



June 5, 2026

Nathan Smith
State Medical Board of Ohio
30 East Broad Street, 3rd Floor
Columbus, Ohio 43215

Re: Proposed Certified Mental Health Assistant Rules – OAC Chapter 4772

Dear Mr. Smith:

On behalf of the Ohio State Medical Association (OSMA) and the Ohio Psychiatric Physician's Association (OPPA), thank you for the opportunity to comment on the proposed rules governing Certified Mental Health Assistants (CMHAs) under Ohio Administrative Code (OAC) Chapter 4772. The OSMA is a nonprofit professional association established in 1835 and is comprised of physicians, medical residents, and medical students in Ohio. The OSMA's membership includes most Ohio physicians engaged in the private practice of medicine. The OPPA represents more than one thousand Ohio physicians specializing in psychiatry, and is the largest psychiatric physician association in the state.

We appreciate that the Board has taken a careful and cautious approach to operationalizing the statutorily created licensure of CMHA, and that much of the proposed package closely tracks that statute. While we understand that a vast majority of these rules are direct translations from statute, we would like to comment on two areas where additional clarification would benefit supervising physicians and strengthen implementation of the new license type.

Emphasis on Supervising Physician's Mental Health Experience and Practice

The statute requires CMHA services to be within the supervising physician's normal course of practice and expertise. R.C. 4772.02(D)(1); proposed OAC 4772-1-02(A)(2). OSMA and OPPA encourage the Board to underscore the relevancy of the supervising physician's mental health experience and that it is a significant focus of their practice, as this is the sole purpose of this new license type. We recommend that the supervision agreement include an attestation identifying that experience and focus of practice—for example, the physician's relevant clinical experience, practice focus, training, board certification, or continuing medical education. If indeed the CMHA licensure program is intended to support mental health care for Ohioans, the supervising physician's credentials in this regard should be documented and auditable rather than assumed.

The Quality Assurance Requirements are Strong, but a Few Clarifications Can Make Them Stronger

OSMA and OPPA support the robust quality assurance for CMHAs and the enhanced standards in proposed OAC 4772-1-08, including the monthly meeting and annual per-patient discussion requirements. We recommend that the Board consider adding language similarly applicable to Physician Assistants found in OAC 4730-1-05(F), allowing multiple supervising physicians to assign the quality assurance process to one physician. As supervising physicians are responsible for the QA process, we encourage the Board to provide clarity in the responsibility for that QA to a particular physician if multiple supervisory physicians are overseeing the same CMHA, particularly if that CMHA has delegated prescribing authority. Finally, proposed OAC 4772-1-08 contains a minor typo duplicate paragraph labels — two paragraphs each labeled "(D)" and "(E)" — which should be corrected.

OSMA and OPPA appreciate the Board's work to implement R.C. Chapter 4772. Given the novelty of the CMHA license, OSMA and OPPA support a cautious approach that preserves close physician supervision, strong quality assurance, and clear limits on delegated practice, and respectfully requests that the Board consider these comments before advancing the proposed rules.

Please do not hesitate to reach out with any additional questions.

Sincerely,



Todd Baker
CEO
OSMA

Sincerely,



Janet Shaw, MBA
CEO
OPPA