### Mandatory Reporting Requirements: The Elderly

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| Alabama | **Physicians:**  
**Other practitioners of the healing arts:**  
**Caregivers (i.e., an individual who has the responsibility for the care of a protected person as a result of family relationship or who has assumed the responsibility for the care of the person voluntarily, by contract, or as a result of the ties of friendship).** | **An oral report, either by telephone or otherwise, must be made immediately, followed by a written report.**                                                                                       | Ala. Code §§ 13A-6-60-13A-6-71, 38-9-2, 38-9-8, 38-9-9, 38-9-10, 38-9-11 |
| Alaska  | **Physicians or other licensed health care providers:**  
**Mental Health Professionals (see definition below), including licensed marital and family therapists:**  
**Pharmacists:**  
**Administrators or employees of nursing homes or residential care or health care facilities:**  
**Guardians or conservators:**  
**Police officers:**  
**Village public safety officers:**  
**Village health aides:**  
**Social workers:**  
**Members of the clergy:**  
**Staff employees of a project funded by the Department of Administration for the provision of services to older Alaskans, the Department of Health and Social Services, or the Council on Domestic Violence and Sexual Assault:**  
**Employees of a personal care or home health aide program:**  
**Emergency medical technicians or mobile intensive care paramedics:**  
**Caregivers of the vulnerable adult (i.e., either a person who is providing care to a vulnerable adult as a result of a family relationship, or who has assumed responsibility for the care of a vulnerable adult voluntarily, by contract, as an employee of a business that provides care in an adult’s home, or by court order, or an employee of an out-of-home care facility who provides care to one or more vulnerable adults);**  
**Certified nurse aides:**  
**Educators or administrative staff members of a public or private educational institution.** | **The report must be made not later than 24 hours after first having cause for the belief of abuse.**                                                                                                      | Alaska Stat. §§ 47.24.010, 47.24.013, 47.24.120, 47.24.130, 47.24.900, § 47.30.915 |
| Arizona | **Health professionals:**  
**Emergency medical technicians:**  
**Home health providers:**  
**Hospital interns or residents:**  
**Speech, physical or occupational therapists:**  
**Long-term care providers:**  
**Social workers:**  
**Peace officers:**  
**Medical examiners:**  
**Guardians:**  
**Conservators:**  
**Fire protection personnel:**  
**Developmental disabilities providers:**  
**Employees of the Department of Economic Security:**  
**Any person who has responsibility for the care of a vulnerable adult:**  
**Attorneys:**  
**Accountants:**  
**Trustees:**  
**Guardians:**  
**Conservators:**  
**Any person who has responsibility for preparing the tax records of a vulnerable adult:**  
**Any person who has responsibility for any other action concerning the use or preservation of the vulnerable adult’s property.** | **Reports must be made immediately by telephone or online.**                                                                                   | Ariz. Rev. Stat. Ann. §§ 13-1420, 32-3201, § 36-401, 46-451, 46-454 |
| Arkansas | **Physicians:**  
**Surgeons:**  
**Coroners:**  
**Dentists:**  
**Dental hygienists:**  
**Osteopaths:**  
**Resident interns:**  
**Nurses:**  
**Members of a hospital’s personnel who are engaged in the administration, examination, care, or treatment of persons:**  
**Social workers:**  
**Case managers:**  
**Home health workers:**  
**Mental health professionals:**  
**Peace officers:**  
**Law enforcement officers:**  
**Facility administrators and owners:**  
**Employees in a facility:**  
**Employees of the Department of Human Services (with the exception of an employee working with an ombudsman program established by the Division of Aging and Adult Services of the Department of Human Services):**  
**Firefighters:**  
**Emergency medical technicians:**  
**Employees of a bank and other financial institutions:**  
**Employees of the United States Postal Service:**  
**Employees or volunteers of a program or organization funded partially or wholly by the Department of Human Services who enter the home of or have contact with an elderly person:** | **A report must be made immediately.**                                                                                                          | Adult and Long-Term Care Facility Resident Maltreatment Act, Ark. Code Ann. §§ 12-12-1701 through 12-12-1725 |
• Any person who has assumed full or intermittent responsibility for the care or custody of an elder or dependent adult, whether or not they receive compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults.

• Any elder or dependent adult care custodian;

• A health practitioner (including a physician and surgeon, psychiatrist, psychologist, dentist, resident, intern, podiatrist, chiropractor, registered nurse, dental hygienist, licensed clinical social worker or associate clinical social worker, marriage and family therapist, or any other person who is currently licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, any emergency medical technician I or II, paramedic, or person certified pursuant to Division 2.5 (commencing with Section 1797) of the Health and Safety Code, a psychological assistant registered pursuant to Section 2913 of the Business and Professions Code, a marriage and family therapist intern, as defined in subdivision (f) of Section 4999.03 of the Business and Professions Code, or an unlicensed marriage and family therapist intern registered under Section 4999.34 of the Business and Professions Code, a clinical counselor intern registered under Section 4990.44 of the Business and Professions Code, a clinical counselor intern, as defined in subdivision (j) of Section 4999.12 of the Business and Professions Code, a state or county public health or social services employee who treats an elder or a dependent adult for any condition, a coroner, or a substance use disorder counselor. As used in this section, "substance use disorder counselor" is a person providing counseling services in an alcoholism or drug abuse recovery and treatment program licensed, certified, or funded under Part 2 (commencing with Section 12050) of the Health and Safety Code, a marriage and family therapist, or any other person who is licensed, certified, or funded under Part 2 (commencing with Section 12050) of the Health and Safety Code.

• A clergy member (including a priest, minister, rabbi, religious practitioner, or similar functionary of a church, synagogue, temple, mosque, or recognized religious denomination or organization, but excluding any unpaid volunteers whose principal occupation or vocation does not involve active or ordained ministry in a church, synagogue, temple, mosque, or recognized religious denomination or organization, and who periodically visit elder or dependent adults on behalf of that church, synagogue, temple, mosque, or recognized religious denomination or organization);

• A clergy member who acquires knowledge or reasonable suspicion of elder or dependent adult abuse during a sacramental communication is not a mandated reporter. "Sacramental communication" means a communication that is intended to be in confidence, including, but not limited to, a sacramental confession made to a clergy member who, in the course of the discipline or practice of his or her church, denomination, or organization, is authorized or accustomed to hear those communications and under the discipline tenets, customs, or practices of his or her church, denomination, or organization, has a duty to keep those communications secret. Nothing shall limit a clergy member's duty to report known or suspected elder and dependent adult abuse when he or she is acting in the capacity of a care custodian, health practitioner, or employee of an adult protective services agency;

• An employee of a county adult protective services agency or a local law enforcement agency;

• A telephone report or confidential Internet reporting tool report shall be made immediately or as soon as practicable possible, and, if the initial report was made by telephone, a written report must be sent, or an Internet report shall be made, within two working days.

• Also see timing requirements under "When is a report required and where does it go?" above for long-term care facilities, state mental hospitals and state developmental centers.
County in-home support services agency, county public authority;
All officers and employees of financial institutions are mandated reporters of suspected financial abuse; and
Any notary public who, in connection with providing notary services, has observed or has knowledge of suspected financial abuse of an elder or dependent adult is a mandatory reporter of suspected financial abuse.

Any of the following, whether paid or unpaid, who observes the mistreatment of an at-risk elder or an at-risk adult with intellectual and developmental disability (IDD), or who has reasonable cause to believe that an at-risk elder or an at-risk adult with IDD has been mistreated or is at imminent risk of mistreatment shall report such fact:
- Any person providing health care or health-care-related services, including general medical, surgical, or nursing services; medical, surgical, or nursing specialty services; dental services; vision services; pharmacy services; chiropractic services; naturopathic medicine services; or physical, occupational, musical, or other therapies;
- Hospital and long-term care facility personnel engaged in the admission, care, or treatment of patients;
- First responders, including emergency medical service providers, fire protection personnel, law enforcement officers, and persons employed by, contracting with, or volunteering with any law enforcement agency, including victim advocates;
- Medical examiners and coroners;
- Code enforcement officers;
- Veterinarians;
- Psychologists, addiction counselors, professional counselors, marriage and family therapists, and registered psychotherapists, as those persons are defined in article 245 of title 12;
- Social workers, as defined in part 4 of article 245 of title 12;
- Staff of community-centered boards;
- Staff, consultants, or independent contractors of service agencies as defined in section 25.5-10-202(34), C.R.S.;
- Staff or consultants for a licensed or unlicensed, certified or uncertified, care facility, agency, home, or governing board, including but not limited to long-term care facilities, home care agencies, or home health providers;
- Staff of, or consultants for, a home care placement agency, as defined in section 25-27.5-102(5), C.R.S.;
- Persons performing case management or assistant services for at-risk elders or at-risk adults with IDD;
- Staff of county departments of human or social services;
- Staff of the state departments of human services, public health and environment, or health care policy and financing;
- Staff of senior congregate centers or senior research or outreach organizations;
- Staff, and staff of contracted providers, of area agencies on aging, except attorneys at law providing legal assistance to individuals pursuant to a contract with an area agency on aging, the staff of such attorneys at law, and the long-term care ombudsmen;
- Employees, contractors, and volunteers operating specialized transportation services for at-risk elders and at-risk adults with IDD;
- Court-appointed guardians and conservators;
- Personnel at schools serving persons in preschool through twelfth grade;
- Clergy members, except that the reporting requirement does not apply to a person who acquires reasonable cause to believe that an at-risk elder or an at-risk adult with IDD has been mistreated or has been exploited or is at imminent risk of mistreatment or exploitation during a communication about which the person may not be examined as a witness, unless the person also acquires such reasonable cause from a source other than such a communication;
- Personnel of banks, savings and loan associations, credit unions, and other lending or financial institutions:
  - who directly observe in person the mistreatment of an at-risk elder or an at-risk adult with IDD; or
  - who have reasonable cause to believe that an at-risk elder has been mistreated or is at imminent risk of mistreatment; or
  - who have reasonable cause to believe that an at-risk adult with IDD has been mistreated or is at imminent risk of mistreatment by reason of actual knowledge of facts or circumstances indicating the mistreatment.

For reports involving at-risk elders and at-risk adults with IDD, reports shall be made not more than 24 hours after making the observation or discovery.

Connecticut

**For Elderly Persons:**

- Any of the following who has reasonable cause to suspect or believe that any elderly person has been abused, neglected, exploited or abandoned, or is in a condition that is the result of such abuse, neglect, exploitation or abandonment, or is in need of protective services:
  - Physicians or surgeons;
  - Resident physicians or interns in any hospital in the state, whether or not so licensed;
  - Registered nurses;
  - Nursing home administrators;
  - Nurse’s aides or orderlies in a nursing home facility or residential care home;
  - Any person paid for caring for a resident in a nursing home facility or residential care home;
  - Any staff person employed by a nursing home facility or residential care home;
  - Residents’ advocates, other than a representative of the Office of the Long Term-Care Ombudsman, including the State Ombudsman;
  - Licensed practical nurses;
  - Medical examiners;
  - Dentists;
  - Optometrists;
  - Chiropractors;
  - Podiatrists;
  - Social workers;
  - Clergymen;
  - Police officers;
  - Pharmacists;
  - Psychologists;
  - Physical therapists;
  - Any person paid for caring for an elderly person by any institution, organization, agency or facility including, without limitation, any employee of a community-based services provider, senior center, home care agency, homemaker and companion agency, adult day care center, village-model community and congregate housing facility;
  - Any person licensed or certified as an emergency medical services provider;
  - Paratransit vehicle drivers;
  - Licensed professional counselors;
  - Adult probation officers;
  - Adult parole officers;
  - Physician assistants;
  - Dental hygienists;
  - Dentists;
  - Occupational therapists;
  - Optometrists;
  - Chiropractors;
  - Psychologists;
  - Podiatrists;
  - Social workers;
  - School teachers, principals, guidance counselors, counselors and paraprofessionals;
  - Licensed behavior analysts;
  - Mental health professionals;
  - Physician assistants;
  - Licensed or certified substance abuse counselors;
  - Licensed marital and family therapists;
  - Speech and language pathologists;
  - Clergymen;
  - Police officers;
  - Pharmacists;
  - Physical therapists;
  - Licensed professional counselors;
  - Sexual assault counselors; and
  - Domestic violence counselors

- Reports must be made within 24 hours after such suspicion or belief arose.

**For Persons with intellectual disability or any person who receives services from the DSS Division of Autism Spectrum Disorder Services:**

- Any of the following who has reasonable cause to suspect or believe that any person with intellectual disability or any person who receives services from the DSS Division of Autism Spectrum Disorder Services has been abused or neglected:
  - Physicians or surgeons;
  - Resident physicians or interns in any hospital in Connecticut;
  - Registered nurses, whether or not so licensed;
  - Persons paid for caring for persons;
  - Licensed practical nurses;
  - Medical examiners;
  - Dental hygienists;
  - Dentists;
  - Occupational therapists;
  - Optometrists;
  - Chiropractors;
  - Psychologists;
  - Podiatrists;
  - Social workers;
  - School teachers, principals, guidance counselors, counselors and paraprofessionals;
  - Licensed behavior analysts;
  - Mental health professionals;
  - Physician assistants;
  - Licensed or certified substance abuse counselors;
  - Licensed marital and family therapists;
  - Speech and language pathologists;
  - Clergymen;
  - Police officers;
  - Pharmacists;
  - Physical therapists;
  - Licensed professional counselors;
  - Sexual assault counselors; and
  - Domestic violence counselors

- Reports must be made as soon as practicable, but no later than 48 hours after such suspicion or belief arose.
- The initial report must be followed up by a written report not later than 5 calendar days after the initial report was made.

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Delaware

**Any person.**

- Not specified in statute.
- The Adult Protective Service (APS) website states that reports should be made to Adult Protective Services within 24 hours by calling the Aging and Disability Resource Center at 1-800-223-9074. See [https://dhss.delaware.gov/dhs/aps.html](https://dhss.delaware.gov/dhs/aps.html).

Financial institutions can report suspected financial exploitation using this [https://dhss.delaware.gov/dhs/aps.html](https://dhss.delaware.gov/dhs/aps.html) which should be emailed to [DelawareADRC@state.de.us](mailto:DelawareADRC@state.de.us) and [IPU.seniorprotection@state.de.us](mailto:IPU.seniorprotection@state.de.us) with the subject line ATTENTION: Suspected Financial Exploitation.

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Conn. Gen. Stat. §§ 1-1g, 17b-450, 17b-451, 46a-11a, 46a-11b

District of Columbia

- Conservators;
- Court-appointed mental retardation advocates;
- Guardians;
- Health-care administrators;
- Licensed health professionals;
- Police officers;
- Human officers of any agency charged with the enforcement of animal cruelty laws;
- Bank managers;
- Financial managers; and
- Social workers.

- Reports shall be made immediately and may be written or oral.

Florida

- Any person, including, but not limited to, any:
  - Physician, osteopathic physician, medical examiner, chiropractor, medical examiner, cardiologist, emergency medical technician, or hospital personnel engaged in the admission, examination, care, or treatment of vulnerable adults;
  - Health professional or mental health professional;
  - Practitioner who relies solely on spiritual means for healing;
  - Nursing home staff, assisted living facility staff, adult day care center staff, adult family care home staff, social worker, or other professional adult care, residential, or institutional staff;
  - State, county, or municipal criminal justice employee or law enforcement officer;
  - An employee of the Department of Business and Professional Regulation conducting inspections of public lodging establishments;
  - A Florida advocacy council or Disability Rights Florida member or a representative of the State Long-Term Care Ombudsman Program;
  - Bank, savings and loan, or credit union officer, trustee, or employee; or
  - Dealer, investment advisor, or associated person under Florida Consumer Finance Laws (chapter 517).

- Reports must be made immediately.

Georgia

For non-residents of long-term care facilities:

- Physicians licensed to practice medicine, physicians assistants, interns or residents;
- Hospital or medical personnel;
- Dentist;
- Registered psychologists or persons participating in internships to obtain licensing;
- Podiatrist;
- Registered professional nurses or licensed practical nurses or nurses' aides;
- Professional counselors, social workers, or marriage and family therapists;
- School teachers;
- School administrators;
- School guidance counselors, visiting teachers, school social workers or school psychologists;
- Child welfare agency personnel;
- Child counseling personnel;
- Child service organization personnel;
- Law enforcement personnel;
- Reproductive health care facility or pregnancy resource center personnel and volunteers;
- Physical therapist;
- Occupational therapist;
- Day-care personnel;
- Coroner;
- Medical examiner;
- Emergency medical services personnel;
- Any person who has been certified as an emergency medical technician, cardiac technician, paramedic or first responder;
- Employee of a public or private agency engaged in professional health related services to elderly persons or disabled adults;
- Clergy members (see “Anything else I should know?” section below for exceptions); and
- Any employee of a financial institution, except when that employee is acting as a fiduciary (but only for such assets that the employee is holding or managing in a fiduciary capacity).

For residents of long-term care facilities:

- Name as above, as well as administrators, managers, or other employees of hospitals or long-term care facilities.
- Any other person who has knowledge that a resident or former resident has been abused or exploited while residing in a long-term care facility.
- Reports shall be made immediately by telephone or in person to the department.

- The report may be made by oral or written communication. The statute does not provide a timeframe in which reports must be made.

- If an immediate report to the department is not possible, the report shall be made to the appropriate law enforcement agency or prosecuting attorney.
- A written report shall be made to the department within 24 hours after the initial report.


• probation officers,
• employees of homemaker and home health service agencies,
• emergency medical service (EMS) providers,
• non-emergency medical transport providers,
• medical and allied health care providers,
• banking or financial institution personnel,
• pension providers, and
• practicum students in the field of health and human services

Hawaii

• Any of the following persons, in the performance of their professional or official duties, who know or have reason to believe that a vulnerable adult has incurred abuse or is in danger of abuse if immediate action is not taken:
  • Any licensed or registered professional of the healing arts and any health-related occupation who examines, treats, or provides other professional or specialized services to a vulnerable adult, including physicians, pharmacists in training, psychologists, dentists, nurses, osteopathic physicians and surgeons, optometrists, chiropractors, podiatrists, pharmacists, and other health-related professionals;
  • Employees or officers of any public or private agency or institution providing social, medical, hospital or mental health services, including financial assistance;
  • Employees or officers of any law enforcement agency, including the courts, police departments, correctional institutions, and parole or probation officers;
  • Employees or officers of any adult residential care home, adult day care center, or similar institution;
  • Medical examiners and coroners; and
  • Licensed social workers and non-licensed persons employed in a social worker position.

• However, no member of the clergy is required to report communications that are protected under Rule 506 of the Hawaii rules of evidence. This rule privileges communications made to a member of the clergy in his or her capacity as a spiritual advisor.

• A financial institution whose employee or officer has direct contact with the elder or reviews or approves the elder’s financial documents, records, or transactions, and within the scope of employment or professional practice:
  • observes or has knowledge of an incident the officer or employee believes in good faith appears to be financial abuse; or
  • in the case of officers or employees who do not have direct contact with the elder, has a good faith suspicion that financial abuse has occurred or may be occurring, based solely on the information present at the time of reviewing or approving a document, record, or transaction.

• Oral report is to be made promptly. Written report should follow oral report as soon as possible.

Illinois

Any of the following persons, while engaged in carrying out their professional duties, are defined as a “Mandated reporter”:

• A professional or professional’s delegate while engaged in:
  • social services,
  • law enforcement,
  • education,
  • the care of an eligible adult or eligible adults, or
  • any of the occupations required to be licensed under:
    • The Behavior Analyst Licensing Act;
    • The Clinical Psychologist Licensing Act;
    • The Clinical Social Work and Social Work Practice Act;
    • The Illinois Dental Practice Act;
    • The Dietitian Nutritionist Practice Act;
    • The Marriage and Family Therapy Licensing Act;
    • The Medical Practice Act of 1987;
    • The Naprapathic Practice Act;
    • The Nurse Practice Act;
    • The Nursing Home Administrators Licensing and Disciplinary Act;
    • The Illinois Occupational Therapy Practice Act.

• Report must be made by a Mandated reporter within 24 hours after developing the belief that an eligible adult has been subjected to abuse, abandonment, neglect, or financial exploitation.

Idaho

• Physicians;
• Nurses;
• Employees of a public or private health facility, or a state licensed or certified residential facility serving vulnerable adults;
• Medical examiners;
• Dentists;
• Osteopaths;
• Optometrists;
• Chiropractors;
• Podiatrists;
• Social workers;
• Police officers;
• Pharmacists;
• Physical therapists; and
• Home care workers.

• Must report immediately.

• When there is reasonable cause to believe that abuse or sexual assault has resulted in death or serious physical injury jeopardizing the life, health or safety of a vulnerable adult, must also report within four (4) hours to the appropriate law enforcement agency.


HRS §§ 346-222, 346-224, 346-250, 412:3-114.5.
• The Illinois Optometric Practice Act of 1987;
• The Pharmacy Practice Act;
• The Illinois Physical Therapy Act;
• The Physician Assistant Practice Act of 1987;
• The Podiatric Medical Practice Act of 1987;
• The Respiratory Care Practice Act;
• The Professional Counselor and Clinical Professional Counselor Licensing Act;
• The Illinois Speech-Language Pathology and Audiology Practice Act;
• The Veterinary Medicine and Surgery Practice Act of 2004; and
• The Illinois Public Accounting Act.

• An employee of an entity providing developmental disabilities services or service coordination funded by the Department of Human Services;
• An employee of a vocational rehabilitation facility prescribed or supervised by the Department of Human Services;
• An administrator, employee, or person providing services in or through an unlicensed community based facility;
• Any religious practitioner who provides treatment by prayer or spiritual means alone in accordance with the tenets and practices of a recognized church or religious denomination, except as to information received in any confession or sacred communication held by the denomination to be confidential;
• Field personnel of the Department of Healthcare and Family Services, Department of Public Health, and Department of Human Services, and any county or municipal health department;
• Personnel of the Department of Human Services, the Guardianship and Advocacy Commission, the State Fire Marshal, local fire departments, the Department on Aging and its subsidiary Area Agencies on Aging and provider agencies, and the Office of State Long Term Care Ombudsman;
• Any employee of the State of Illinois not otherwise specified herein who is involved in providing services to eligible adults, including professionals providing medical or rehabilitation services and all other persons having direct contact with eligible adults;
• A person who performs the duties of a coroner or medical examiner; and
• A person who performs the duties of a paramedic or an emergency medical technician.

Indiana

• Any person who believes or has reason to believe that another individual is an endangered adult.

In addition, if a person is a mandatory reporter due to his or her role on the staff of a medical or other public or private institution, school, hospital, facility, or agency, that person must immediately notify the individual in charge of such facility, who also becomes responsible to report or cause a report to be made.

• A qualified individual is required to report financial exploitation of a financially vulnerable adult. A "qualified individual" means an individual associated with a broker-dealer or investment adviser who serves in a supervisory, compliance, or legal capacity as part of the individual’s job.

Reports must be made immediately.

Ind. Code Ann. §§ 12-10-3-2, 12-10-3-6, 12-10-3-9, 12-10-3-10, 12-10-3-11, 12-10-3-12; 23-19-4.1-1, 23-19-4.1-2.1, 23-19-4.1-3, 23-19-4.1-6, 23-19-4.1-8, 35-46-1-12, 35-46-1-13, 33-46-1-14

Iowa

• Any person who, in the course of employment, examines, attends, counsels, or treats a dependent adult, including the following:
  • A member of the staff of a community mental health center;
  • A peace officer;
  • An in-home homemaker-home health aide;
  • An individual employed as an outreach person;
  • A health practitioner, as regulated by the state;
  • A member of the staff or an employee of a supported community living service, sheltered workshop, or work activity center;
  • A social worker; and
  • A certified psychologist.

Must report immediately.

Iowa Code §§ 235B.2, 235B.3

Kansas

• Residents. Any of the following:
  • Any person who is licensed to practice any branch of the healing arts;
  • A licensed psychologist;
  • A licensed master level psychologist;
  • A licensed clinical psychotherapist;
  • The chief administrative officer of a medical care facility;
  • An adult care home administrator or operator;
  • A licensed social worker;
  • A licensed professional nurse;
  • A licensed practical nurse;
  • A licensed marriage and family therapist;
  • A licensed marriage and family therapist;
  • Licensed professional counselor;
  • Licensed clinical professional counselor;
  • Registered alcohol and drug abuse counselor;

Report must be made immediately upon receipt of the information.

K.S.A. §§ 21-5417, 39-1401, 39-1402, 39-1403, 50-1450, 39-1451, 39-1452; and
Kansas Attorney General Opinion No. 2002-5
A teacher; A bank trust officer or any other officers of financial institutions; A legal representative; A governmental assistance provider; or An emergency medical service provider.

**Missouri** Any of the following: Any person who is licensed to practice any branch of the healing arts; A licensed psychologist; A licensed master level psychologist; A licensed clinical psychologist; The chief administrative officer of a medical care facility; A teacher; A licensed social worker; A licensed professional nurse; A licensed practical nurse; A licensed dentist; A licensed marriage and family therapist; A licensed clinical marriage and family therapist; A licensed professional counselor; A licensed clinical professional counselor; Registered alcohol and drug abuse counselor; A law enforcement officer; An emergency medical service provider; A case manager; A rehabilitation counselor; A bank trust officer or any other officers of financial institutions; A legal representative; A governmental assistance provider; and An owner or operator of a residential care facility, an independent living counselor and the chief administrative officer of a licensed home health agency, the chief administrative officer of an adult family home and the chief administrative officer of a provider of community services and affiliates thereof operated, funded or licensed by the state of Kansas.

An employee of a domestic violence center shall not be required to report information or cause a report of information to be made of abuse of an “adult” under Kansas statute 39-1452.

**Kentucky** Any person, including but not to physician, law enforcement officer, nurse, social worker, cabinet personnel, coroner, medical examiner, alternate care facility employee, or caretaker.


**Louisiana** Any person (including but not limited to a health, mental health, and social service practitioner).


**Maine** Any of the following persons, while acting in a professional capacity: Allopathic or osteopathic physician; Medical resident or intern; Medical examiner; Physician’s assistant; Dentist, dental hygienist, or dental assistant; Chiropractor; Podiatrist; Registered or licensed practical nurse; Certified nursing assistant; Social worker; Psychologist; Pharmacist; Physical therapist; Speech therapist; Occupational therapist; Mental health professional; Law enforcement official, corrections officer, or other person holding a certification from the Maine Criminal Justice Academy; Emergency room personnel; Ambulance attendant; Emergency medical technician, or other licensed medical service provider; Unlicensed assistant personnel; A humane agent employed by the Department of Agriculture, Conservation and Forestry; Member of the clergy acquiring the information as a result of clerical professional work (except for information learned through confidential communications); Sexual assault counselor; Family or domestic violence victim advocate; Naturopathic doctor; Respiratory therapist; Court-appointed guardian or conservator; and Chair of a professional licensing board that has jurisdiction over mandatory reporters.

Any person who has assumed full, intermittent, or occasional responsibility for the care and custody of the incapacitated or dependent adult, regardless of whether that person is compensated.

Any person affiliated with a church or religious institution who serves in an administrative capacity or has otherwise assumed a position of trust or responsibility to the members of that church or religious institution, while acting in that capacity, regardless of whether that person is compensated; and

**Maine** Must make oral report of suspected abuse, neglect or exploitation immediately. If requested by the Department of Health and Human Services, must follow with a written report within 48 hours. 22 M.R.S.A. §§ 1472, 1475, 1476, 1477, 1478, 1479, 1479-A.
**Maryland**

- Vulnerable adult: Any health practitioner, police officer, or human service worker who contacts, examines, attends, or treats an alleged vulnerable adult.
- Developmental Disabled: Any person.
- Mentally II Resident in Facility: Any person.
- Resident of Related Institution: Any person.

Reports should be made immediately. See [https://dbs.maryland.gov/documents/Brochures/Adult%20Services%20Flyers/SEA-AdultProtectiveAbuse_dg.pdf](https://dbs.maryland.gov/documents/Brochures/Adult%20Services%20Flyers/SEA-AdultProtectiveAbuse_dg.pdf)

- The report must be made by telephone, direct communication, or in writing as soon as possible.
- Reports may be oral or written, and must be made “promptly.”

**Massachusetts**

- Vulnerable: Any of the following:
  - Physician, physician assistant, medical intern, dentist; nurse;
  - Family counselor;
  - Probation officer;
  - Social worker;
  - Policeman, firefighter, emergency medical technician;
  - Animal control officer;
  - Licensed psychologist;
  - Coroner;
  - Registered physical or occupational therapist;
  - Osteopath;
  - Director of or outreach worker employed by a council on aging;
  - Executive director of a licensed home health agency; or
  - Executive director of a homemaker service agency or manager of an assisted living residence.
- Disabled: Any of the following, when acting in the course of or her professional capacity, and except when prevented by the constraints of professional privilege:
  - Physician, medical intern, hospital personnel engaged in the examination, care or treatment of persons, medical examiner, dentist, psychologist, nurse, chiropractor, podiatrist, osteopath, public or private school teacher, educational administrator, guidance or family counselor, day care worker, probation officer, animal control officer, social worker, foster parent, police officer or person employed by a state agency within the executive office of health and human services (see below for further detail), or employed by a private agency providing services to disabled persons:
  - The department of elder affairs;
  - The office of health services (which houses the department of public health, the department of mental

- Elderly: Reporters must make a verbal report immediately, followed within 48 hours by a written report, to the department of elder affairs or its designated agency.
- Disabled: Reporters must make an oral report immediately followed within 48 hours by a written report to the DPPC. Reporters who have reasonable cause to believe that a disabled person has died as a result of a serious physical or emotional injury resulting from abuse shall immediately report such death, in writing, to the DPPC, to the district attorney for the county in which such death occurred, and to the medical examiner.

- Disabled: Any person providing transportation services to a person with disabilities is required to report when any of the following are met with respect to the individual believed to be the subject of the abuse, neglect or exploitation:
  - The factual basis for knowing or suspecting abuse, neglect or exploitation derives from the professional’s treatment of the person suspected of causing the abuse, neglect or exploitation.
  - The treatment was sought by the person for a problem relating to the abuse, neglect or exploitation; and
  - Their opinion is that the abused, neglected or exploited adult’s life or health is not immediately threatened.

- A mandatory reporter acting in their professional capacity is also required to report whether the services are provided for compensation.

- A mandatory reporter acting in their professional capacity is also required to report when any of the following are met with respect to the individual believed to be the subject of the abuse, neglect or exploitation:
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health, the division of medical assistance, and the Betty Lehman center for patient safety and medical error reduction); and
• the office of children, youth and family services (which houses the department of children and families, the department of transitional assistance, the department of youth services, the child abuse prevention board, and the office for refugees and immigrants);
• the office of disabilities and community services (which houses the department of developmental services, the MA rehabilitation commission, the MA commission for the blind, and the MA commission for the deaf and hard of hearing);
• the managed care oversight board;
• the health facilities appeals board; and
• the office of health equity.

Michigan

• A person who is employed, licensed, registered or certified to provide health care, educational, social welfare, mental health or other human services;
• An employee of an agency licensed to provide health care, educational, social welfare, mental health or other human services;
• A law enforcement officer; and
• An employee of the office of the county medical examiner.

• Reporter must orally report immediately, by telephone or otherwise, to the county department of social services of the county in which the abuse, neglect, or exploitation is suspected of having or believed to have occurred.
• Reporter may make a written report with the county department, following the oral report.

Minnesota

• A professional, or professional’s delegate, while engaged in:
  • social services;
  • law enforcement;
  • education;
  • care of vulnerable adults;
  • nursing home administrators;
  • unlicensed complementary and alternative healthcare providers;
  • physicians;
  • nurses;
  • chiropractors;
  • optometrists;
  • occupational therapists;
  • physical therapists;
  • psychologists;
  • social workers;
  • marriage and family therapists;
  • behavioral health and therapy practitioners;
  • dieticians and nutritionists;
  • dentists;
  • pharmacists;
  • podiatrists;
  • employees of a rehabilitation facility certified by the state;
  • employees of persons providing services in any hospital; nursing home, assisted living facility, home health care organization, hospice facility or other organization that effects, provides or arranges for personal care assistance services authorized by the state; and
  • anyone that performs the duties of the medical examiner or coroner.

• A report must be made as soon as possible, but not longer than 24 hours from the time initial knowledge of an incident is received.

Mississippi

• Any person, including but not limited to any:
  • attorney, physician, osteopathic physician, medical examiner, chiropractor or nurse engaged in the admission, examination, care or treatment of vulnerable persons;
  • other health professional or mental health professional;
  • practitioner who relies solely on spiritual means for healing; social worker; family protection worker; family protection specialist or other professional care, residential or institutional staff;
  • state, county, or municipal criminal justice employee or law enforcement officer;
  • human rights advocacy committee or long-term care ombudsman council member; or
  • accountant, stockbroker, financial advisor or consultant; insurance agent or consultant; investment advisor or consultant; financial planner; or any officer or employee of a bank, savings and loan, credit union or any other financial service provider.

• Home health agency: If a reporter is reporting in the scope of his or her employment at a home health agency, the report must be given orally or telephonically (excluding Saturdays, Sundays and legal holidays) within 24 hours of discovery. A written report must be submitted by the health agency within 72 hours of discovery.
• Other care facilities: All other care facilities must report orally or telephonically (excluding Saturdays, Sundays and legal holidays) within 24 hours of discovery, and a written report must be submitted within 72 hours of discovery.
• Librarians: All others must report immediately orally or in writing, but where the report is made orally, it must be followed up by a written report.

Missouri

• Reports must be made immediately, and may be made orally or in writing.

• Any person, 18192.2405.1(1)
• Any adult day care worker, chiropractor, Christian Science practitioner; attorney; dentist; embalmer; employee of the departments of social services, mental health, or health and senior services; employee of a local area agency on aging or an organized area agency on aging program, emergency medical technician, firefighter, first responder; funeral director; home health agency or home health agency employee; hospital and clinic personnel engaged in examination, care, or treatment of persons; home services owner, provider, operator, or employee; law enforcement officer; long-term care facility administrator or employee; medical examiner; medical resident or intern; mental health provider; minister; nurse; nurse practitioner; coroner; dentist; embalmer; employee of a rehabilitation facility, mortician; occupational therapist; physical therapist; psychologist; social worker; marriage and family therapist; behavioral health and therapy practitioners; dieticians and nutritionists; dentists; pharmacists; podiatrists; employees of a rehabilitation facility certified by the state; employees of persons providing services in any hospital; nursing home, assisted living facility, home health care organization, hospice facility or other organization that effects, provides or arranges for personal care assistance services authorized by the state; and anyone that performs the duties of the medical examiner or coroner.

• Home health agency: If a reporter is reporting in the scope of his or her employment at a home health agency, the report must be given orally or telephonically (excluding Saturdays, Sundays and legal holidays) within 24 hours of discovery. A written report must be submitted by the health agency within 72 hours of discovery.
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• Librarians: All others must report immediately orally or in writing, but where the report is made orally, it must be followed up by a written report.

Miss. Comp. Laws §§ 630.061, 630.062, 630.165.
630.005, 630.162, 630.163,
208.912, 565.188, 565.218,
192.2410, 192.2475,
198.006, 198.070, 208.900,
208.912, 565.188, 565.218,
630.061, 630.162, 630.163,
630.165.

Miss. St. §§ 626.557, 626.5572.
400.11, 400.11a, 400.11c,
626.557, 626.5572.

Miss. Code Ann. §§
43-47-3, 43-47-7,
43-47-37.

Mo. Rev. Stat. §§ 192.2005,
192.2400, 192.2405,
192.2450, 192.2475,
198.006, 198.070, 208.900,
208.912, 565.188, 565.218,
630.061, 630.162, 630.163,
630.165.
[A duly ordained minister, clergy, religious worker or Christian Science practitioner, while functioning in his or her ministerial capacity, shall not be required to report concerning a privileged communication made to him or her in his or her professional capacity.

Company that provided management services to nursing home and its president were mandated reporters that were required to report abuse of elderly resident under statute, where they were responsible for the care of the resident. (State v. Kaiser, 139 S.W.3d 545, 554 (Mo. Ct. App. 2004)).]
| facility, day program or group home, specialized service operated, funded or licensed by the department or in a mental health facility or mental health program in which people may be admitted on a voluntary basis or are civilly detained pursuant to chapter 632; or employee of the departments of social services, mental health, or health and senior services; or home health agency or home health agency employee; hospital and clinic personnel engaged in examination, care, or treatment of persons; in home services owner, provider, operator, or employee; law enforcement officer; long-term care facility administrator or employee; mental health professional; peace officer; probation or parole officer; or other non-familial person with responsibility for the care of a vulnerable person. (§630.162)

- A daily ordained minister, clergy, religious worker or Christian Science practitioner, while functioning in his or her ministerial capacity, shall not be required to report concerning a privileged communication made to him or her in his or her professional capacity.

Montana

- Any of the following persons, as a result of information they receive in their professional or official capacities:
  - A physician, resident, intern, professional or practical nurse, physician assistant, or member of a hospital staff engaged in the admission, examination, care, or treatment of persons;
  - An osteopath, dentist, dentist, chiropractor, optometrist, podiatrist, medical examiner, coroner, or any other health or mental health professional;
  - An ambulance attendant;
  - A social worker or other employee of the state, a county, or a municipality assisting an older person or a person with a developmental disability in the application for or receipt of public assistance payments or services;
  - A person who maintains or is employed by a roominghouse, retirement home or complex, nursing home, group home, adult foster care home, adult day-care center, or assisted living facility or an agency or individual that provides home health services or personal care in the home;
  - An attorney, unless the attorney acquired knowledge of the facts required to be reported from a client and the attorney-client privilege applies;
  - A peace officer or other law enforcement official;
  - A person providing services to an older person or a person with a developmental disability pursuant to a contract with a state or federal agency; and
  - An employee of the department of public health and human services while in the conduct of the employee’s duties.

- Timing not specified in statute.
- Reports can be made orally, by telephone or in person, or in writing. A person who receives an oral report shall prepare it in writing as soon as possible.


Nebraska

- Physician, psychologist, physician assistant, nurse, nurse aide or other medical, developmental disability, or mental health professional;
- Law enforcement personnel;
- Caregiver or employee of caregiver;
- Operator or employee of a sheltered workshop;
- Owner, operator or employee of any facility licensed by the Department of Health and Human Services (DHHS); and
- Human services professional or paraprofessional not including members of the clergy.

- Timing not specified, except that if requested by the department, a telephone report must be followed by a written report within 48 hours.
- Any law enforcement agency receiving a report of abuse, neglect, or exploitation shall notify DHHS no later than the next working day by telephone.
- A report of abuse, neglect, or exploitation made to DHHS which was not previously made to or by a law enforcement agency shall be communicated to the appropriate law enforcement agency by DHHS no later than the next working day by telephone or mail.


Nevada

- Every physician, dentist, dental hygienist, chiropractor, optometrist, pediatrician, medical examiner, resident, intern, professional or practical nurse, physician assistant, licensed, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical social worker, alcohol and drug counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed practical nurse, holder of a license or a limited license, behavior analyst, assistant behavior analyst, registered behavior technician, peer recovery support specialist, peer recovery support specialist supervisor, or other person providing medical services licensed or certified to practice in Nevada, who examines, attends or treats an older person or vulnerable person who appears to have been abused, neglected, exploited, isolated or abandoned;
- Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person by a member of the staff of the hospital.

- A coroner.

- Reports must be made as soon as reasonably practicable, but no later than 24 hours after the person knows or has reasonable cause to believe that the older person has been abused, neglected, exploited, isolated or abandoned.
- Reports are to be made by telephone or, in light of all the surrounding facts and circumstances which are known or which reasonably should be known to the report by any other means of oral, written or electronic communication that a reasonable person would believe, under those facts and circumstances, is a reliable and swift means of communicating information to the person who receives the report. If the report is made orally, the person who receives the report must reduce it to writing as soon as reasonably practicable.

### New Hampshire
- Any person, including, but not limited to, physicians, other health care professionals, social workers, clergy, and law enforcement officials.

### New Jersey
- Any person, including, but not limited to, physicians, other health care professionals, social workers, clergy, and law enforcement officials.

### New Mexico
- Resident Abuse and Neglect, Any person.

### New York
- With respect to people in residential health care facilities:
  - Operators and employees of a residential health care facility;
  - Employees of any corporation, partnership, organization or other entity which, or other person who, is under contract with a residential health care facility;
  - Nursing home administrators;
  - Physicians;
  - Medical examiners;
  - Coroner;
  - Physician’s assistants;
  - Specialists’ assistants;
  - Osteopaths;
  - Chiropractors;
  - Physical therapists;
  - Occupational therapists;
  - Registered professional nurses;
  - Licensed practical nurses;
  - Dentists;
  - Pharmacists;
  - Psychiatrists;
  - Licensed master social workers;
  - Licensed clinical social workers;
  - Speech pathologists;
  - Audiologists.
  - With respect to vulnerable persons (note: certain other mandatory reporters are included in the statute which appear to be solely applicable to children):
    - Custodian.
For any vulnerable adult, when acting in his:

- mandated reporter
- Ohio Rev. Code
- Disabled

- report the information to the:
- North Dakota
- Carolina
- North
- Any:
- to an appropriate law enforcement agency.
- department of human services or the
- reasonably would result in abuse or neglect,
- subjected to conditions or circumstances that
- or who observes a vulnerable adult being
- adult has been subjected to abuse or neglect,
- reasonable cause to believe that a vulnerable
- person not required to report who has
- of suspected abuse or neglect.
- care ombudsman is
- any of the following:
- For any adult with developmental disabilities
- of health;
- authority having the duties of a board
- city or general health district or the
- operated by the board of health of a
- Employee of a licensed residential
- Employee of a nursing home or
- Employee of a public hospital;
- Employee of a hospital;
- Supervisor, and personal care services
- facility that provides accommodations,
- Employee of an outpatient health
- Employee of a home health agency;
- Certified dialysis technician;
- Pharmacist;
- Therapist;
- Independent marriage and family
- Marriage and family therapist;
- Professional counselor;
- Social worker;
- Licensed practical nurse;
- Registered nurse;
- Dentist;
- Podiatrist;
- Osteopath;
- Osteopathic medicine and surgery);
- practice medicine and surgery,
- Physician (individuals authorized to
- Attorney admitted to practice in Ohio;
- Firefighter;
- Law enforcement officer;
- person; or
- Medical, mental health professional or
- Medical, mental health, or
devmental disabilities professional;
- Educator professional;
- An individual in the position of a long-term
care ombudsman is a mandated reporter
of suspected abuse or neglect.
- Any person not required to report who has
reasonable cause to believe that a vulnerable
adult has been subjected to abuse or neglect,
or who observes a vulnerable adult being
subjected to conditions or circumstances that
reasonably would result in abuse or neglect,
may report the information to the
department of human services or the
department of human services' designee or
to an appropriate law enforcement agency.

Timing requirements not specified in statute, simply states “as soon as possible”.

Report can be oral or written.

Any:

- Attorney admitted to practice in Ohio;
- Physician (individuals authorized to
  practice medicine and surgery, osteopathic medicine and surgery, or
  pediatric medicine and surgery);
- Osteopath;
- Podiatrist;
- Chiropractor;
- Dentist;
- Registered nurse;
- Licensed practical nurse;
- Psychologist;
- Social worker;
- Independent social worker;
- Professional counselor;
- Professional clinical counselor;
- Marriage and family therapist;
- Independent marriage and family therapist;
- Pharmacist;
- Certified dialysis technician;
- Employee of a home health agency;
- Employee of an outpatient health
  facility;
- Employee of a hospital;
- Employee of a public hospital;
- Employee of a nursing home or
  residential care facility;
- Employee of a licensed residential
  facility that provides accommodations,
supervision, and personal care services
  for three to sixteen unrelated adults;
- Employee of a health department
  operated by the board of health of a
city or general health district or the
  authority having the duties of a board
  of health;
- Employee of a community mental

Timing not specified for reporting a disabled adult is in need of protective services. Reports may be made
strictly orally or in writing.

With respect to financial exploitation, timing not specified. Reports may be made orally or in writing.


N.D. Cent. Code §§ 22.1-32-01 (Classification of Offenses); 25-01.2-01, 25-01.3-01, 25-01.3-04, 25-01.3-12 (Developmental Disability and Committee on Protection and Advocacy); 50-25.2-01, 50-25.2-03, 50-25.2-09, 50-25.2-10, 50-25.2-11 (Vulnerable Adult Protection Services).

Abuse, neglect, or exploitation must be reported immediately.
Reports may be written or oral, but oral reports must be followed up with written reports, if requested
by the department.
The written or oral report is confidential and is not a public record.
Information contained in the report shall not be released to any person who is the
subject of the report and to legal counsel for the adult.
If it determines that there is a risk of harm to a person who makes a report under this section or to the
adult who is the subject of the report, the county department of job and family services may redact
the name and identifying information related to the person who made the report.
The country department of job and family services shall be available to receive the written or oral
report provided for in this section twenty-four hours a day and seven days a week.

Abuse must be reported immediately.
Reports must be made forthwith to anyone in person and must be followed by a written report.
The Ohio Department of Developmental Disabilities shall establish a registry office for the purpose of
maintaining reports of abuse, neglect, and other major unusual incidents made to the department and
reports received from county boards of developmental disabilities. The department shall establish
committees to review reports of abuse, neglect, and other major unusual incidents.
health agency;
• Agent of a county humane society;
• Firefighter;
• Ambulance driver for an emergency medical service organization;
• First responder;
• Emergency Medical Technician-Basic;
• Emergency Medical Technician-Intermediate;
• Paramedic;
• Official employed by a local building department to conduct inspections of houses and other residential buildings;
• Peace officer;
• Coronor;
• Member of the clergy;
• Certified Public Accountant;
• Licensed real estate broker or real estate salesperson;
• Notary public;
• Employee of a bank, savings bank, savings and loan association, or credit union organized under the laws of Ohio, another state, or the United States;
• Licensed dealer, investment advisor, sales person, or investment advisor representative;
• Financial planner accredited by a national accreditation agency; or
• Other individual who is a senior service provider, other than a representative of the office of the state long-term care ombudsman program.

• Disabled, Any:
• Physician, including a hospital intern or resident;
• Dentist;
• Podiatrist;
• Chiropractor;
• Practitioner of a limited branch of medicine;
• Hospital administrator or employee of a hospital;
• Licensed nurse;
• Employee of an outpatient health facility;
• Employee of a home health agency;
• Employee of a residential facility that provides accommodations, supervision, and personal care services for three to sixteen unrelated adults;
• Employee of a community mental health facility;
• School teacher or school authority;
• Licensed professional clinical counselor;
• Licensed professional counselor;
• Independent social worker;
• Social worker;
• Independent marriage and family therapist;
• Marriage and family therapist;
• Psychologist;
• Attorney;
• Peace officer;
• Coronor;
• Residents' rights advocate;
• Superintendent, board member, or employee of a county board of developmental disabilities;
• Administrator, board member, or employee of a residential facility;
• Administrator, board member, or employee of any other public or private provider of services to an individual with a developmental disability;
• Developmental disabilities employee, defined as:
  • An employee of the department of developmental disabilities;
  • An employee of a county board of developmental disabilities;
  • An employee in a position that includes providing specialized services to an individual with a developmental disability; or
  • An independent provider, defined as a provider who provides supported living on a self-employed basis and does not employ, directly or through contract, another person to provide the supported living;
• Member of a citizen's advisory council established at an institution or branch institution of the department of developmental disabilities;
• Member of the clergy who is employed in a position that includes providing specialized services to an individual with a developmental disability, while acting in an official or professional capacity in that position, or
• Person who is employed in a position that includes providing specialized services to an individual with a developmental disability and who, while acting in an official or professional capacity, renders spiritual treatment through prayer in accordance with the tenets of an organized religion.

The following are expressly not required to report:
• Employees of the Ohio protection and advocacy system.
• Any attorney or physician is not required to make a report concerning any communication the attorney or physician receives from a client or patient in an attorney-client or
Any "public or private official," or a facility employee, agent, or administrator.

Report must be made as soon as the reporter is aware of the situation and can be oral or in writing. If the report is not made in writing in the first instance, as soon as possible after it is initially made by telephone or otherwise, the report shall be reduced to writing by the Department of Human Services.

Upon receipt of a report of abuse under this section, the department or its designee shall notify:

- The agency providing primary case management services to the adult; and
- The guardian or case manager if the notification would undermine the integrity of the investigation because the guardian or case manager is suspected of committing abuse.

The facility is responsible for reporting the following serious incidents to the Department of Health within 24 hours: communicable diseases; deaths; or unexpected, serious, preventable injuries or illnesses, including accidental deaths or deaths other than by natural causes, and deaths that may be attributed to a medical device; missing residents (also to local law enforcement agencies within 2 hours); situations arising where rape or a criminal act is suspected (also to local law enforcement immediately); and resident abuse, neglect and misappropriation of the property of a resident.

All initial written reports of incidents or situations shall be mailed to the Department of Health within 5 working days after the incident or situation.

<table>
<thead>
<tr>
<th>Oklahoma</th>
<th>Oregon</th>
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<tbody>
<tr>
<td><strong>Protective Services for Vulnerable Adults Act</strong></td>
<td><strong>Nursing Home Care Act</strong></td>
</tr>
<tr>
<td>• Any person.</td>
<td>• Any &quot;public or private official.&quot;</td>
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<tr>
<td>• Persons required to make reports shall include, but not be limited to:</td>
<td>• Physician (including any intern or resident);</td>
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<tr>
<td>• Physicians;</td>
<td>• Physician assistant (including any intern or resident);</td>
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<tr>
<td>• Operators of emergency response vehicles and other medical professionals;</td>
<td>• Naturopathic physician (including any intern or resident);</td>
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<td>• Social workers and mental health professionals;</td>
<td>• Medical examiner;</td>
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<tr>
<td>• Law enforcement officials;</td>
<td>• Licensed practical nurse;</td>
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<td>• Staff of domestic violence programs;</td>
<td>• Registered nurse;</td>
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<tr>
<td>• Long-term care facility personnel (including staff of nursing facilities, immediate care facilities for individuals with intellectual disabilities, assisted living facilities, and residential care facilities);</td>
<td>• Nurse’s aide;</td>
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<tr>
<td>• Other health care professionals;</td>
<td>• Home health aide, or employee of an in-home health service;</td>
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<tr>
<td>• Persons entering into transactions with a caretaker or other person who has assumed the role of financial management for a vulnerable adult;</td>
<td>• Employee of the Department of Human Services or community developmental disabilities program;</td>
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<tr>
<td>• Staff of residential care facilities, group homes, or employment settings for individuals with intellectual disabilities;</td>
<td>• Employee of the Oregon Health Authority, local health department or community mental health program;</td>
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<tr>
<td>• Job coaches, community service workers, and personal care assistants;</td>
<td>• Peace officer;</td>
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<td>• Municipal employees.</td>
<td>• Member of the clergy (see exception in section “When is a report required and where does it go” below);</td>
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</tbody>
</table>

A Facility employee, agent, or administrator.

<table>
<thead>
<tr>
<th>Oklahoma</th>
<th>Oregon</th>
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<tbody>
<tr>
<td><strong>Nursing Home Care Act</strong></td>
<td><strong>Disabled Person</strong></td>
</tr>
<tr>
<td>• An employee or agent of a facility who becomes aware of abuse, neglect or exploitation of a resident prohibited by the Nursing Home Care Act shall immediately report the matter to the facility administrator.</td>
<td>• Any &quot;public or private official,&quot; which means any:</td>
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<tr>
<td>• A facility administrator who becomes aware of abuse, neglect or exploitation of a resident shall immediately act to rectify the problem and shall make a report of the incident and its correction to the Department of Health.</td>
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</table>
An employee of:

- Physician (including any intern or resident);
- Physician Assistant (including any intern or resident);
- Naturopathic physician (including any intern or resident);
- Psychologist (including any intern or resident) (see exception in section “When is a report required and where does it go” below);
- Chiropractor (including any intern or resident);
- Licensed practical nurse;
- Registered nurse;
- Nurse’s aide;
- Home health aide;
- Employee of an in-home health service;
- Employee of the Department of Human Services or Oregon Health Authority, local health department, community mental health program or community developmental disabilities program or private agency contracting with a public body to provide any community mental health service;
- Peace officer;
- Member of the clergy (see exception in section “When is a report required and where does it go” below);
- Regulated social worker;
- Physical, speech, or occupational therapist;
- Information and referral, outreach, or crisis worker;
- Attorney (see exception in section “When is a report required and where does it go” below);
- Licensed professional counselor or licensed marriage and family therapist;
- Any public official;
- Firefighter or emergency medical services provider;
- Elected official of a branch of government of Oregon or a state agency, board, commission or department of a branch of government of Oregon or of a city, county or other political subdivision in Oregon;
- Personal support worker;
- Home care worker;
- An individual paid by the Department of Human Services to provide a service identified in an individualized written service plan of an adult with a developmental disability.

Reports must be made orally and immediately.

- An employee shall notify the administrator immediately following the report to the agency.
- The employee may request the administrator to make or to assist the employee to make the oral and written reports required.

Not specified.

Any person who within scope of their employment at a program (as defined below) or in their professional capacity has knowledge of or reasonable cause to believe that a participant in a program has been abused, mistreated, or neglected.

6. A person requested to report under this section must report the incident within twenty-four hours of the next working day. May be made in writing or orally.

Any physician, dentist, doctor of osteopathy, chiropractor, optometrist, podiatrist, religious healing practitioner, hospital intern or resident, nurse, paramedic, emergency medical technician, social worker, or any health care professional;

Any psychologist, licensed mental health professional, or counselor engaged in professional counseling;

Any county, city, or municipal criminal justice employee or law enforcement officer;

Any staff member of a nursing facility, assisted living facility, adult day care center, or community support provider, or any residential care giver, individual providing homemaker services, victim advocate, or hospital personnel engaged in the admission, examination, care, or treatment of elderly or disabled adults.

Reports shall be made orally or in writing within 24 hours of the obtaining of knowledge or suspicion of potential abuse, neglect, or exploitation.

Any state, county, or municipal criminal law enforcement officer; and

Anyone with actual knowledge of abuse, neglect, or exploitation.

It may take up to 1 business day to process reports of abuse and neglect made through the web-based reporting process. If you believe the allegation requires action in less than 24 hours, contact 1-830-277-8366.

Reports are confidential and not subject to public release under the Open Records Act. If you have created a report and want to track its status, look up the reference number of the report at: https://reportadultabuse.dhs.tn.gov/Home/TrackApplication.

Any person, including, but not limited to, a physician, nurse, social worker, Department of Family and Protective Services personnel, coroner, medical examiner, alternate care facility employee, or caretaker.

Any person who believes that an adult who is elderly or disabled is in a state of abuse, neglect, or financial exploitation is required to immediately report to the Texas Department of Family and Protective Services.

Any professional who suspects that an adult aged 65 or older, or a person with disabilities, is being abused, neglected, or financially exploited has a legal obligation to report it.

Employees of financial institutions and transactions, in connection with providing financial services, employee of the Department of Human Services or a local law enforcement agency and are required by law to report abuse or neglect of an elder or dependent adult.

A report should be submitted to the Commissioner of Disabilities, Aging, and Independent Living within two business days of the reporter learning of the basis for the report.

A report should be made orally or in writing.

Financial institutions must submit their reports not later than the earlier of: (1) the date the financial institution completes the financial institution's assessment of the suspected financial exploitation; or (2) the fifth business day after the date the dealer or investment adviser is notified of the suspected financial exploitation or otherwise has cause to believe that the suspected financial exploitation has occurred, is occurring, or has been attempted.

Dealers and investment advisers must submit their reports not later than the earlier of: (1) the date the dealer or investment adviser completes the dealer’s or investment adviser’s assessment of the suspected financial exploitation; or (2) the fifth business day after the date the dealer or investment adviser is notified of the suspected financial exploitation or otherwise has cause to believe that the suspected financial exploitation has occurred, is occurring, or has been attempted.

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Reports are to be made immediately and can be made orally or in writing.

It may take up to 1 business day to process reports of abuse and neglect made through the web-based reporting process. If you believe the allegation requires action in less than 24 hours, contact 1-830-277-8366.

Reports may be made orally and written and must be made immediately upon knowledge of the occurrence of the suspected abuse, neglect or exploitation of an adult.

A person required to report under this section must report the incident within twenty-four hours or the time it is made.

Any person who within scope of their employment at a program (as defined below) or in their professional capacity has knowledge of or reasonable cause to believe that a participant in a program has been abused, mistreated, or neglected.

A report should be made orally or in writing.

Financial institutions must submit their reports not later than the earlier of: (1) the date the financial institution completes the financial institution's assessment of the suspected financial exploitation; or (2) the fifth business day after the date the dealer or investment adviser is notified of the suspected financial exploitation or otherwise has cause to believe that the suspected financial exploitation has occurred, is occurring, or has been attempted.

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Dealers and investment advisers must submit their reports not later than the earlier of: (1) the date the dealer or investment adviser completes the dealer’s or investment adviser’s assessment of the suspected financial exploitation; or (2) the fifth business day after the date the dealer or investment adviser is notified of the suspected financial exploitation or otherwise has cause to believe that the suspected financial exploitation has occurred, is occurring, or has been attempted.
<table>
<thead>
<tr>
<th>State</th>
<th>Requirements</th>
<th>Reporting Requirements</th>
<th>Statute References</th>
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</thead>
<tbody>
<tr>
<td>Virginia</td>
<td>• Any of the following persons acting in their professional capacity:</td>
<td>• Report must be made immediately orally or in writing upon the reporting person’s determination that there</td>
<td>Va. Code Ann. §§ 18.2-11, 63.2-100, 63.2-1601, 63.2-1606.</td>
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<td>- Any person licensed, certified, or registered by health regulatory boards, with the exception of persons</td>
<td>is reason to suspect abuse, neglect or exploitation.</td>
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<td>licensed by the Board of Veterinary Medicine;</td>
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<td>- Any mental health services provider;</td>
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<td>- Any emergency medical services provider certified by the Board of Health unless such provider</td>
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<td>immediately reports the suspected abuse, neglect or exploitation directly to the attending physician at the</td>
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<td>hospital to which the adult is transported (who shall make such report forthwith);</td>
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<td>- Any guardian or conservator of an adult;</td>
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<td>- Any person employed by or contracted with a public or private agency or facility and working with adults in</td>
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<td>an administrative, supportive or direct care capacity;</td>
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<td>- Any person providing full, intermittent or occasional care to an adult for compensation, including but not</td>
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<td>limited to companion, chore, homemaker, and personal care workers;</td>
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<td>- Any law enforcement officer;</td>
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<td>- Any person who engages in the practice of behavior analysis.</td>
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<td>• Note: medical facilities inspectors of the Department of Health are exempt from immediate reporting while</td>
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<td>conducting federal inspection surveys.</td>
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<td>Washington</td>
<td>• An employee of the Washington State Department of Social and Health Services;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
<td>Wash. Rev. Code § 74.34.205</td>
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<td></td>
<td>- Law enforcement officer;</td>
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<td></td>
<td>- Social worker;</td>
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<td>- Professional school personnel;</td>
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<td>- Individual provider;</td>
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<td>• An employee or operator of a facility (e.g., assisted living facility, nursing home, adult family home,</td>
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<td>soldiers’ home, residential habilitation center or any other facility licensed or required to be licensed by</td>
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<td>the Washington State Department of Social and Health Services;</td>
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<td></td>
<td>• An employee of a social service, welfare, mental health, adult day health, adult day care, home health,</td>
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<tr>
<td>West Virginia</td>
<td>• Any medical, dental or mental health professional;</td>
<td>• Reports shall be made immediately, and not more than 48 hours later after suspecting abuse, neglect or</td>
<td>W. Va. Code §§ 9-6-1, 9-6-6, 9-6-7, 9-6-9, 9-6-10, 9-6-11, 9-6-12, 9-6-13, 9-6-14.</td>
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<td>• Christian Science practitioner or religious leader;</td>
<td>exploitation, to the Department of Health and Human Resources’ local adult protective services agency by a</td>
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<td>• Social service worker;</td>
<td>method established by the department.</td>
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<td>• Law enforcement officer;</td>
<td>• Mandated reporters with an allegation involving a vulnerable adult or resident of a nursing home or</td>
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<td>• Humane officer;</td>
<td>residential facility, are required by law to complete the APS Mandatory Reporting Form immediately, but</td>
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<td></td>
<td>• Any employee of any nursing home or other residential facility.</td>
<td>not more than 48 hours of suspecting the abuse or neglect as part of the Adult Protective Services process.</td>
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<tr>
<td>Wisconsin</td>
<td>• Any of the following who has seen an elder adult at risk or an adult at risk in the course of the person’s</td>
<td>• If the reporting person determines that there is reason to suspect abuse, neglect or exploitation, the</td>
<td>Wis. Stat. Ann. §§ 46.90, 55.01, 55.043, 155.01.</td>
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<td>professional duties:</td>
<td>reporting person shall file an initial report with the Department of Health and Human Resources’ local</td>
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<td>- An employee of any entity that is licensed, certified, or approved by or registered with the Department of</td>
<td>Adult Protective Services.</td>
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<td>Health and Family Services;</td>
<td>• If the reporting person determines that there is reason to suspect abuse, neglect or exploitation, the</td>
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<td></td>
<td>- Any licensed health care provider, including any:</td>
<td>reporting person shall file an initial report with the Department of Health and Human Resources’ local</td>
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<td>- Nurse;</td>
<td>Adult Protective Services.</td>
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<td>- Chiropractor;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- Dentist;</td>
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<td>- Physician;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- Physician assistant;</td>
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<td>- Physical therapist;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- Physical therapist assistant;</td>
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<td>- Occupational therapist or occupational therapy assistant;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- A naturopathic doctor;</td>
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<td></td>
<td>- A person practicing Christian Science treatment;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- Optometrist;</td>
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<td>- Psychologist (who is licensed, who is exercising the temporary authorization to practice, in this state,</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>or who is practicing under the authority to practice interjurisdictional telepsychology);</td>
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<td>- Physical therapist or physical therapy assistant who holds a compact privilege under Wisconsin law;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- An occupational therapist or occupational therapy assistant who holds a compact privilege under Wisconsin</td>
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<td>law;</td>
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<td></td>
<td>- A partnership, corporation or limited liability company thereof that provides health care services;</td>
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<td></td>
<td>- A cooperative health care association organized under statute (185.991) that directly provides services</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>through salaried employees in its own facility; and</td>
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<td>- A home health agency;</td>
<td>• Initial report to be made immediately either orally or in writing.</td>
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<td>- A social worker, professional counselor, or marriage and family</td>
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<td>therapist certified under Wisconsin law;</td>
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<td></td>
<td>• Not specified in statute.</td>
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</tbody>
</table>

Note: “Health care provider” means:

- A nurse;
- A chiropractor;
- A dentist, a physician, physician assistant, perfusionist, podiatrist, physical therapist, occupational therapist assistant, occupational therapist, occupational therapy assistant, or genetic counselor;
- A naturopathic doctor licensed;
- A person practicing Christian Science treatment;
- An optometrist;
- A psychologist who is licensed or is exercising the temporary authorization to practice in this state, or who is practicing under the authority to practice interjurisdictional telepsychology;
- A physical therapist or physical therapist assistant who holds a compact privilege under Wisconsin law;
- An occupational therapist or occupational therapy assistant who holds a compact privilege under Wisconsin law;
- A partnership, a corporation or limited liability company thereof that provides health care services;
- A cooperative health care association organized under the Cooperative Health Care Act (s. 485.08) that directly provides services through salaried employees in its own facility; or
- A home health agency.