29		
4731-22-01	Retired License Status	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	02/29/24	02/28/29		
4731-22-02	Application	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded			
4731-22-03	Status of Registrant	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded			

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4731-22-04	Continuing Education Requirements	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded		
4731-22-06	Renewal of Cycle of Fees	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded		
4731-22-07	Change to Active Status	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded		
4731-22-08	Cancellation of or Refusal to Issue an Emeritus Registration	09/15/23	10/11/23	11/02/23	11/27/23	11/28/23	01/04/24	01/08/24	02/14/24	rescinded		
4731-23-01	Delegation of Medical Tasks - Definitions	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21			no change		05/27/26	
4731-23-02	Delegation of Medical Tasks	01/25/21	03/10/21	03/18/21	04/23/21	refiled 7/14/21 5/27/2021	06/28/21		09/08/21	09/30/21	09/30/26	
4731-23-03	Delegation of Medical Tasks: Prohibitions	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21			no change		05/27/26	
4731-23-04	Violations	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21			no change		05/27/26	
4731-24-01	Anesthesiologist Assistants - Definitions	04/01/24									07/31/24	
4731-24-02	Anesthesiologist Assistants; Supervision	04/01/24									07/31/24	
4731-24-03	Anesthesiologist Assistants; Enhanced Supervision	04/01/24									07/31/24	
4731-25-01	Office-Based Surgery - Definition of Terms	06/16/23									03/01/23	
4731-25-02	General Provisions	06/16/23	01/10/24	01/19/24	02/15/24	02/16/24	03/27/24	04/15/24		05/18/24	05/18/29	
4731-25-03	Standards for Surgery Using Moderate Sedation/Analgesia	06/16/23								05/31/18	08/31/23	
4731-25-04	Standards for Surgery Using Anesthesia Services	06/16/23								05/31/18	05/31/23	
4731-25-05	Liposuction in the Office Setting	06/16/23								03/01/18	03/01/23	
4731-25-07	Accreditation of Office Settings	06/16/23								05/31/18	05/31/23	
4731-25-08	Standards for Surgery	06/16/23								09/30/19	09/30/24	
4731-26-01	Sexual Misconduct - Definitions	01/25/21	03/10/21	03/18/21	04/23/21	refiled 7/14/21 5/27/2021	06/28/21		09/08/21	09/30/21	09/30/26	
4731-26-02	Prohibitions	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21	06/28/21		09/08/21	09/30/21	09/30/26	
4731-26-03	Violations; Miscellaneous	01/25/21	03/10/21	03/18/21	04/23/21	05/27/21	06/28/21		09/08/21	09/30/21	09/30/26	
4731-27-01	Definitions	03/04/24								02/04/19	02/02/24	
4731-27-02	Dismissing a patient from the medical practice	03/04/24								05/31/19	05/31/24	
4731-27-03	Notice of termination of physician employment or physician leaving a practice, selling a practice, or retiring from the practice of medicine	03/04/24								05/31/19	05/31/24	see comments for future folder

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4731-28-01	Mental or Physical Impairment	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-28-02	Eligibility for confidential monitoring program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-28-03	Participation in the confidential monitoring program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-28-04	Disqualification from continued participation in the confidential monitoring program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-28-05	Termination of the participation agreement for the confidential monitoring program	07/28/23	08/09/23	08/11/23	08/31/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	Rescinded	
4731-29-01	Standards and procedures for operation of a pain management clinic.									06/30/17	06/30/22	
4731-30-01	Internal Management Definitions									09/23/18	09/23/23	
4731-30-02	Internal Management Board Metrics	07/26/19								09/23/18	09/23/23	
4731-30-03	Approval of Licensure Applications	08/28/23							10/11/23	10/31/23	10/17/24	
4731-30-04	Maintenance of List of Disqualifying Criminal Offenses	08/13/21				refiled 11-4-21			09/08/21	12/31/21	12/31/26	
4731-31-01	Requirements for assessing and granting clearance for return to practice or competition. (concussion rule)	03/04/24	04/10/24							11/30/19	11/30/24	
4731-32-01	Definition of Terms	02/09/23	03/08/23	03/30/23	08/31/23	11/28/23	01/04/24	01/08/24	02/14/24	02/29/24	02/28/29	
4731-32-02	Certificate to Recommend Medical Marijuana	02/09/23	03/08/23	03/30/23	08/31/23	11/28/23	01/04/24	01/08/24	02/14/24	02/29/24	02/28/29	
4731-32-03	Standard of Care	02/09/23	03/08/23	03/30/23	08/31/23	11/28/23	01/04/24	01/08/24	02/14/24	02/29/24	02/28/29	
4731-32-04	Suspension and Revocation of Certificate to Recommend	02/09/23	03/08/23	03/30/23	08/31/23	11/28/23	No change rule	01/08/24	N/A	02/27/24	11/28/28	
4731-32-05	Petition to Request Additional Qualifying Condition or Disease	02/09/23	03/08/23	03/30/23	08/31/23	11/28/23	No change rule	01/08/24	N/A	02/27/24	11/28/28	
4731-33-01	Definitions	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	
4731-33-02	Standards and procedures for withdrawal management for drug or alcohol addiction	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				10/31/25	
4731-33-03	Office-Based Treatment for Opioid Addiction	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	
4731-33-04	Medication Assisted Treatment Using Naltrexone	09/15/23	03/13/24	04/04/24	07/15/24	07/25/24	08/29/24				04/30/24	

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4731-34-01	Standards and Procedures to be followed by physicians when prescribing a dangerous drug that may be administered by a pharmacist by injection.	03/04/24	04/10/24							07/31/19	07/31/24	
4731-35-01	Consult Agreements	01/25/21	04/14/21	04/26/21	06/04/21	09/22/21	10/29/21	11/08/21	12/08/21	12/31/21	10/31/25	
4731-35-02	Standards for managing drug therapy	01/25/21	04/14/21	04/26/21	06/04/21	09/22/21	10/29/21	11/08/21	12/08/21	12/31/21	10/31/25	
4731-36-01	Military provisions related to education and experience requirements for licensure	06/17/21	09/08/21	09/24/21	10/27/21	10/29/21	12/03/21		01/12/22	01/31/22	10/29/21	and 1/31/27
4731-36-02	Military provisions related to renewal of license and continuing education	03/22/19	06/12/19	12/05/19	09/11/20	09/25/20	10/27/20	11/16/20	12/09/20	12/31/20	12/31/25	
4731-36-03	Processing applications from service members, veterans, or spouses of service members or veterans.	03/22/19	06/12/19	12/05/19	09/11/20	09/25/20	10/27/20	11/16/20	12/09/20	12/31/20	12/31/25	
4731-36-04	Temporary license for military spouse	02/11/20	02/12/20	02/14/20		02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4731-37-01	Telehealth	02/12/22	05/11/22	05/16/22	09/22/22	11/29/22	01/04/23	01/30/23	02/08/23	02/28/23	02/28/28	
4731-38-01	Licenses Issued or Renewed Under the Interstate Medical Licensure Compact	11/12/21	01/12/22	01/14/22	02/14/22	02/18/22	03/25/22		05/11/22	05/31/22	05/31/27	
4731-38-02	Issuance of Licenses to Out-of-State Licensees or Certificate Holders	06/21/23	07/12/23	07/25/23	08/11/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4759-2-01	Definitions	03/04/24								11/30/19	11/30/24	
4759-4-01	Applications	03/04/24								11/30/19	11/30/24	
4759-4-02	Preprofessional experience	03/04/24									08/28/24	
4759-4-03	Examination	03/04/24								11/30/19	11/30/24	
4759-4-04	Continuing Education	03/04/24								07/31/21	07/31/26	
4759-4-08	Limited permit	03/04/24								07/31/21	07/31/26	
4759-4-09	License certificates and permits	03/04/24								11/30/19	11/30/24	
4759-5-01	Supervision of persons claiming exemption	03/04/24								08/28/19	08/28/24	
4759-5-02	Student practice exemption	03/04/24								11/30/19	11/30/24	
4759-5-03	Plan of treatment exemption	03/04/24								11/30/19	11/30/24	
4759-5-04	Additional nutritional activities exemption	03/04/24									07/01/24	
4759-5-05	Distribution of literature exemption	03/04/24									07/01/24	
4759-5-06	Weight control program exemption	03/04/24									07/01/24	
4759-6-01	Standards of practice innutrition care	03/04/24								11/30/19	11/30/24	
4759-6-02	Standards of professional performance	03/04/24								07/31/21	07/31/26	
4759-6-03	Interpretation of standards	03/04/24								11/30/19	11/30/24	
4759-9-01	Severability	03/04/24								11/30/19	11/30/24	
4759-11-01	Miscellaneous Provisions	06/21/23	07/12/23	07/25/23	08/11/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4761-2-03	Board Records									02/28/19	02/28/24	
4761-3-01	Definition of terms									02/28/19	02/28/24	
4761-4-01	Approval of educational programs									02/28/19	02/28/24	

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4761-4-02	Monitoring of Ohio respiratory care educational programs									02/28/19	02/28/24	
4761-5-01	Waiver of licensing requirements pursuant to division (B) of section 4761.04 or the Revised Code	04/23/19	06/12/19	11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	09/30/25	
4761-5-02	Admission to the Ohio credentialing examination	04/23/19	06/12/19	11/06/19	01/10/20	06/19/20	No change rule			09/19/20	06/19/25	
4761-5-04	License application procedure	04/23/19	06/12/19	11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	09/30/25	
4761-5-06	Respiratory care practice by polysomnographic technologists	04/23/19	06/12/19	11/06/19	01/10/20	06/18/20	No change rule			09/18/20	06/18/25	
4761-6-01	Limited permit application procedure	04/23/19	06/12/19	11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	02/28/24	
4761-7-01	Original license or permit, identification card or electronic license verification									02/28/19	02/28/24	
4761-7-03	Scope of respiratory care defined										11/15/23	
4761-7-04	Supervision			11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	09/30/25	
4761-7-05	Administration of medicines										11/15/23	
4761-8-01	Renewal of license or permits	03/22/19	06/12/19	12/05/19	09/11/20	09/25/20	10/27/20	11/16/20	12/09/20	12/31/20	12/31/25	
4761-9-01	Definition of respiratory care continuing education			11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	02/28/24	
4761-9-02	General RCCE requirements and reporting mechanism	03/22/19	06/12/19	12/05/19	09/11/20	09/25/20	10/27/20	11/16/20	12/09/20	12/31/20	12/31/25	
4761-9-03	Activities which do not meet the Ohio RCCE requirements									02/28/19	02/28/24	
4761-9-04	Ohio respiratory care law and professional ethics course criteria			11/06/19	01/10/20	Refiled 8/24/20 6/18/2020	9/24/20 7/23/2020	08/17/20	11/10/20		02/28/24	Look at adding OOA as an approving organization
4761-9-05	Approved sources of RCCE			11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	02/28/24	Look at adding OOA as an approving organization
4761-9-07	Auditing for compliance with RCCE requirements			11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	09/30/25	
4761-10-01	Ethical and professional conduct									02/28/19	02/28/24	
4761-10-02	Proper use of credentials										11/15/23	
4761-10-03	Providing information to the Board	04/23/19	06/12/19	11/06/19	01/10/20	06/18/20	07/23/20	08/17/20	09/09/20	09/30/20	09/30/25	
4761-15-01	Miscellaneous Provisions	06/21/23	07/12/23	07/25/23	08/11/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4774-1-01	Definitions	04/29/20	10/14/20	10/23/20	11/24/20	02/11/21			no change	02/11/21	02/11/26	
4774-1-02	Application for Certificate to Practice	04/29/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4774-1-03	Renewal of Certificate to Practice	04/29/20	10/14/20	10/23/20	11/24/20	02/11/21	03/15/21	03/29/21	05/12/21	05/31/21	05/31/26	
4774-1-04	Miscellaneous Provisions	06/21/23	07/12/23	07/25/23	08/11/23	08/31/23	10/04/23	10/30/23	11/08/23	11/30/23	11/30/28	
4778-1-01	Definition	04/01/24									01/24/24	





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**MEMORANDUM**

TO: Jonathan Feibel, M.D., President  
Members, State Medical Board of Ohio

FROM: Kimberly C. Anderson, Chief Legal Counsel

RE: Five-Year Rule Review-Chapter 4759, Dietetics

DATE: August 8, 2024

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The rules were circulated for initial comment with a deadline of March 20, 2024. Two comments were received, which are attached for your review. Karen Charvat of the Ohio Department of Health commented that there was a typographical error in Rule 4759-2-01(A)(7), which has been corrected. Pat McKnight of the Ohio Academy of Nutrition and Dietetics expressed support for the proposed rules.

After review of the rules, some technical amendments to Rules 4759-2-01, 4759-6-01, 4759-6-02, and 4759-6-03 are proposed to ensure that the scope of practice permitted by the rules does not exceed the statutory authority. On June 28, 2024, Nate Smith, Austin Lucous, and I met with Kay Mavko of the Ohio Academy of Nutrition and Dietetics to discuss the amendments. Kay provided additional comments on July 3, 2024, which are attached for your review.

<b>4759-2-01</b>	<b>Definitions-Proposed to Amend</b>
<b>4759-4-01</b>	<b>Applications-No Change</b>
<b>4759-4-02</b>	<b>Preprofessional Experience-Proposed to Amend</b>
<b>4759-4-03</b>	<b>Examination-No Change</b>
<b>4759-4-04</b>	<b>Continuing Education-No Change</b>
<b>4759-4-08</b>	<b>Limited Permit-No Change</b>
<b>4759-4-09</b>	<b>License Certificates and Permits-No Change</b>
<b>4759-5-01</b>	<b>Supervision of Persons Claiming Exemption-Proposed to Amend</b>
<b>4759-5-02</b>	<b>Student Practice Exemption-No Change</b>
<b>4759-5-03</b>	<b>Plan of Treatment Exemption-No Change</b>
<b>4759-5-04</b>	<b>Additional Nutritional Activities Exemption-Proposed to Amend</b>
<b>4759-5-05</b>	<b>Distribution of Literature Exemption-No Change</b>

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4759-5-06	<b>Weight Control Program Exemption-No Change</b>
4759-6-01	<b>Standards of Practice in Nutrition Care-Proposed to Amend</b>
4759-6-02	<b>Standards of Professional Performance-Proposed to Amend</b>
4759-6-03	<b>Interpretation of Standards-Proposed to Amend</b>
4759-9-01	<b>Severability-No Change</b>

The additional changes are outlined in the proposed rules, and set forth below, with the new proposed language in bold and underlined..

#### **4759-2-01 Definitions**

The following meanings apply to all rules promulgated by the state medical board of Ohio, unless a specific paragraph explicitly defines or uses the word or term in a different manner **subject to the laws of Chapter 4759 of the Revised Code, including section 4759.01 of the Revised Code defining the practice of dietetics.**

(I) "Medical nutrition therapy" means the evidence-based application of the nutrition care and process and use of specific nutrition services to treat, or rehabilitate an illness, injury, or condition. Medical nutrition therapy includes nutrition assessment, re-assessment, nutrition diagnosis, nutrition, intervention, nutrition monitoring and evaluation **within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.** ~~education, and counseling.~~

#### **4759-6-01 Standards of practice in nutrition care.**

The standards of practice in nutrition care provide a common understanding about the profession's minimum expectations for practice, and form a basis for self-evaluation and improvement and an expectation about nutritional care and service delivery. The standards of practice in nutrition care are comprised of four standards representing the four steps of the nutrition care process.

The "nutrition care process" is a systematic problem-solving method that dietitians may use to critically think and make decisions when providing medical nutrition therapy or to address nutrition related problems and provide safe, effective, high quality nutrition care **within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.**

The nutrition care process shall consist of four distinct, but interrelated steps including nutrition assessment, nutrition diagnosis, nutrition intervention and nutrition monitoring and evaluation

...

(B) The licensee determines a nutrition diagnosis to identify and label specific nutrition problem(s) that the dietitian is responsible for treating. (1) "Nutrition diagnosis" is the identification and labeling that describes an actual occurrence, risk of, or potential for developing, a nutritional problem that dietetics practitioners are responsible for treating independently **within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.**

...

(C) **Within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code,** ~~The~~ **the** licensee utilizes nutrition intervention as the third step in the nutrition care process to identify and implement appropriate, purposefully planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition or aspect of health status for an individual, target group, or the community at large.

(4) The licensee performs the interventions or **assigns, recommends, or refers** the nutrition care that other competent practitioners may provide in accordance with federal, state and local laws and regulations.

(D)(5): Ensures communication of nutrition plan of care and transfer of nutrition-related data between care settings as needed including acute care, home healthcare, ambulatory care, community care, and long term care facility.

#### **4759-6-02 Standards of professional performance.**

**Subject to the laws in Chapter 4759 of the Revised Code, every** ~~Every~~ licensee shall comply with the following standards of professional performance consistent with the June 1, 2018 "Code of Ethics for the Nutrition and Dietetics Profession" and "2024 Scope and Standards of Practice for the Registered Dietitian Nutritionist" adopted by the academy of nutrition and dietetics which are ~~is~~ available from the website of the state medical board at the following link: <https://med.ohio.gov>.

(B)(2): The licensee shall make evidence-based practice decisions, taking into account the unique values and circumstances of the patient or client and community, in combination with the licensee's expertise and judgment, and assure that sufficient information is available to enable a client to establish mutual goals and make informed decisions.

(C)(5): ~~The licensee recognizes the value of health equity in all forms of interaction when delivery, care or services to colleagues, customers, students and interns and when contracting with stake holders.~~

(D)(2): The licensee shall recognize the limits of that licensee's qualifications and collaborate with an interprofessional team to facilitate referrals when ~~individual~~ client needs exceed the licensee's scope of practice. ~~seek counsel or make referrals as appropriate.~~

(H): Utilization and management of resources.

The licensee shall ~~provide quality services~~ use resources effectively and efficiently.

The licensee shall use a systematic approach to identify, monitor, analyze and justify the use of time, money, facilities, staff and other resources while considering safety, effectiveness and cost in planning and delivering interventions.

(N): Professional conduct.

(1) The licensee shall conduct all practices with honesty, integrity, and fairness; ~~and~~

(2) The licensee shall make and fulfill professional commitments in good faith; ~~and~~

- (3) The licensee shall inform the public and colleagues of services by use of factual information.; and
- (4) The licensee shall make reasonable efforts to avoid bias in professional evaluation.

**4759-6-03 Interpretation of standards.**

**The standards in the chapter shall be interpreted in a manner consistent with the laws in Chapter 4759 of the Revised Code. Subject to the requirements of these laws, the** ~~The~~ standards in this chapter are interpreted in a manner consistent with the "Revised ~~2017~~ 2024 Scope and Standards of Practice ~~in Nutrition Care and Standards of Professional Performance~~ for the Registered Dietitian Nutritionists" adopted by ~~the academy of nutrition and dietetics~~, "The Academy of Nutrition and Dietetics", which is available from the website of the state medical board at the following link: <https://www.med.ohio.gov>.

**Requested Action: Approve filing rules, as amended with Common Sense Initiative.**

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4759-2-01

## Definitions.

The following meanings apply to all rules promulgated by the state medical board of Ohio, unless a specific paragraph explicitly defines or uses the word or term in a different manner subject to the laws of Chapter 4759 of the Revised Code, including section 4759.01 of the Revised Code defining the practice of dietetics.

(A) "~~Nutritional~~ Nutrition assessment" means the ~~integrative evaluation of nutritionally relevant data~~ systematic approach for collecting, classifying, and synthesizing relevant data to develop an individualized nutritional care plan. These data may include:

- (1) Nutrient intake;
- (2) Anthropometric measurements;
- (3) Biochemical values;
- (4) Physical and metabolic parameters;
- (5) Socio-economic factors;
- (6) Current medical diagnosis and medications; and
- (7) Pathophysiological processes.

The mere collection of these data for use in assessment is not nutritional assessment and does not require a dietitian licensed under section 4759.06 of the Revised Code. Nutrition assessment is an on-going dynamic process and includes re-assessment, analysis of client or community needs and provides the foundation for nutrition diagnosis and nutritional recommendations including enteral and parenteral nutrition.

(B) "Nutritional counseling" means the advising of individuals or groups regarding nutritional intake by integrating information from the nutritional assessment with information on food and other sources of nutrients and meal preparation consistent with cultural background and socioeconomic status.

The distribution by an individual of written information prepared by a licensee is not nutritional counseling, and any person distributing the written information need not be licensed under section 4759.06 of the Revised Code.

(C) "Nutritional education" means a planned program based on learning objectives with expected outcomes designed to modify nutrition-related behaviors. This does not

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prohibit an [unlicensed](#) individual from providing general non-medical nutrition information [as defined in paragraph \(M\) of rule 4759-2-01 of the Administrative Code](#) if the person does not violate division (B) of section 4759.02 of the Revised Code.

- (D) "Nutritional care standards" means policies and procedures pertaining to the provision of nutritional care in institutional and community settings.
- (E) "Nutritional care" means the application of the science of nutrition in the health and disease of people.
- (F) "Board" means the state medical board of Ohio.
- (G) "Commission" means "The Commission on Dietetic Registration."
- (H) "The Academy" means "The Academy of Nutrition and Dietetics."
- (I) "Medical nutrition therapy" means the [evidence-based application of the nutrition care and process and](#) use of specific nutrition services to treat, or rehabilitate an illness, injury, or condition. Medical nutrition therapy includes nutrition assessment, [re-assessment, nutrition diagnosis, nutrition, intervention, nutrition monitoring and evaluation within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.](#) ~~education, and counseling.~~
- (J) "Council on postsecondary accreditation" is synonymous with [its successors the "Commission on recognition of post-secondary accreditation." and the "Council for higher education accreditation \("CHEA"\)."](#)
- (K) For purposes of division (B)(2) of section 4759.02 of the Revised Code, the terms "Nutritionist," "Nutrition counselor" and like terms tend to indicate the person is practicing dietetics.
- (L) "High nutritional risk" means, but is not limited to, an individual to whom one or more of the following apply:
- (1) Has a diagnosis of or presence of risk factors for malnutrition, dehydration, anemia, malabsorption disorders, vitamin and mineral deficiencies;
  - (2) Receives enteral or parenteral nutrition;
  - (3) Has pressure ulcer(s), open wounds(s), or non-healing wound(s);

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- (4) Significantly low albumin or hemoglobin levels, or elevated blood urea nitrogen and electrolyte imbalances;
- (5) Severe chewing or swallowing problems;
- (6) Consistently poor food/fluid intakes;
- (7) Individuals who are less than ninety per cent of standard weight for height, or who exhibit significant weight changes as defined by accepted practice guidelines;
- (8) Decreased activities of daily living (ADL);
- (9) Decreased cognitive ability;
- (10) A pregnant female who was fifteen years of age or less at the time of conception;
- (11) Infants who are small for gestational age, or a pre-term infant of low birth weight.

(M) "General non-medical nutrition information" means information on the following:

- (1) Principles of good nutrition and food preparation;
- (2) Food to be included in the normal daily diet;
- (3) The essential nutrients needed by the body;
- (4) Recommended amounts of the essential nutrients;
- (5) The actions of nutrients on the body;
- (6) The effects of deficiencies or excesses of nutrients; or
- (7) Food and supplements that are good sources of essential nutrients.

(N) [“Accreditation Council for Education in Nutrition and Dietetics \(“ACEND”\)” of the Academy of Nutrition and Dietetics is the accrediting agency for didactic education](#)

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and preprofessional experience programs that prepare students for careers as dietitians. Dietetics education programs voluntarily apply to the ACEND for program accreditation by submitting applications demonstrating compliance with the accreditation standards.

4759-4-01

**Applications.**

- (A) Each applicant for initial licensure or renewal of a license or limited permit shall submit to the board an application which demonstrates compliance with sections 4759.05 and 4759.06 of the Revised Code and this chapter. This application shall be submitted under oath in the manner determined by the board, and provide such other facts and materials as the board requires. No application shall be considered submitted to the board until the appropriate fee has been received by the board. Application fees are not refundable.
- (B) No application for a license or permit submitted to the board shall be considered complete until the applicant has complied with the requirements of rule 4731-4-02 of the Administrative Code and the board has received the results of the criminal records checks.
- (C) If an applicant fails to complete the application process within six months of initial application filing, the board may notify the applicant in writing of its intention to consider the application abandoned. If no response to that notice is received by the board within thirty days, the board shall consider the application as abandoned and no further processing shall be undertaken with respect to that application.
- (D) Each applicant who is not a registered dietitian (RD) must forward an academic transcript from all degree granting institutions of higher education directly to the board or submit an official "student issued" copy.
- (E) For the purpose of proving accreditation of a course of study at a foreign institution, an applicant shall have the applicant's academic credentials independently validated as equivalent by an accreditation agency that is recognized by the "Council for Higher Education Accreditation," or its predecessors, or have the applicant's academic credentials independently validated by an agency specializing in education evaluations which is acceptable to the board. A copy of the validation shall be attached to the application as part of the application.
- (F) A licensee shall notify the board of a change of address providing at least a new address, telephone number, and signed request for the change. A licensee shall notify the board of a change of name by providing legal evidence of the name change and a signed request for the change.
- (G) All applications, statements and documents submitted shall become the property of the board. No application being investigated under section 4759.07 of the Revised Code, may be withdrawn without approval of the board.



4759-4-02

**Preprofessional experience.**

(A) An applicant shall successfully complete a preprofessional practice dietetic experience in dietetics that is accredited ~~approved~~ by the Accreditation Council for Education in Nutrition and Dietetics ("ACEND") of "The Academy of Nutrition and Dietetics" and is at least equivalent to the requirement for such programs adopted by "The Commission On Dietetic Registration."

(B) Doctoral degree alternative.

As an alternative to the requirements in paragraph (A) of this rule, the holder of a doctoral degree may meet the preprofessional dietetic experience requirement by successfully completing a planned program of continuous experience in dietetic practice of not less than ~~nine hundred~~ one thousand hours under the supervision of a licensed dietitian in this state or a registered dietitian provided all the following conditions are satisfied:

- (1) The applicant holds the doctoral degree from an accredited institution;
- (2) The applicant has, as part of successfully completing either a baccalaureate or higher degree from an accredited institution, a major in any of the following subjects: human nutrition, food and nutrition, dietetics, food systems management, or public health nutrition;
- (3) The applicant has submitted the program to the board for its approval and received approval prior to engaging in the planned program;
- (4) The experience meets requirements that are at least equivalent to the requirements adopted by "The Commission On Dietetic Registration"; and
- (5) Following completion of the program, the applicant shall submit a certificate of completion signed by the dietitian who supervised the program.

For purposes of this paragraph, an "accredited institution" is either: an institution accredited to grant the degree described in this paragraph by an accrediting agency that is recognized by the "Council for Higher Education Accreditation" or its predecessors; or an institution in a foreign country when the applicant presents evidence that the doctoral degree has been validated as equivalent to a degree under this paragraph by an institution accredited for such degrees in accordance with this paragraph or; by an agency specializing in educational credential evaluations which is acceptable to the board.

4759-4-03

**Examination.**

- (A) As a prerequisite to the issuance of an initial license, the applicant shall provide evidence of passing the examination designated in paragraph (B) of this rule.
  
- (B) The board selects and approves of the examination for dietitians offered by "The Commission On Dietetic Registration."

4759-4-04

**Continuing education.**

(A) An applicant for renewal or restoration of a license shall demonstrate compliance with the continuing education/professional development requirements of this rule.

(B) An applicant for license renewal or restoration shall:

(1) If licensee is a registered dietitian, certify completion of the continuing education required to hold current registration with the commission on dietetic registration, and complete one hour of ethics or laws, rules, and regulations governing the practice of dietetics in the two-year renewal period. These continuing education hours shall be from activities approved by the commission on dietetic registration, academy of nutrition and dietetics, or the Ohio academy of nutrition and dietetics; or

(2) If licensee is not a registered dietitian, certify the completion of thirty hours of continuing education completed during the two-year renewal period. At least one hour in each renewal period shall relate to ethics or laws, rules, and regulations governing the practice of dietetics. These continuing education hours shall be from activities approved by the commission on dietetic registration, academy of nutrition and dietetics, or the Ohio academy of nutrition and dietetics.

In addition for each biennial renewal period, a licensee that is not a registered dietitian shall use and document a learning process for that renewal period that is consistent with the commission on dietetic registration. Specifically, the licensee that is not a registered dietitian shall document the following: self-reflection on competencies and learning needs, development of a learning plan with goals to maintain and improve on existing competencies and/or develop competencies in new areas or areas of learning deficiency; and progress on the learning plan documented through successful completion of activities in the areas specified in the learning plan. This learning plan must be documented and available to the board upon request pursuant to the audit and disciplinary provisions of divisions (E) and (F) of section 4759.06 of the Revised Code.

(C) All licensees are subject to the audit and disciplinary provisions of divisions (E) and (F) of section 4759.06 of the Revised Code for failure to comply with this rule. Licensees are responsible for retaining records of completion of the continuing education hours required.

4759-4-08

**Limited permit.**

- (A) The board may grant a limited permit to a person who has completed the education and preprofessional requirements for licensure upon the following conditions:
- (1) The person has filed a completed application for a limited permit and paid the appropriate fee;
  - (2) The application contains any required statements or transcripts verifying completion of the academic and preprofessional requirements in order to qualify to take the examination for licensure; and
  - (3) The applicant indicates intent to take the examination for licensure within six months of the issuance of the limited permit.
- (B) The permit shall expire if the permit holder fails to take the examination in a timely manner or fails the examination twice.
- (C) Limited permits shall expire six months after the date of issuance.
- (D) A limited permit may be renewed once.
- (E) A limited permit holder who fails the examination must report the results to the board office immediately.
- (1) The first time the limited permit holder fails, the limited permit holder shall practice only under the direct supervision of an Ohio licensed dietitian.
  - (2) The second time the limited permit holder fails, the limited permit expires immediately.
- (F) A limited permit shall not be issued to a person who has failed the examination two or more times.
- (G) The licensed dietitian who provides direct supervision of a person who has failed the examination and holds a limited permit shall provide sufficient guidance and direction to enable the person to perform competently and to protect the public.
- (1) The licensed dietitian shall document a supervision plan for the limited permit holder to include specific goals and strategies for assuring competent entry level practice. The supervising dietitian shall periodically document the limited permit holder's progress. Documentation shall include, but is not

limited to, dates of conferences, supervisory notes, written evaluations and recommendations. Documentation should be maintained in the licensed dietitian's records and be available upon request of the board.

- (2) Direct supervision means that the licensee providing the supervision needs to be readily available by telecommunication, or in person and the licensee must review the work of the supervisee at least every seven days. When reviewing the work of a supervisee, the licensee shall comply with standards for professional responsibility and practice set forth in Chapter 4759-6 of the Administrative Code.
  
- (H) It is the licensed dietitian's responsibility to supervise the limited permit holder and to adequately document that supervision. Failure to do so shall be considered a violation of the minimal standards of care for the licensed dietitian and may result in discipline of the licensed dietitian by the state medical board.

4759-4-09

**License certificates and permits.**

- (A) The board shall prepare and provide to each new licensee and limited permit holder a certificate signed by the board's president and secretary, and attested by its seal.
- (B) Neither the holder nor anyone else shall make any alteration on a certificate issued by the board.
- (C) Official verification letters will be issued by the board upon request only and with payment of the license verification fee specified in section 4759.08 of the Revised Code. Electronic verification of license or limited permit status shall be considered a primary source verification and shall be made available by the board.

4759-5-01

**Supervision of persons claiming exemption.**

For the purposes of the supervision requirement contained in divisions (B) and (E) of section 4759.10 of the Revised Code the dietitian who provides supervision shall be responsible for the supervision of the person claiming exemption from licensure as a dietetic technician, or dietetic technician registered, or nutrition associate and shall provide sufficient guidance and direction as to enable the person to perform competently. These individuals have completed at least a two-year associates degree or higher from a program in dietetic technology or dietetics that has been ~~approved~~accredited by the ~~commission on accreditation~~"Accreditation Council for Education in Nutrition and dietetics Dietetics education" of the "Academy of Nutrition and Dietetics." Dietetic technicians registered have also passed the national written examination administered by the commission on dietetic registration and maintain professional development / continuing education requirements for on-going registration.

The licensed dietitian is responsible and accountable for the nutrition care of patients / clients in all healthcare settings and must answer to patients, employers, licensure boards and the legal system if care is compromised.

The licensee shall not delegate the nutrition care process, but may assign tasks within the process to competent exempt practitioners for the purpose of providing the licensee with needed information and communicating with and educating patients / clients.

When supervising a person claiming exemption the licensee shall:

- (A) Verify the credentials and competence of each individual exempt practitioner being supervised in the areas of dietetic practice as defined in section 4759.10 of the Revised Code. Those exempt practitioners who are competent to practice beyond minimum standards should be expected to demonstrate initial and on-going competence annually with documentation of successful audits.

The supervising dietitian can establish initial and on-going competency by individual means including but not limited to testing, evaluations, use of decision tree models and peer competency assessment. Engaging in on-going dietetics related continuing education is vital to competent practice.

- (B) Provide the person being supervised with guidelines for appropriate assignments as part of the nutritional care process;
- (C) Periodically establish performance criteria for the exempt practitioner, then assign tasks appropriately, direct and monitor the individual's practice. The supervising dietitian should compare actual performance with expected performance, document results and take appropriate action;
- (D) Maintain written documentation of the initial and on-going competency assessment of the exempt practitioner, supervision being provided and performance of the

individual, including participation in professional development / continuing education equivalent to the requirements of the commission on dietetic registration for dietetic technicians registered.

Documentation shall include, but is not limited to, dates of conferences, supervisory anecdotal notes, written evaluations and recommendations. Documentation should be maintained in the licensee's records and be available upon request of the board.

- (E) The licensee shall provide supervision in a manner that protects the public. Direct supervision may be provided on-site, or supervision may be provided indirectly, as long as the licensee is immediately available by phone, e-mail, facsimile or other reliable means.



4759-5-02

**Student practice exemption.**

- (A) For purposes of divisions (D)(1) and (D)(2) of section 4759.02 of the Revised Code, a student dietitian may only engage in dietetic practice as defined in division (A) of section 4759.01 of the Revised Code that is a part of the academic or pre-professional program.
  
- (B) In order for student dietetic technicians to become qualified under the exemption for dietetic technicians contained in division (B) of section 4759.10 of the Revised Code, the board recognizes that pre-professional experiences are necessary. For this reason, dietetic practice by a student dietetic technician enrolled in a program that complies with the requirements in division (B) of section 4759.10 of the Revised Code, may be performed provided the student is actively pursuing the degree and the activity is performed under the supervision of a licensed dietitian or registered dietitian. A student dietetic technician may only engage in dietetic practice as defined in division (A) of section 4759.01 of the Revised Code that is a part of the academic or pre-professional program.
  
- (C) When supervising a student dietitian, a dietetic intern, or a student dietetic technician the licensee is responsible for providing appropriate training and guidelines for the student's clinical experiences, including ongoing close review of medical records and monitoring of student work performance. Documentation of such should be maintained in the licensee's records.

4759-5-03

**Plan of treatment exemption.**

For purposes of the exemption from licensure contained in division (F) of section 4759.10 of the Revised Code, a person when acting under the direction and supervision of a professional licensed under Title 47 of the Revised Code, need not be a licensed dietitian if the person is executing a plan of treatment authorized by and within the scope of practice of the supervising licensed professional. The written plan of treatment shall include orders, goals, objectives, and appropriate treatments. Frequency of treatment and response to interventions shall be monitored and reviewed by the licensed practitioner. The licensed practitioner shall initiate the treatment plan and shall be on site when the plan is carried out by the unlicensed person.

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4759-5-04

**Additional nutritional activities exemption.**

For purposes of division (D) of section 4759.10 of the Revised Code, the board hereby permits the woman, infant, and children's program which is part of the Ohio department of health and known as "W.I.C.", to designate a person to engage in providing such additional nutritional activities as are necessary to operate its programs, providing reasonable efforts to obtain the services of a licensee have failed. ~~The department shall file the designation indicating the time period with the board. The designation shall expire at the end of one hundred eighty days. The designation may be renewed for additional one hundred eighty-day periods by action of the board.~~

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4759-5-05

**Distribution of literature exemption.**

For purposes of division (G) of section 4759.10 of the Revised Code, the free distribution of literature includes its sale.

4759-5-06

**Weight control program exemption.**

For purposes of the exemption from licensure contained in division (J) of section 4759.10 of the Revised Code, a person presenting a general program of instruction for weight control need not be a licensed dietitian provided the general program of weight control is approved in writing by a licensed dietitian, physician licensed under Chapter 4731. of the Revised Code to practice medicine or surgery or osteopathic medicine or surgery, a person licensed in another state and approved by the board as having substantially equivalent licensure requirements as Ohio, or a registered dietitian.

A "general program of weight control" is a program designed for one or more population groups in order to achieve or maintain a healthy weight. It is not based on an individual nutrition assessment and does not provide medical nutrition therapy (MNT) as defined in rule 4759-2-01 of the Administrative Code. The program includes the diet plan and any information provided to customers including written guidelines for instruction to customers.

Persons presenting an approved general program of weight control are to adhere to the approved program content. The program shall be reviewed for re-approval in writing at least every two years.

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4759-6-01

## Standards of practice in nutrition care.

The standards of practice in nutrition care provide a common understanding about the profession's minimum expectations for practice, and form a basis for self-evaluation and improvement and an expectation about nutritional care and service delivery. The standards of practice in nutrition care are comprised of four standards representing the four steps of the nutrition care process.

The "nutrition care process" is a systematic problem-solving method that dietitians may use to critically think and make decisions when providing medical nutrition therapy or to address nutrition related problems and provide safe, effective, high quality nutrition care within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.

The nutrition care process shall consist of four distinct, but interrelated steps including nutrition assessment, nutrition diagnosis, nutrition intervention and nutrition monitoring and evaluation.

(A) The licensee uses accurate and relevant data and information to perform nutrition assessment and identify nutrition-related problems, as the foundation for nutrition diagnosis, the second step of the nutrition care process.

(1) "Nutrition assessment" means the same as "nutritional assessment" defined in paragraph (A) of rule 4759-2-01 of the Administrative Code.

(2) A nutrition assessment is initiated by referral and / or screening of individuals or groups for nutrition risk factors.

(3) The licensee systematically obtains, verifies and interprets data in order to make decisions about the nature and cause of nutrition-related problems.

(4) Nutrition assessment is an ongoing, dynamic process that involves not only initial data collection, but also reassessment and analysis of client or community needs.

(5) Problems that require consultation with or referral to another provider are recognized.

(6) Documentation and communication of nutritional assessment shall be complete, relevant, accurate and timely.

(B) The licensee determines a nutrition diagnosis to identify and label specific nutrition problem(s) that the dietitian is responsible for treating.

(1) "Nutrition diagnosis" is the identification and labeling that describes an actual occurrence, risk of, or potential for developing, a nutritional problem that

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dietetics practitioners are responsible for treating independently within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.

- (2) The nutrition diagnosis is not a medical diagnosis. It results following nutrition assessment and the clustering, analysis, and synthesis of data and demonstrates a link to determining goals for outcomes, selecting appropriate interventions and tracking progress in attaining expected outcomes.
  - (3) Documentation of nutrition diagnosis(es) shall be relevant, accurate and timely and shall be revised and updated as additional assessment data become available.
- (C) Within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code, the ~~The~~ licensee utilizes nutrition intervention as the third step in the nutrition care process to identify and implement appropriate, purposefully planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition or aspect of health status for an individual, target group, or the community at large.
- (1) "Nutrition Intervention" is a specific set of activities and associated materials used to address the problem; purposely planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition, or aspect of health status for an individual, target group, or the community at large. It involves selection, planning, and implementing appropriate actions to meet patient / client / group's nutrition needs.
  - (2) "Intervention planning" involves prioritizing the nutrition diagnoses, conferring with the patient / client / and / or others, reviewing practice guides and policies, and setting goals and defining the specific nutrition intervention strategy.
  - (3) "Implementation of the nutrition intervention" is the action phase that includes carrying out and communicating the plan of care, continuing data collection, and revising the nutrition intervention strategy, as warranted, based on the patient / client response.
  - (4) The licensee performs the interventions or assigns, recommends or refers the nutrition care that other competent practitioners may provide in accordance with federal, state and local laws and regulations.
- (D) The licensee monitors and evaluates indicators and outcomes data directly related to the nutrition diagnosis, goals and intervention strategies to determine the progress made in achieving desired outcomes of nutrition care and whether planned interventions should be continued or revised.

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- (1) "Nutrition monitoring and evaluation" is the fourth step of the nutrition care process. ~~Monitoring~~ Nutrition monitoring specifically refers to the review and measurement of the patient / client / group's status at a scheduled (preplanned) follow-up point with regard to the nutrition diagnosis, intervention plans / goals and outcomes, ~~whereas evaluation~~ Evaluation is the systematic comparison of current findings with previous status, intervention goals, or a reference standard. Monitoring and evaluation use selected outcome indicators (markers) that are relevant to the patient / client / group's defined needs, nutrition diagnosis, nutrition goals, and disease state.
- (2) The licensee uses standard nutrition care outcome indicator(s) to measure outcomes.
- (3) Monitoring data should be compared with the nutrition prescription / goals / or reference standards to evaluate impact of the sum of all interventions on overall patient / client health outcomes.
- (4) Documentation of nutrition monitoring and evaluation shall be comprehensive, specific, accurate, relevant and timely and reflect the indicators measured, results and method for obtaining measurement. The criteria to which the indicator is compared and factors facilitating or hampering progress should be referenced in support of positive or negative outcomes. ~~Future plans~~ Plans for nutrition care, monitoring and follow-up or discharge should be included.
- (5) Ensures communication of nutrition plan of care and transfer of nutrition-related data between care settings as needed including acute care, home healthcare, ambulatory care, community care, and long-term care facility.



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## Standards of professional performance.

Subject to the laws in Chapter 4759 of the Revised Code, every ~~Every~~ licensee shall comply with the following standards of professional performance consistent with the June 1, 2018 "Code of Ethics for the Nutrition and Dietetics Profession" and "2024 Scope and Standards of Practice for the Registered Dietitian Nutritionist" adopted by the academy of nutrition and dietetics which ~~are~~<sup>is</sup> available from the website of the state medical board at the following link: <https://med.ohio.gov>.

### (A) Credentials.

- (1) The licensee shall accurately present professional qualifications and credentials.
- (2) The licensee shall permit use of that licensee's name for the purpose of certifying that dietetic services have been rendered only if the licensee has provided or supervised those services.

### (B) Provision of service.

The licensee shall provide professional service based on client expectations and needs. Quality service is provided, facilitated and promoted based on the licensee's knowledge, experience and understanding of client needs and expectations.

- (1) The licensee shall avoid discrimination on the basis of factors that are irrelevant to the provision of professional services, including, but not limited to cultural differences, race, creed, sex, age, or handicap.
- (2) The licensee shall make evidence-based practice decisions, taking into account the unique values and circumstances of the patient or client and community, in combination with the licensee's expertise and judgment, and assure that sufficient information is available to enable a client to establish mutual goals and make informed decisions.

### (C) Quality in practice.

- (1) The licensee shall systematically evaluate the quality of service and improve practice based on evaluation results.
- (2) Quality practice requires regular performance evaluation and continuous improvement.
- (3) The licensee shall adhere to acceptable standards for that licensee's area of practice and be designated to deliver services as approved by their facility. The authority and privilege to practice within the scope shall be consistent

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with all state and federal laws and rules governing the practice of dietetics.

- (4) The licensee shall generate, interpret and effectively apply evidence based interventions substantiated by research.
- ~~(5) The licensee recognizes the value of health equity in all forms of interaction when delivery, care or services to colleagues, customers, students and interns and when contracting with stake holders.~~

(D) Competence and accountability.

- (1) The licensee shall assume and maintain responsibility and accountability for personal competence in practice and engage in lifelong learning. Competent and accountable practice includes continuous acquisition of knowledge and skill development.

- (a) The licensee shall establish performance criteria, compare actual performance with expected performance, document results and take appropriate action.

- (b) The licensee shall conduct self-assessment of strengths and weaknesses at regular intervals and develop, implement and evaluate an individual plan for practice based on assessment of client needs, current knowledge, ~~and clinical experience.~~ formal and informal input from colleagues, interprofessional teams, and supervisors.

- ~~(2) The licensee shall maintain knowledge and skills required for continued professional competence.~~

- ~~(3)~~(2) The licensee shall recognize the limits of that licensee's qualifications and collaborate with an interprofessional team to facilitate referrals when individual client needs exceed the licensee's scope of practice. ~~seek counsel or make referrals as appropriate.~~

(E) Conflict.

- (1) The licensee shall remain free of conflict of interest while fulfilling the objectives and maintaining the integrity of the dietetic profession.

- (2) The licensee shall advance and promote the profession while maintaining professional judgment, honesty, integrity, loyalty, and trust to colleagues,

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clients and the public.

(F) Endorsement.

The licensee shall promote or endorse products only in a manner that is true and not misleading, and shall disclose any financial interests in products or services that are recommended.

(G) Communication and application of knowledge.

The licensee shall effectively apply knowledge and communicate with others to achieve common goals by effective sharing and application of their unique knowledge and skills in food, human nutrition and management services. The licensee communicates consistent with the Health Insurance Portability and Accountability Act of 1996, Pub.L.No. 104-191.

(H) Utilization and management of resources.

The licensee shall provide quality services use resources effectively and efficiently.

The licensee shall use a systematic approach to identify, monitor, analyze and justify the use of time, money, facilities, staff and other resources while considering safety, effectiveness and cost in planning and delivering interventions.

(I) Approval of a general program of weight control.

A "general program of weight control" as defined in rule 4759-5-06 of the Administrative Code must be approved by either a registered or licensed dietitian or physician licensed in Ohio. For purposes of division (J) of section 4759.10 of the Revised Code, the licensee shall provide written approval of all components of the general program of weight control and assume responsibility for the following:

- (1) Guidelines for instruction: program content and written step-by-step information that the presenter provides to customers to enable them to follow the meal plan and other aspects of a general program of weight control.
- (2) Meal plans: general categories or groups of foods and suggested combinations of specific foods. Meal plans shall not be individualized for specific persons, conditions, or disease states.
- (3) Handouts: any information distributed in conjunction with the general program of weight control.

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- (4) Supplements: products, including vitamins, minerals, herbs and other substances used as part of, or an enhancement to, a general program of weight control. The use of these products shall be substantiated by current scientific evidence.

(J) Supervision.

When providing supervision of another for purposes of division (G) of section 4759.06 and divisions (B) and (E) of section 4759.10 of the Revised Code, and rule 4759-5-02 of the Administrative Code, a licensee shall assume responsibility for the supervision in a manner that protects the public.

(K) Compliance.

The licensee shall comply with all laws and regulations concerning the profession, but shall seek to change them if the laws or regulations are inconsistent with the best interest of the public and the profession. The licensee:

- (1) Shall accept the obligation to protect society and the profession by upholding the standards of practice and standards of professional performance; and
- (2) Shall report alleged violations of the laws, rules and standards to the state medical board.

(L) Interpretation of information and application of research.

- (1) The licensee shall present substantiated information and interpret controversial information, including limitations, potential bias, and reliability without personal bias, recognizing that a legitimate difference of opinion may exist.
- (2) The licensee shall apply, participate in, or generate research to enhance practice and to improve safety and quality of dietetic practice and services.

(M) Confidentiality.

The licensee shall maintain information consistent with legal obligations and client confidentiality.

**(N) Professional conduct.**

- (1) The licensee shall conduct all practices with honesty, integrity, and fairness; and

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(2) The licensee shall make and fulfill professional commitments in good faith; ~~and~~

(3) The licensee shall inform the public and colleagues of services by use of factual information; ~~and~~

(4) The licensee shall make reasonable efforts to avoid bias in professional evaluation.

(O) A violation of any provision of this rule, as determined by the board, shall constitute “a departure from, or failure to conform to, minimal standards of care of similar practitioners under the same or similar circumstances, whether or not actual injury to a patient is established” as that clause is used in division (A)(11) of section 4759.07 of the Revised Code.

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**Interpretation of standards.**

The standards in the chapter shall be interpreted in a manner consistent with the laws in Chapter 4759 of the Revised Code. Subject to the requirements of these laws, the ~~The~~ standards in this chapter are interpreted in a manner consistent with the "Revised ~~2017~~ [2024 Scope and Standards of Practice](#) ~~in Nutrition Care and Standards of Professional Performance~~ for [the](#) Registered Dietitian Nutritionists" adopted by ~~the academy of nutrition and dietetics~~, ["The Academy of Nutrition and Dietetics"](#), which is available from the website of the state medical board at the following link: <https://www.med.ohio.gov>.

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**Severability.**

Each rule of Chapters 4759-1 to 4759-10 of the Administrative Code, and every part of each rule is declared to be an independent rule, and the holding of any rule or part thereof to be unconstitutional, void, or ineffective for any cause shall not affect the validity or constitutionality of any other rule or part thereof.

**From:** [Morgan, Julia](#)  
**To:** [Anderson, Kimberly](#)  
**Subject:** FW: 4759-2, 4759-4, 4759-5 and 4759-6 Initial Rules review.  
**Date:** Tuesday, March 5, 2024 8:29:31 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image006.png](#)  
[image007.png](#)

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Fyi

## Julia L. Morgan

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**From:** Charvat, Karen <[Karen.Charvat@odh.ohio.gov](mailto:Karen.Charvat@odh.ohio.gov)>  
**Sent:** Tuesday, March 5, 2024 8:28 AM  
**To:** Morgan, Julia <[Julia.Morgan@med.ohio.gov](mailto:Julia.Morgan@med.ohio.gov)>  
**Cc:** Alwood, Amy <[Amy.Alwood@odh.ohio.gov](mailto:Amy.Alwood@odh.ohio.gov)>; Haviland, Breanne <[Breanne.Haviland@odh.ohio.gov](mailto:Breanne.Haviland@odh.ohio.gov)>; Shepherd, Corey <[Corey.Shepherd@odh.ohio.gov](mailto:Corey.Shepherd@odh.ohio.gov)>  
**Subject:** RE: 4759-2, 4759-4, 4759-5 and 4759-6 Initial Rules review.

Hello Julia,

Thank you for sending these. The only comment I have is 2759-2-01 (A) (7) has a typo. "includin enteral and parenteral" Including is missing the g.



Thank you,

Karen

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**From:** Morgan, Julia <[Julia.Morgan@med.ohio.gov](mailto:Julia.Morgan@med.ohio.gov)>

**Sent:** Monday, March 4, 2024 4:39 PM

**To:** Charvat, Karen <[Karen.Charvat@odh.ohio.gov](mailto:Karen.Charvat@odh.ohio.gov)>; Haviland, Breanne <[Breanne.Haviland@odh.ohio.gov](mailto:Breanne.Haviland@odh.ohio.gov)>; Shepherd, Corey <[Corey.Shepherd@odh.ohio.gov](mailto:Corey.Shepherd@odh.ohio.gov)>; Alwood, Amy <[Amy.Alwood@odh.ohio.gov](mailto:Amy.Alwood@odh.ohio.gov)>; Dipasquale, Anita <[ADiPasquale@nursing.ohio.gov](mailto:ADiPasquale@nursing.ohio.gov)>; Abby Benjamin <[benjamin@sppgrp.com](mailto:benjamin@sppgrp.com)>; Alvin Zachariah <[alzach@aol.com](mailto:alzach@aol.com)>; Aneta Homer MD <[ahomer@southwoodshealth.com](mailto:ahomer@southwoodshealth.com)>; Anna Ruzicka <[aruzicka@amcno.org](mailto:aruzicka@amcno.org)>; Baker, Janet <[JanetBaker@foresthills.edu](mailto:JanetBaker@foresthills.edu)>; Barry T. Doyle ([todoyle@aol.com](mailto:todoyle@aol.com)) <[todoyle@aol.com](mailto:todoyle@aol.com)>; Bruce B. Whitman ([bbwhitmanlaw@aol.com](mailto:bbwhitmanlaw@aol.com)) <[bbwhitmanlaw@aol.com](mailto:bbwhitmanlaw@aol.com)>; Mcnamee, Cameron <[Cameron.McNamee@pharmacy.ohio.gov](mailto:Cameron.McNamee@pharmacy.ohio.gov)>; Damion Clifford <[dclifford@arnlaw.com](mailto:dclifford@arnlaw.com)>; Daniel Zinsmaster ([daniel.zinsmaster@dinsmore.com](mailto:daniel.zinsmaster@dinsmore.com)) <[daniel.zinsmaster@dinsmore.com](mailto:daniel.zinsmaster@dinsmore.com)>; David Paragas <[david.paragas@btlaw.com](mailto:david.paragas@btlaw.com)>; Deborah R. Lydon ([lydon@dinslaw.com](mailto:lydon@dinslaw.com)) <[lydon@dinslaw.com](mailto:lydon@dinslaw.com)>; Elaine M. Hiatt PhD <[Ehiatt@AIAM.edu](mailto:Ehiatt@AIAM.edu)>; Eric Vinyard <[eric.vinyard@hickspartners.com](mailto:eric.vinyard@hickspartners.com)>; Greg Warren <[g.warren@columbusstrategygroup.com](mailto:g.warren@columbusstrategygroup.com)>; J. Reichman <[jreichman@kkmhealthcare.com](mailto:jreichman@kkmhealthcare.com)>; James Leo <[jjleoincolumbus@yahoo.com](mailto:jjleoincolumbus@yahoo.com)>; James McGovern ([jmcgovern@grafflaw.com](mailto:jmcgovern@grafflaw.com)) <[jmcgovern@grafflaw.com](mailto:jmcgovern@grafflaw.com)>; Jeffrey Jurca ([jjurca@jurcalashuk.com](mailto:jjurca@jurcalashuk.com)) <[jjurca@jurcalashuk.com](mailto:jjurca@jurcalashuk.com)>; Jennifer Armstrong <[jenkarmstrong@hotmail.com](mailto:jenkarmstrong@hotmail.com)>; Joe Feltes <[JFeltes@BDBLAW.com](mailto:JFeltes@BDBLAW.com)>; John R. Irwin <[John@johnrirwin.com](mailto:John@johnrirwin.com)>; Kay Mavko <[kmavko@columbus.rr.com](mailto:kmavko@columbus.rr.com)>; Levi Tkach <[levi@grafflaw.com](mailto:levi@grafflaw.com)>; Lori Herf <[LHerf@bakerlaw.com](mailto:LHerf@bakerlaw.com)>; M. D. Roland Benton <[rbmd\\_99@yahoo.com](mailto:rbmd_99@yahoo.com)>; Mabe, Aaron <[Aaron.Mabe@med.ohio.gov](mailto:Aaron.Mabe@med.ohio.gov)>; Marcus Blackstone <[marcus\\_blackstone@bshsi.org](mailto:marcus_blackstone@bshsi.org)>; Matt Harney <[mattharney@ohiodo.org](mailto:mattharney@ohiodo.org)>; Mike Mathy OFAMA <[mmathy@ohfama.org](mailto:mmathy@ohfama.org)>; Patricia Weisbach <[Patricia\\_Weisbach@trihealth.com](mailto:Patricia_Weisbach@trihealth.com)>; [patrick@americanmedspa.org](mailto:patrick@americanmedspa.org); Reardon, Jill <[Jill.Reardon@med.ohio.gov](mailto:Jill.Reardon@med.ohio.gov)>; Shannon Urena <[shannonurena1@gmail.com](mailto:shannonurena1@gmail.com)>; Tuch, Socrates <[Socrates.Tuch@odh.ohio.gov](mailto:Socrates.Tuch@odh.ohio.gov)>; Stefanie Frank <[sf@stateside.com](mailto:sf@stateside.com)>; Steven Greer <[sgreer6@kent.edu](mailto:sgreer6@kent.edu)>; Thomas W. Hess ([thess@dinslaw.com](mailto:thess@dinslaw.com)) <[thess@dinslaw.com](mailto:thess@dinslaw.com)>; Jenkins, Vicki

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**Cc:** Anderson, Kimberly <Kimberly.Anderson@med.ohio.gov>  
**Subject:** 4759-2, 4759-4, 4759-5 and 4759-6 Initial Rules review.

### **PROPOSED RULES: Seeking comments on the Medical Board's initial review of rules**

The State Medical Board of Ohio seeks public input on proposed rules several times during the rule-making process. Public input is sought after the Medical Board has conducted its initial review of rules, after rules are filed with the Common Sense Initiative Office, and at the public hearing that occurs after the rules are formally filed with the Joint Committee on Agency Rule Review.

The Medical Board's initial review of rules may result in a proposal to amend current rules, rescind current rules, make no changes to current rules, and/or adopt new rules. Comments received will be reviewed and possibly result in changes to the initially proposed language before the rules are then filed with the Common Sense Initiative Office.

***At this time, public comment is being sought on the proposed language for the following rules. The rules are available on the Medical Board's website at med.ohio.gov/laws-and-regulations/rules/newly-adopted-and-proposed-rules.***

4759-2-01	Definitions-Proposed to Amend
4759-4-01	Applications-No Change
4759-4-02	Preprofessional Experience-Proposed to Amend
4759-4-03	Examination-No Change
4759-4-04	Continuing Education-No Change
4759-4-08	Limited Permit-No Change
4759-4-09	License Certificates and Permits-No Change
4759-5-01	Supervision of Persons Claiming Exemption-Proposed to Amend
4759-5-02	Student Practice Exemption-No Change
4759-5-03	Plan of Treatment Exemption-No Change
4759-5-04	Additional Nutritional Activities Exemption-Proposed to Amend
4759-5-05	Distribution of Literature Exemption-No Change
4759-5-06	Weight Control Program Exemption-No Change
4759-6-01	Standards of Practice in Nutrition Care-Proposed to Amend
4759-6-02	Standards of Professional Performance-Proposed to Amend
4759-6-03	Interpretation of Standards-Proposed to Amend
4759-9-01	Severability-No Change

Deadline for submitting comments: **March 20, 2024**

**Comments to:** Kimberly Anderson  
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**Julia L. Morgan**

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**From:** [Mcknightp](#)  
**To:** [Anderson, Kimberly](#)  
**Date:** Monday, March 4, 2024 6:15:22 PM

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Kim -- Of course I approve these. Thanks for using Kay Mavko's input on these.  
thanks. pat

Pat McKnight, MS,RDN, LD.  
State Policy -- Ohio Academy of Nutrition and Dietetics  
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4759-2-01 Definitions

(I)

Suggested language to replace (I)....

“Medical nutrition therapy” means the evidence-based application of the nutrition care process and use of specific nutrition services to treat, or rehabilitate an illness, injury, or condition. Medical nutrition therapy includes nutrition assessment and re-assessment, nutrition diagnosis, nutrition intervention, nutrition monitoring and evaluation, nutrition education and counseling performed within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code and consistent with federal, state, and local laws and rules regarding prescriptive authority.

Comments

Although including the reference to 4759.01 ORC is redundant to the reference in the introductory paragraph of this rule, on further consideration it does seem that including it here reminds a licensee that Ohio’s scope is more restrictive than the Academy/CDR Standards of Practice.

\_OAND strongly believes that the phrase “through a recommendation or referral to a qualified prescriber under the laws of this state,” should be removed from the rule as it would unduly restrict the practice of dietetics authorized by 4759 ORC.

4759-6-01 Standards of Practice

Introductory Paragraph 2 –

This paragraph informs the reader that the whole “nutrition care process” must be performed “within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.”

It is redundant to repeat “within the scope of practiced of dietetics as defined in section 4759.01 of the Revised Code” in the following places:

(B)(1)

(C) intro paragraph ... and then again in (C)(4)

(D)(5) Please remove the last word “facility” ... as some long-term care is provided in places other than facilities (like homes, assisted living residences, elder programs etc.)

4759-6-02 Standards of professional performance

(B)(2) Please change language to:

The licensee shall practice dietetics in a manner that supports health equity and make evidenced-based practice decisions that incorporate the unique values and circumstances of the client and community.

The way it was previously written seems un-enforceable.

(C)(5) Please delete (C)(5) The health equity piece will be combined in (B)(2).

(D)(1)(b) Please change the fourth line to:

... “knowledge, clinical experience, and formal input from colleagues, interprofessional teams, and supervisors.”

(D)(2) In line 3 please replace the word “individual” with “client”

(H) Please delete “provide quality services” and return the words “use resources”

(This section is about resources not services)

(N) This is a list and appears to have too many uses of the word “and” in it.

Please remove the word “and” from the end of sentence in (N)(1),and (N)(2)

then insert “; and” at the end of the sentence in (N)(3)

4759-6-03 Interpretation of Standards

The proposed language change in this rule seems circular, somewhat repetitive and is confusing.

Can the text be changed to:

“The standards in the chapter shall be interpreted in a manner consistent with the laws in Chapter 4759 of the Revised Code and the “Revised 2024 Scope and Standards of Practice for the Registered Dietitian Nutritionists”, which are available from the website of the state medical board at the following link: <https://www.med.ohio.gov>. “





**Legislative Update:**  
**Austin Lucous, Legislative Director**  
**August 2024**

**Recent activity**

**Signed by the Governor:**

- S.B. 28 – Physician Assistant Licensure Compact (Sen. Roegner)
  - Enters Ohio into the Physician Assistant Licensure Compact to enhance the portability of physician assistant licenses through a comprehensive process that complements the existing authority of the State Medical Board to license and discipline Ohio-licensed physician assistants.
  - Requires Ohio to submit data regarding physician assistant licensees to the Physician Assistant Licensure Compact Commission’s data system, including information related to identification, examination, licensure, investigations, and adverse action.
  - Seven states need to enact the legislation for the compact to begin to take effect. Ohio will enter as the 12<sup>th</sup> state.
  - **Senate (30-0); House (93-2); Senate Concurrence (30-1); Signed 7/24**
- S.B. 144 – Regards immunizations by pharmacists, pharmacy interns and techs (Sen. Romanchuk)
  - Authorizes certified pharmacy technicians and registered pharmacy technicians to administer immunizations in the same manner that pharmacy interns are authorized to do so under current law.
  - Authorizes pharmacists, interns, and technicians to administer immunizations beginning when a child is five, as opposed to the current law age limit of seven.
  - **Senate (30-1); House (74-21); Senate Concurrence (31-0); Signed 7/25**

**Actively Monitoring**

- S.B. 211 – Dietitian Licensure Compact (Sen. Roegner)
    - Enters Ohio as a party to the Dietitian Licensure Compact, the purpose of which is to facilitate the interstate practice of dietetics and improve public access to dietetics services.
    - Requires the State Medical Board to appoint a member to the Dietitian Licensure Compact Commission – a joint government agency created by the Compact to enforce the provisions and rules of the Compact.
    - Seven states need to enact the legislation for the compact to begin to take effect. If signed, Ohio will enter as the 4<sup>th</sup> state.
    - **Senate (30-1)**
  - S.B. 196 – Regards authority of advanced practice registered nurses (Sen. Roegner)
    - Makes changes to various provisions of the Revised Code, often, to include references to certain advanced practice registered nurses.
    - Allows universal signatures for APRNs.
-

- **Senate (30-1)**
- S.B. 60 – License certified mental health assistants (Sen. Gavarone)
  - Establishes licensure by the State Medical Board for certified mental health assistants (CMHAs).
  - Authorizes the Medical Board to discipline CMHAs in a manner similar to that of other Board licensees.
  - Establishes within the Medical Board an advisory committee to advise the Board and the Department of Higher Education regarding CMHA education programs.
  - **Senate (20-11)**
- H.B. 102 – License advanced practice respiratory therapists (Rep. Young / Rep. John)
  - Recognizes and regulates the practice of advanced practice respiratory therapists, who are individuals that perform services – pursuant to a supervision agreement with a physician – for the diagnosis and treatment of cardiopulmonary diseases or conditions.
  - Requires an advanced practice respiratory therapist to hold a license issued by the State Medical Board and establishes criminal penalties for violators.
  - Coordinates the State Medical Board’s licensing and regulatory procedures for advanced practice respiratory therapists with those for respiratory therapists and other health care professionals also regulated by the Board.
  - Added amendments limit the scope of APRTs to practice in the hospital setting only with the supervision of a doctor that is on-site. APRTs are also not able to prescribe controlled substances.
  - **Pending House Floor Vote**
- Effect on SMBO**
  - Respiratory Care Advisory Council
    - At present, the Council consists of seven members. The bill increases that number to nine, by requiring the Council to have a member who is an advanced practice respiratory therapist and another who is a physician serving as a supervising physician for an advanced practice respiratory therapist.
    - The bill authorizes the Board to permit Council meetings to include the use of interactive videoconferencing, teleconferencing, or both.
- H.B. 265 – To exempt redaction request forms, affidavits, and the records of the work schedules of designated public service workers from disclosure under public records law. (Rep. Wiggam / Rep. Hall)
  - Exempts an affidavit submitted to a county auditor, by a designated public service worker, a qualifying former designated public service worker, or the spouse of either, requesting the county auditor to remove the name of the individual from certain publicly available documents, from disclosure under Public Records Law.
  - Allows a qualifying former designated public service worker to request that a public office redact the former worker’s address from any record made available to the general public on the internet, and to request that a county auditor remove the name of the individual from certain publicly available documents.
  - **Pending in Senate Judiciary**

- H.B. 211 – To require a public body to permit members of the public to comment or testify about matters of public concern before the public body at its public meeting. (Rep. Gross)
  - Requires a public body, which is subject to Ohio's Open Meetings Law, to establish rules to permit members of the public to comment or testify about matters of public concern before the public body at its public meeting.
  - Permits a public body to establish reasonable restrictions regarding time limits on the comment or testimony.
  - **Pending in House State and Local Government**
  
- H.B. 257 – To authorize certain public bodies to meet virtually. (Rep. Hoops / Rep. Claggett)
  - Permits members of public bodies to attend meetings or hearings by video conference when the public body has adopted certain policies, including methods by which members of the public may observe and attend meetings and hearings.
  - **House (73-3)**
  - **Pending in Senate Government Oversight**
  
- S.B. 109 – Regards sex offenses and individuals regulated by the State Medical Board. (Sen. Hackett)
  - Increasing reporting requirements of suspected sexual activity by medical professionals; Allowing the board to suspend a license upon an indictment, as well as permitting an automatic 90 day suspension of a license of an individual whose license was suspended, revoked or surrendered in another jurisdiction; Requiring licensees to provide notification of their probationary status to their patients; Allowing the board to share the confidential investigation status of a licensee with the complainant; Adding a public member of the board to the internal investigatory process, to allow additional board insight into the handling of sexual misconduct.
  - **Senate (32-0)**
  - **Pending in House Criminal Justice**
  
- HB 73 – To authorize the prescribing of off-label drugs (Rep. J. Gross / Rep. M. Loychik)
  - Allows a prescriber to issue a prescription for any drug, including an off-label drug, with informed consent of the patient
  - Does not require the prescriber to obtain a test result, positive screen for a particular disease, or for the patient to have been exposed to an illness before issuing the prescription
  - Does not allow a health-related licensing board to discipline a prescriber for any action taken under this bill
  - **House (75-16)**
  - **Pending in Senate Health**
  
- HB 89 - Regards intimate examinations and anesthetized or unconscious patients (Rep. B. Hillyer / Rep. M. Abdullahi)

- Prohibits an APRN, PA, physician or student from performing or authorizing another individual to perform, a pelvic, prostate or rectal examination on an anesthetized or unconscious patient.
  - Exemptions include – The performance of the intimate examination is within the scope of care for the surgical procedure or diagnostic exam to be performed
  - The patient or patients representation gives specific, informed consent for the intimate exam
  - An intimate exam is required for diagnostic purposes or treatment of the patient’s medical condition
  - A court orders the intimate exam for the purpose of collecting evidence
  - **Pending in House Public Health Policy**
- SB 278 – Modify regulation of medical marijuana, adult use cannabis, hemp (Sen. S. Huffman / Sen. K. Schuring)
    - Adds to list of qualifying medical conditions for medical marijuana the following: arthritis, migraines, autism spectrum disorder, spasticity or chronic muscle spasm, hospice care or terminal illness, opioid use disorder; and any condition not specified in this division that a recommending physician is qualified to treat and considers.
    - No changes to the code section which lays out the petition process for Medical Board review of requests for a disease or condition to be added as a qualifying medical condition.
    - **Pending in Senate General Government**

### **Closely Monitoring**

- HB 97 – To license certified mental health assistants (Rep. Pavliga) (Companion SB 60)
  - Defines “Certified Mental Health Assistant” as an individual who, under physician supervision, provides mental health care by engaging in any of the activities authorized in the bill
  - Only practice under a supervision agreement with a supervising physician. Diagnose and provide treatment based on patient’s diagnosis. Order, prescribe, personally furnish drugs. Refer patient for voluntary or involuntary admission for substance abuse disorder treatment or inpatient psychiatric care.
  - CMHA may only prescribe the following controlled substances: Buprenorphine only for a patient actively engaged in opioid use disorder treatment. Benzodiazepine in the following circumstances – a patient diagnosed as having a chronic anxiety disorder or a patient with acute anxiety or agitation but only in an amount for 7 days. Stimulant approved by the FDA for treatment of ADHD
  - SMBO rule making authority for: Standards and procedures for issuing and renewing licenses to practice, Application fees for initial license and renewed license, Application process, fees, requirements for approval, reapproval, and curriculum standards for education programs.
  - **Pending in House Health Provider Services**
- HB 80 – Regards pharmacist care (Rep. S. Lipps)
  - Allows a pharmacist to conduct screenings and order lab tests and diagnostic tests and evaluate the results of the screenings, in order to treat: Influenza, COVID-19 and Group A streptococcus

- Allows a pharmacist to initiate drug therapy when treating one of the above health conditions
- **Pending in House Health Provider Services**
  
- HB 169 – To prohibit the provision of sun lamp tanning services to individuals under age 18 and to make changes regarding the titles that may be used by physicians (Rep. B. Hillyer)
  - Includes “Doctor of Medicine”, “Doctor of Osteopathy”, “surgeon”, and “dermatologist” to the titles that may be used by physicians.
  - **Pending in House Health Provider Services**
  
- HB 255 – To make changes to the laws governing massage establishments and to establish a nontherapeutic massage registration. (Rep. Kevin Miller & Rep. Haraz Ghanbari)
  - Creates the nontherapeutic massage registration under the Department of Public Safety
  - **Pending in House Criminal Justice**
  
- HB 275 – OARRS (Rep. Plummer / Rep. T. Young)
  - Requires health related licensing boards to adopt guidelines regarding patient counseling and education to be provided by a health care professional when prescribing an opioid analgesic for five or more days
  - Revises the law requiring prescribers to review patient information in OARRS, by eliminating an exception for an opioid analgesic prescribed or personally furnished for seven days
  - **Pending in House Health Provider Services**
  
- SB 9 - To amend the law related to medical marijuana (Sen. S. Huffman / Sen. Kirk Schuring)
  - Creates the Division of Marijuana Control with the Department of Commerce for the purpose of overseeing Ohio’s Medical Marijuana Program
  - Expands the qualifying medical conditions to include – Arthritis, Migraines, Autism spectrum disorder, Spasticity or chronic muscle spasms, Hospice care or terminal illness, Opioid use disorder and any condition not specified that a recommending physician is qualified to treat and considers as debilitating to the patient as the conditions listed
  - Allows the medical director of a dispensary to hold a CTR
  - Allows SMBO to approve a course of education for employees of a medical marijuana dispensary
  - **Pending in Senate General Government**

### **Operationalizing**

#### **HB 33 – Operating Budget (Rep. Jay Edwards)**

To make operating appropriations for the biennium beginning July 1, 2023, and ending June 30, 2025, to levy taxes, and to provide authorization and conditions for operation of state programs.

**Of note:**

- **Intravenous administration of ultrasound enhancing agents – sonographers**
  - Allows a sonographer to administer intravenously ultrasound enhancing agents if the sonographer meets certain requirements.
- **Legacy pain management study committee**
  - Establishes the Legacy Pain Management Study Committee to study and evaluate the care and treatment of patients suffering from chronic pain, in particular those who have been prescribed opioids for lengthy periods of time. The committee is to be made up of 4 members of the General Assembly, one representative of OMHAS, one representative of SMBO, one representative of PRX, one member representing patients, and one member representing prescribers.
  - Requires the committee to consider availability of and access to pain management specialists in Ohio and the challenges associated with tapering opioid doses.
  - Requires the committee to prepare and submit a report of the recommendations for legislation to address the care and treatment of legacy patients to the General Assembly by December 1, 2024.
- **Practice of acupuncture and herbal therapy**
  - Authorizes a licensed acupuncturist with a national certification in Chinese herbology or oriental medicine to practice herbal therapy; Eliminates supervisory requirements for newly licensed acupuncturists, including duties and reimbursement allowances for supervising physicians and chiropractors. This language is in regards to 2021 removal of the oriental medicine practitioners.
- **Practitioner impairment monitoring**
- Revises the law governing SMBO's confidential program for treating and monitoring impaired practitioners in the following ways:
  - Renames the program as the Confidential Monitoring Program, instead of One-Bite
  - Extends the program's treatment and monitoring services to practitioners who are or may be impaired and practitioners unable to practice because of mental or physician illness and specifies that impairment includes substance use disorder
  - Requires SMBO to notify the monitoring organization that is under contract to conduct the program of practitioner's potential impairment
  - Transfers to the monitoring organization SMBO's the authority to approve treatment providers
  - Requires the monitoring organization, as a condition of eligibility to conduct the program, to be a professional health program
  - Requires the program to employ any licensed health care practitioners necessary for its operation, in place of the One-Bite Program's requirements to employ specified types of practitioners
  - Modifies a condition of practitioner eligibility related to prior professional discipline, by instead prohibiting a practitioner from participating if still under terms of a consent agreement or SMBO order

- Eliminates the requirement that a practitioner suspend practice while participating in the program, instead requiring suspension only if the monitoring organization, evaluator, or treatment provider recommends it
- Authorizes SMBO to contract with the monitoring organization to assist SMBO in monitoring practitioners subject to formal disciplinary action.
- **Medical Board license holders-retired status**
  - Establishes a process by which practitioners licensed by SMBO may have their licenses placed on retired status. Requires SMBO to place a license on retired status if certain eligibility conditions are met. Prohibits the holder of a license placed on retired status from practicing under the license, but does allow the holder to continue to use any title authorized for the license. This language allows for a path of dignified retirement for a physician. The language also have built in safeguards to reactivate the license if the physician complies with the fitness to practice requirements in current law.
- **Criminal background checks under Interstate Medical Licensure Compact**
  - Clarifies that applicants under the existing Interstate Medical Licensure Compact are required to comply with Ohio's existing procedure for criminal records checks for licensees.
- **Subpoenas for patient record information**
  - Eliminates requirements that the supervising member of SMBO approve the issuance of subpoenas for patient record information and be involved in probable cause determinations related to such subpoenas, making the secretary of SMBO solely responsible for those requirements.
- **Time limit to issue adjudicative order**
  - Increases the time SMBO has to issue a final adjudicative order related to the summary suspension of a physician assistant's license to 75 days (from 60). This amendment will bring it into line with analogous language that concerns other license types.
- **Public address information for SMBO licensees**
  - Clarifies the public facing directory of licensees published by the medical board containing only the name and business address of the licensee. Also, specifies the address on file with the state medical board during a medical malpractice claim is the business address.
- **Prescribing for outpatient behavioral health – physician assistants**
  - Authorizes a physician assistant to prescribe schedule II controlled substances if the prescription is issued at the site of a behavioral health practice that does not otherwise qualify under current law as a site where physician assistants may prescribe those drugs. An earlier version of the budget included this language for APRN's, this is to align PA's with the APRN's.
- **Administrative Procedure Act adjudications**
- Does the following regarding agencies conducting an adjudication under the Administrative Procedure Act (APA), unless another law applies:
  - (1) Authorizes additional document service methods through email, facsimile, or domestic commercial delivery service, and
  - (2) allows for alternative methods to complete service if initial attempts fail, including using alternative addresses, before publishing notice in a newspaper of general circulation.

- Increases, from 15 to 60, the maximum number of days within which an agency generally must hold an administrative hearing after a party to an adjudication requests one.
- Requires certain notices and orders that must be served on a party in an APA adjudication to be provided to the party's attorney or other representative rather than requiring the notices be mailed as under current law.
- Specifies that an agency's rejection of an application for registration or renewal of a license is not effective until the 15th day after notice of the rejection is mailed to the licensee instead of prohibiting such an action from becoming effective 15 days before the notification mailing date as under current law

### **SB 21 – Court Jurisdictions (Sen. Rob McColley & Sen. Michelle Reynolds)**

To generally change the venue in which appeal from an agency order is proper to the local court of common pleas.

#### **Of note:**

- Requires an appeal from an order issued by an administrative agency be made to the Franklin County Court of Common Pleas or the court of common pleas in the county in which the place of business of the licensee is located or the county in which the licensee is a resident
- Requires appeals from an administrative order by any party who is not a resident of Ohio must be to the Franklin County Court of Common Pleas.

#### **S.B. 56 – Enter the Interstate Massage Compact (Sen. Roegner)**

- Enters Ohio as a party to the Interstate Massage Compact (IMpact), the purpose of which is to facilitate the interstate practice and regulation of massage therapy and improve public access to and safety of massage therapy services.
- As a party to IMpact, the State Medical Board must select one delegate to the Commission within 60 days of Ohio entering the Compact and fill any subsequent vacancy within 60 days.
- Seven states need to enact the legislation for the compact to begin to take effect. Ohio has entered the compact as the 2<sup>nd</sup> state.
- **Senate (33-0); House (93-1); Signed 6/21**

#### **S.B. 81 – Authorize certain nurses to sign hospital patient documents (Sen. Romanchuk)**

- Authorizes physician assistants, certified nurse practitioners, clinical nurse specialists, and certified nurse midwives to sign documents related to the admission, treatment, and discharge of psychiatric inpatients, if certain conditions are met.
- **Senate (29-1); House (89-1); Senate Concurrence (31-0); Signed 6/21**