

OKLAHOMA STATE SENATE
CONFERENCE
COMMITTEE REPORT

April 25, 2018

Mr. President:

Mr. Speaker:

The Conference Committee, to which was referred

SB 570

By: Griffin of the Senate and Cockroft of the House

Title: Cosmetology and barbering; State Board of Cosmetology and Barbering; recreating Board.
Effective date.

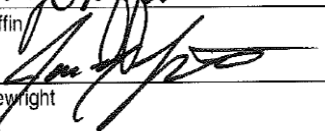
together with Engrossed House Amendments thereto, beg leave to report that we have had the same under consideration and herewith return the same with the following recommendations:

1. That the House recede from all Amendments.
2. That the attached Conference Committee Substitute be adopted.

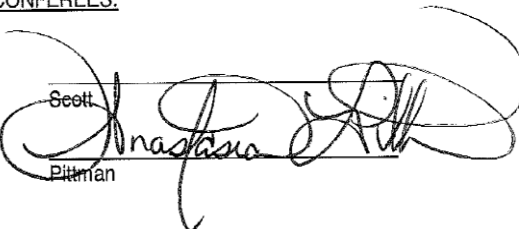
Respectfully submitted,

SENATE CONFEREES:


Griffin


Leewright


Daniels
Bergstrom


Scott

Pittman

Brooks

HOUSE CONFEREES:

Conference Committee on Rules

Senate Action _____ Date _____ House Action _____ Date _____

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STATE OF OKLAHOMA

2nd Session of the 56th Legislature (2018)

CONFERENCE COMMITTEE SUBSTITUTE
FOR ENGROSSED

SENATE BILL NO. 570

By: Griffin of the Senate

and

Cockroft of the House

CONFERENCE COMMITTEE SUBSTITUTE

An Act relating to Advanced Practice Registered Nurses; amending 59 O.S. 2011, Section 353.1a, which relates to advanced practice nurses; modifying requirements for prescribing authority; updating professional term; amending 59 O.S. 2011, Section 567.3a, as amended by Section 1, Chapter 281, O.S.L. 2017 (59 O.S. Supp. 2017, Section 567.3a), which relates to definitions; modifying and deleting certain definitions; requiring certain standards to be met; deleting certain requirement; amending 59 O.S. 2011, Section 567.4a, as amended by Section 2, Chapter 281, O.S.L. 2017 (59 O.S. Supp. 2017, Section 567.4a), which relates to prescriptive authority recognition; updating term; amending 59 O.S. 2011, Section 567.5a, as amended by Section 2, Chapter 228, O.S.L. 2013 (59 O.S. Supp. 2017, Section 567.5a), which relates to license to practice as Advanced Practice Registered Nurse; modifying requirement; requiring Advanced Practice Registered Nurse or employer to carry certain malpractice insurance; requiring certain mentorship; providing for full practice authority; requiring certain accreditation; amending 63 O.S. 2011, Section 2-312, which relates to the authority to prescribe controlled dangerous substances; updating statutory references and professional terms; allowing Advanced Practice Registered Nurse to prescribe or cause to be prescribed certain controlled substances; deleting supervisory requirement; updating statutory language; repealing 59 O.S. 2011, Section 567.4b, which relates

1 to the Formulary Advisory Council; providing for
2 codification; and providing an effective date.

3
4 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

5 SECTION 1. AMENDATORY 59 O.S. 2011, Section 353.1a, is
6 amended to read as follows:

7 Section 353.1a. Prescribing authority shall be allowed, ~~under~~
8 ~~the medical direction of a supervising physician,~~ for an advanced
9 practice nurse recognized by the Oklahoma Board of Nursing in one of
10 the following categories: ~~advanced registered~~ certified nurse
11 practitioners, clinical nurse specialists, or certified nurse-
12 midwives. The advanced practice nurse may write or sign, or
13 transmit by word of mouth, telephone or other means of communication
14 an order for drugs or medical supplies that is intended to be
15 filled, compounded, or dispensed by a pharmacist. ~~The supervising~~
16 ~~physician and the advanced practice nurse shall be identified at the~~
17 ~~time of origination of the prescription and the name of the advanced~~
18 ~~practice nurse shall be printed on the prescription label.~~

19 SECTION 2. AMENDATORY 59 O.S. 2011, Section 567.3a, as
20 amended by Section 1, Chapter 281, O.S.L. 2017 (59 O.S. Supp. 2017,
21 Section 567.3a), is amended to read as follows:

22 Section 567.3a. As used in the Oklahoma Nursing Practice Act:

23 1. "Board" means the Oklahoma Board of Nursing;
24

1 2. "The practice of nursing" means the performance of services
2 provided for purposes of nursing diagnosis and treatment of human
3 responses to actual or potential health problems consistent with
4 educational preparation. Knowledge and skill are the basis for
5 assessment, analysis, planning, intervention, and evaluation used in
6 the promotion and maintenance of health and nursing management of
7 illness, injury, infirmity, restoration or optimal function, or
8 death with dignity. Practice is based on understanding the human
9 condition across the human lifespan and understanding the
10 relationship of the individual within the environment. This
11 practice includes execution of the medical regime including the
12 administration of medications and treatments prescribed by any
13 person authorized by state law to so prescribe;

14 3. "Registered nursing" means the practice of the full scope of
15 nursing which includes, but is not limited to:

- 16 a. assessing the health status of individuals, families
17 and groups,
- 18 b. analyzing assessment data to determine nursing care
19 needs,
- 20 c. establishing goals to meet identified health care
21 needs,
- 22 d. planning a strategy of care,
- 23 e. establishing priorities of nursing intervention to
24 implement the strategy of care,

- f. implementing the strategy of care,
- g. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Oklahoma Nursing Practice Act,
- h. providing safe and effective nursing care rendered directly or indirectly,
- i. evaluating responses to interventions,
- j. teaching the principles and practice of nursing,
- k. managing and supervising the practice of nursing,
- l. collaborating with other health professionals in the management of health care,
- m. performing additional nursing functions in accordance with knowledge and skills acquired beyond basic nursing preparation, and
- n. delegating those nursing tasks as defined in the rules of the Board that may be performed by an advanced unlicensed assistive person;

4. "Licensed practical nursing" means the practice of nursing under the supervision or direction of a registered nurse, licensed physician or dentist. This directed scope of nursing practice includes, but is not limited to:

- a. contributing to the assessment of the health status of individuals and groups,

- b. participating in the development and modification of the plan of care,
- c. implementing the appropriate aspects of the plan of care,
- d. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the Oklahoma Nursing Practice Act,
- e. providing safe and effective nursing care rendered directly or indirectly,
- f. participating in the evaluation of responses to interventions,
- g. teaching basic nursing skills and related principles,
- h. performing additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and
- i. delegating those nursing tasks as defined in the rules of the Board that may be performed by an advanced unlicensed assistive person;

5. "Advanced Practice Registered Nurse" means a licensed Registered Nurse:

- a. who has completed an advanced practice registered nursing education program in preparation for one of

- 1 four recognized advanced practice registered nurse
2 roles,
- 3 b. who has passed a national certification examination
4 recognized by the Board that measures the advanced
5 practice registered nurse role and specialty
6 competencies and who maintains recertification in the
7 role and specialty through a national certification
8 program,
- 9 c. who has acquired advanced clinical knowledge and
10 skills in preparation for providing both direct and
11 indirect care to patients; however, the defining
12 factor for all Advanced Practice Registered Nurses is
13 that a significant component of the education and
14 practice focuses on direct care of individuals,
- 15 d. whose practice builds on the competencies of
16 Registered Nurses by demonstrating a greater depth and
17 breadth of knowledge, a greater synthesis of data, and
18 increased complexity of skills and interventions, ~~and~~
- 19 e. who has been educationally prepared to assume
20 responsibility and accountability for health promotion
21 or maintenance as well as the assessment, diagnosis
22 and management of patient problems which may include
23 the use and prescription of pharmacological and
24 nonpharmacological interventions,

1 f. who has clinical experience of sufficient depth and
2 breadth to reflect the license, and

3 g. who has obtained a license as an Advanced Practice
4 Registered Nurse in one of the following roles:
5 Certified Registered Nurse Anesthetist, Certified
6 Nurse-Midwife, Clinical Nurse Specialist, or Certified
7 Nurse Practitioner.

8 Practicing as an Advanced Practice Registered Nurse means an
9 expanded scope of nursing in a role and population focus approved by
10 the Board, with or without compensation or personal profit, and
11 includes the registered nurse scope of practice. The scope of an
12 Advanced Practice Registered Nurse may include, but is not limited
13 to, performing acts of advanced assessment; diagnosing; prescribing
14 and ordering nonpharmacological interventions, including, but not
15 limited to, durable medical equipment, medical devices, nutrition,
16 blood and blood products; and supportive services, including, but
17 not limited to, home health care, hospice and physical and
18 occupational therapy. Advanced Practice Registered Nurses may serve
19 as primary care providers of record.

20 Advanced Practice Registered Nurses shall practice as licensed
21 practitioners within standards established or recognized by the
22 Board. Each Advanced Practice Registered Nurse is accountable to
23 patients, the nursing profession and the Board for complying with
24 the requirements of the Oklahoma Nursing Practice Act and is

1 accountable for the quality of advanced nursing care rendered, for
2 recognizing limits of knowledge and experience, for planning for the
3 management of situations beyond the Advanced Practice Registered
4 Nurse's expertise and for consulting with or referring patients to
5 other health care providers, as appropriate.

6 Only those persons who hold a license to practice advanced
7 practice registered nursing in this state shall have the right to
8 use the title "Advanced Practice Registered Nurse" and to use the
9 abbreviation "APRN". Only those persons who have obtained a license
10 in the following disciplines shall have the right to fulfill the
11 roles and use the applicable titles: Certified Registered Nurse
12 Anesthetist and the abbreviation "CRNA", Certified Nurse-Midwife and
13 the abbreviation "CNM", Clinical Nurse Specialist and the
14 abbreviation "CNS", and Certified Nurse Practitioner and the
15 abbreviation "CNP".

16 It shall be unlawful for any person to assume the role or use
17 the title Advanced Practice Registered Nurse or use the abbreviation
18 "APRN" or use the respective specialty role titles and abbreviations
19 or to use any other titles or abbreviations that would reasonably
20 lead a person to believe the user is an Advanced Practice Registered
21 Nurse, unless permitted by ~~this act~~ the Nursing Practice Act. Any
22 individual doing so shall be guilty of a misdemeanor, which shall be
23 punishable, upon conviction, by imprisonment in the county jail for
24 not more than one (1) year or by a fine of not less than One Hundred

Dollars (\$100.00) nor more than One Thousand Dollars (\$1,000.00), or by both such imprisonment and fine for each offense;

6. "Certified Nurse Practitioner" is an Advanced Practice Registered Nurse who ~~performs in an expanded role in the delivery of health care:~~

~~a. consistent with advanced educational preparation as a Certified Nurse Practitioner in an area of specialty,~~

~~b. functions within the Certified Nurse Practitioner scope of practice for the selected area of specialization, and~~

~~c. is in accord with the standards for Certified Nurse Practitioners as identified by the certifying body and approved by the Board~~

is prepared to function as a licensed practitioner, providing primary or acute care in accordance with education and specialty certification, along the wellness-illness continuum to a specific population in diverse settings. The Certified Nurse Practitioner diagnoses and treats patients with undifferentiated symptoms as well as those with established diagnoses. The Certified Nurse Practitioner shall practice in accordance with the standards for certified nurse practitioner practice as defined by the professional associations recognized by the Board.

A Certified Nurse Practitioner shall be eligible, in accordance with the scope of practice of the Certified Nurse Practitioner, to

1 obtain recognition as authorized by the Board to prescribe and
2 order, as defined by the rules promulgated by the Board pursuant to
3 this section ~~and subject to the medical direction of a supervising~~
4 ~~physician~~. This authorization shall not include dispensing drugs,
5 but shall not preclude, subject to federal regulations, the receipt
6 of, the signing for, or the dispensing of professional samples to
7 patients.

8 The Certified Nurse Practitioner accepts responsibility,
9 accountability, and obligation to practice in accordance with usual
10 and customary advanced practice registered nursing standards and
11 functions as defined by the scope of practice/role definition
12 statements for the Certified Nurse Practitioner;

13 7. a. "Clinical Nurse Specialist" is an Advanced Practice
14 Registered Nurse who holds÷

15 ~~(1) a master's degree or higher in nursing with~~
16 ~~clinical specialization preparation to function~~
17 ~~in an expanded role,~~

18 ~~(2) specialty certification from a national~~
19 ~~certifying organization recognized by the Board,~~

20 ~~(3) an Advanced Practice Registered Nurse license~~
21 ~~from the Board, and~~

22 ~~(4) any nurse holding a specialty certification as a~~
23 ~~Clinical Nurse Specialist valid on January 1,~~
24 ~~1994, granted by a national certifying~~

~~organization recognized by the Board, shall be deemed to be a Clinical Nurse Specialist under the provisions of the Oklahoma Nursing Practice Act.~~

~~b. In the expanded role, the Clinical Nurse Specialist performs at an advanced practice level which shall include, but not be limited to:~~

- ~~(1) practicing as an expert clinician in the provision of direct nursing care to a selected population of patients or clients in any setting, including private practice,~~
 - ~~(2) managing the care of patients or clients with complex nursing problems,~~
 - ~~(3) enhancing patient or client care by integrating the competencies of clinical practice, education, consultation, and research, and~~
 - ~~(4) referring patients or clients to other services~~
- as a licensed practitioner, diagnosing and treating patients with undifferentiated symptoms as well as those with established diagnoses, in a specialized area of nursing practice to specific populations in diverse settings. The Clinical Nurse Specialist shall practice in accordance with the standards for Clinical Nurse

1 Specialist practice as defined by the professional
2 associations recognized by the Board.

3 ~~e.~~

4 b. A Clinical Nurse Specialist in accordance with the
5 scope of practice of such Clinical Nurse Specialist
6 shall be eligible to obtain recognition as authorized
7 by the Board to prescribe and order, as defined by the
8 rules promulgated by the Board pursuant to this
9 section, ~~and subject to the medical direction of a~~
10 ~~supervising physician.~~ This authorization shall not
11 include dispensing drugs, but shall not preclude,
12 subject to federal regulations, the receipt of, the
13 signing for, or the dispensing of professional samples
14 to patients.

15 ~~d.~~

16 c. The Clinical Nurse Specialist accepts responsibility,
17 accountability, and obligation to practice in
18 accordance with usual and customary advanced practice
19 nursing standards and functions as defined by the
20 scope of practice/role definition statements for the
21 Clinical Nurse Specialist;

22 8. "Nurse-Midwife" is ~~a nurse who has received an Advanced~~
23 ~~Practice Registered Nurse license from the Oklahoma Board of Nursing~~
24 ~~who possesses evidence of certification according to the~~

1 ~~requirements of the American College of Nurse-Midwives~~ an Advanced
2 Practice Registered Nurse who is prepared to function as a licensed
3 practitioner providing a full range of primary health care services
4 in diverse settings to women throughout the lifespan, including
5 gynecologic care, family planning services, preconception care,
6 prenatal and postpartum care, childbirth, care of the newborn and
7 treating the male partner of female patients for sexually
8 transmitted infection and reproductive health. The Certified Nurse-
9 Midwife shall practice in accordance with the standards for nurse-
10 midwife practice as defined by the professional associations
11 recognized by the Board.

12 A Certified Nurse-Midwife in accordance with the scope of
13 practice of such Certified Nurse-Midwife shall be eligible to obtain
14 recognition as authorized by the Board to prescribe and order, as
15 defined by the rules promulgated by the Board pursuant to this
16 section ~~and subject to the medical direction of a supervising~~
17 ~~physician~~. This authorization shall not include the dispensing of
18 drugs, but shall not preclude, subject to federal regulations, the
19 receipt of, the signing for, or the dispensing of professional
20 samples to patients.

21 The Certified Nurse-Midwife accepts responsibility,
22 accountability, and obligation to practice in accordance with usual
23 and customary advanced practice registered nursing standards and
24

1 functions as defined by the scope of practice/role definition
2 statements for the Certified Nurse-Midwife;

3 ~~9. "Nurse-midwifery practice" means providing management of~~
4 ~~care of normal newborns and women, antepartally, intrapartally,~~
5 ~~postpartally and gynecologically, occurring within a health care~~
6 ~~system which provides for medical consultation, medical management~~
7 ~~or referral, and is in accord with the standards for nurse-midwifery~~
8 ~~practice as defined by the American College of Nurse-Midwives;~~

9 ~~10.~~ a. "Certified Registered Nurse Anesthetist" is an
10 Advanced Practice Registered Nurse who:

- 11 (1) is certified by the National Board of
12 Certification and Recertification for Nurse
13 Anesthetists as a Certified Registered Nurse
14 Anesthetist within one (1) year following
15 completion of an approved certified registered
16 nurse anesthetist education program, and
17 continues to maintain such recertification by the
18 National Board of Certification and
19 Recertification for Nurse Anesthetists, ~~and~~
20 (2) administers anesthesia ~~under the supervision of~~
21 in collaboration with a medical doctor, an
22 osteopathic physician, a podiatric physician or a
23 dentist licensed in this state ~~and under~~
24 ~~conditions in which timely onsite consultation by~~

1 ~~such doctor, osteopath, podiatric physician or~~
2 ~~dentist is available, and~~

3 (3) accepts responsibility, accountability and
4 obligation to practice in accordance with usual
5 and customary advanced practice registered
6 nursing standards and functions as defined by the
7 scope of practice or role definition statements
8 for the Certified Registered Nurse Anesthetist.

9 b. A Certified Registered Nurse Anesthetist, ~~under the~~
10 ~~supervision of~~ in collaboration with a medical doctor,
11 osteopathic physician, podiatric physician or dentist
12 licensed in this state, ~~and under conditions in which~~
13 ~~timely, on-site consultation by such medical doctor,~~
14 ~~osteopathic physician, podiatric physician or dentist~~
15 ~~is available,~~ shall be authorized, pursuant to rules
16 adopted by the Oklahoma Board of Nursing, to order,
17 select, obtain and administer legend drugs, Schedules
18 II through V controlled substances, devices, and
19 medical gases only when engaged in the preanesthetic
20 preparation and evaluation; anesthesia induction,
21 maintenance and emergence; and postanesthesia care. A
22 Certified Registered Nurse Anesthetist may order,
23 select, obtain and administer drugs only during the
24 perioperative or periobstetrical period.

1 c. A Certified Registered Nurse Anesthetist who applies
2 for authorization to order, select, obtain and
3 administer drugs shall:

4 (1) be currently recognized as a Certified Registered
5 Nurse Anesthetist in this state,

6 (2) provide evidence of completion, within the two-
7 year period immediately preceding the date of
8 application, of a minimum of fifteen (15) units
9 of continuing education in advanced pharmacology
10 related to the administration of anesthesia as
11 recognized by the National Board of Certification
12 and Recertification for Nurse Anesthetists, and

13 (3) complete and submit a notarized application, on a
14 form prescribed by the Board, accompanied by the
15 application fee established pursuant to this
16 section.

17 d. The authority to order, select, obtain and administer
18 drugs shall be terminated if a Certified Registered
19 Nurse Anesthetist has:

20 (1) ordered, selected, obtained or administered drugs
21 outside of the Certified Registered Nurse
22 Anesthetist scope of practice or ordered,
23 selected, obtained or administered drugs for
24 other than therapeutic purposes, or

1 (2) violated any provision of state laws or rules or
2 federal laws or regulations pertaining to the
3 practice of nursing or the authority to order,
4 select, obtain and administer drugs.

5 e. The Oklahoma Board of Nursing shall notify the Board
6 of Pharmacy after termination of or a change in the
7 authority to order, select, obtain and administer
8 drugs for a Certified Registered Nurse Anesthetist.

9 f. The Board shall provide by rule for biennial
10 application renewal and reauthorization of authority
11 to order, select, obtain and administer drugs for
12 Certified Registered Nurse Anesthetists. At the time
13 of application renewal, a Certified Registered Nurse
14 Anesthetist shall submit documentation of a minimum of
15 eight (8) units of continuing education, completed
16 during the previous two (2) years, in advanced
17 pharmacology relating to the administration of
18 anesthesia, as recognized by the Council on
19 Recertification of Nurse Anesthetists or the Council
20 on Certification of Nurse Anesthetists.

21 g. This paragraph shall not prohibit the administration
22 of local or topical anesthetics as now permitted by
23 law. Provided further, nothing in this paragraph
24 shall limit the authority of the Board of Dentistry to

1 establish the qualifications for dentists who direct
2 the administration of anesthesia; and

3 ~~11. "Supervising physician" means an individual holding a~~
4 ~~current license to practice as a physician from the State Board of~~
5 ~~Medical Licensure and Supervision or the State Board of Osteopathic~~
6 ~~Examiners, who supervises a Certified Nurse Practitioner, a Clinical~~
7 ~~Nurse Specialist, or a Certified Nurse-Midwife, and who is not in~~
8 ~~training as an intern, resident, or fellow. To be eligible to~~
9 ~~supervise such Advanced Practice Registered Nurse, such physician~~
10 ~~shall remain in compliance with the rules promulgated by the State~~
11 ~~Board of Medical Licensure and Supervision or the State Board of~~
12 ~~Osteopathic Examiners;~~

13 ~~12. "Supervision of an Advanced Practice Registered Nurse with~~
14 ~~prescriptive authority" means overseeing and accepting~~
15 ~~responsibility for the ordering and transmission by a Certified~~
16 ~~Nurse Practitioner, a Clinical Nurse Specialist, or a Certified~~
17 ~~Nurse-Midwife of written, telephonic, electronic or oral~~
18 ~~prescriptions for drugs and other medical supplies, subject to a~~
19 ~~defined formulary; and~~

20 ~~13.~~ 9. "Advanced Unlicensed Assistant" means any person who has
21 successfully completed a certified training program approved by the
22 Board that trains the Advanced Unlicensed Assistant to perform
23 specified technical skills identified by the Board in acute care
24

1 settings under the direction and supervision of the Registered Nurse
2 or Licensed Practical Nurse.

3 SECTION 3. AMENDATORY 59 O.S. 2011, Section 567.4a, as
4 amended by Section 2, Chapter 281, O.S.L. 2017 (59 O.S. Supp. 2017,
5 Section 567.4a), is amended to read as follows:

6 Section 567.4a. The rules regarding ~~prescriptive~~ prescribing
7 and ordering authority ~~recognition~~ promulgated by the Oklahoma Board
8 of Nursing pursuant to paragraphs 6 through 9, 11 and 12 of Section
9 567.3a of this title shall:

10 1. Define the procedure for documenting supervision by a
11 physician licensed in Oklahoma to practice by the State Board of
12 Medical Licensure and Supervision or the State Board of Osteopathic
13 Examiners. Such procedure shall include a written statement that
14 defines appropriate referral, consultation, and collaboration
15 between the Advanced Practice Registered Nurse, recognized to
16 prescribe as defined in paragraphs 6 through 9, 11 and 12 of Section
17 567.3a of this title, and the supervising physician. The written
18 statement shall include a method of assuring availability of the
19 supervising physician through direct contact, telecommunications or
20 other appropriate electronic means for consultation, assistance with
21 medical emergencies, or patient referral. The written statement
22 shall be part of the initial application and the renewal application
23 submitted to the Board for recognition for prescriptive authority
24 for the Advanced Practice Registered Nurse. Changes to the written

1 statement shall be filed with the Board within thirty (30) days of
2 the change and shall be effective on filing;

3 2. Define minimal requirements for initial application for
4 prescriptive authority which shall include, but not be limited to,
5 evidence of completion of a minimum of forty-five (45) contact hours
6 or three (3) academic credit hours of education in
7 pharmacotherapeutics, clinical application, and use of
8 pharmacological agents in the prevention of illness, and in the
9 restoration and maintenance of health in a program beyond basic
10 registered nurse preparation, approved by the Board. Such contact
11 hours or academic credits shall be obtained within a time period of
12 three (3) years immediately preceding the date of application for
13 prescriptive authority;

14 3. Define minimal requirements for application for renewal of
15 prescriptive authority which shall include, but not be limited to,
16 documentation of a minimum of fifteen (15) contact hours or one (1)
17 academic credit hour of education in pharmacotherapeutics, clinical
18 application, and use of pharmacological agents in the prevention of
19 illness, and in the restoration and maintenance of health in a
20 program beyond basic registered nurse preparation, approved by the
21 Board, within the two-year period immediately preceding the
22 effective date of application for renewal of prescriptive authority;

23 4. Require that beginning July 1, 2002, an Advanced Practice
24 Registered Nurse shall demonstrate successful completion of a

1 master's degree in a clinical nurse specialty in order to be
2 eligible for initial application for prescriptive authority under
3 the provisions of ~~this act~~ the Nursing Practice Act;

4 5. Define the method for communicating authority to prescribe
5 or termination of same, and the formulary to the Board of Pharmacy,
6 all pharmacies, and all registered pharmacists;

7 6. Define terminology used in such rules;

8 7. Define the parameters for the prescribing practices of the
9 Advanced Practice Registered Nurse;

10 8. Define the methods for termination of prescriptive authority
11 for the Advanced Practice Registered Nurse; and

12 9. a. Establish a Formulary Advisory Council that shall
13 develop and submit to the Board recommendations for an
14 exclusionary formulary that shall list drugs or
15 categories of drugs that shall not be prescribed by
16 Advanced Practice Registered Nurse recognized to
17 prescribe by the Oklahoma Board of Nursing. The
18 Formulary Advisory Council shall also develop and
19 submit to the Board recommendations for practice-
20 specific prescriptive standards for each category of
21 Advanced Practice Registered Nurse recognized to
22 prescribe by the Oklahoma Board of Nursing pursuant to
23 the provisions of the Oklahoma Nursing Practice Act.
24 The Board shall either accept or reject the

1 recommendations made by the Council. No amendments to
2 the recommended exclusionary formulary may be made by
3 the Board without the approval of the Formulary
4 Advisory Council.

5 b. The Formulary Advisory Council shall be composed of
6 twelve (12) members as follows:

7 (1) four members, to include a pediatrician, an
8 obstetrician-gynecological physician, a general
9 internist, and a family practice physician;
10 provided that three of such members shall be
11 appointed by the Oklahoma State Medical
12 Association, and one shall be appointed by the
13 Oklahoma Osteopathic Association,

14 (2) four members who are registered pharmacists,
15 appointed by the Oklahoma Pharmaceutical
16 Association, and

17 (3) four members, one of whom shall be a Certified
18 Nurse Practitioner, one of whom shall be a
19 Clinical Nurse Specialist, one of whom shall be a
20 Certified Nurse-Midwife, and one of whom shall be
21 a current member of the Oklahoma Board of
22 Nursing, all of whom shall be appointed by the
23 Oklahoma Board of Nursing.
24

- c. All professional members of the Formulary Advisory Council shall be in active clinical practice, at least fifty percent (50%) of the time, within their defined area of specialty. The members of the Formulary Advisory Council shall serve at the pleasure of the appointing authority for a term of three (3) years. The terms of the members shall be staggered. Members of the Council may serve beyond the expiration of their term of office until a successor is appointed by the original appointing authority. A vacancy on the Council shall be filled for the balance of the unexpired term by the original appointing authority.
- d. Members of the Council shall elect a chair and a vice-chair from among the membership of the Council. For the transaction of business, at least seven members, with a minimum of two members present from each of the identified categories of physicians, pharmacists and advanced practice registered nurses, shall constitute a quorum. The Council shall recommend and the Board shall approve and implement an initial exclusionary formulary on or before January 1, 1997. The Council and the Board shall annually review the approved exclusionary formulary and shall make any necessary

1 revisions utilizing the same procedures used to
2 develop the initial exclusionary formulary.

3 SECTION 4. AMENDATORY 59 O.S. 2011, Section 567.5a, as
4 amended by Section 2, Chapter 228, O.S.L. 2013 (59 O.S. Supp. 2017,
5 Section 567.5a), is amended to read as follows:

6 Section 567.5a. A. All applicants for a license to practice as
7 an Advanced Practice Registered Nurse shall be subject to Section
8 567.8 of this title.

9 B. An applicant for an initial license to practice as an
10 Advanced Practice Registered Nurse shall:

11 1. Submit a completed written application and appropriate fees
12 as established by the Board;

13 2. Submit a criminal history records check that complies with
14 Section 567.18 of this title;

15 3. Hold a current Registered Nurse license in this state;

16 4. Have completed an advanced practice registered nursing
17 education program in one of the four advanced practice registered
18 nurse roles and a specialty area recognized by the Board. Effective
19 January 1, 2016, the applicant shall have completed an accredited
20 graduate level advanced practice registered nursing education
21 program in at least one of the following population foci:
22 family/individual across the lifespan, adult-gerontology, neonatal,
23 pediatrics, women's health/gender-related, or psychiatric/mental
24 health;

1 5. Be currently certified in an advanced practice specialty
2 certification consistent with educational preparation and by a
3 national certifying body recognized by the Board; and

4 6. Provide any and all other evidence as required by the Board
5 in its rules.

6 C. The Board may issue a license by endorsement to an Advanced
7 Practice Registered Nurse licensed under the laws of another state
8 if the applicant meets the qualifications for licensure in this
9 state. An applicant by endorsement shall:

10 1. Submit a completed written application and appropriate fees
11 as established by the Board;

12 2. Hold a current Registered Nurse license in this state;

13 3. Hold recognition as an Advanced Practice Registered Nurse in
14 a state or territory;

15 4. Have completed an advanced practice registered nursing
16 education program in one of the four roles and a specialty area
17 recognized by the Board. Effective January 1, 2016, the applicant
18 shall have completed an accredited graduate level advanced practice
19 registered nursing education program in at least one of the
20 following population foci: family/individual across the lifespan,
21 adult-gerontology, neonatal, pediatrics, women's health/gender-
22 related, or psychiatric/mental health;

1 5. Be currently certified in an advanced practice specialty
2 certification consistent with educational preparation and by a
3 national certifying body recognized by the Board;

4 6. Meet continued competency requirements as set forth in Board
5 rules; and

6 7. Provide any and all other evidence as required by the Board
7 in its rules.

8 D. The Board may issue prescriptive authority recognition by
9 endorsement to an Advanced Practice Registered Nurse licensed as an
10 APRN-CNP, APRN-CNS, or APRN-CNM under the laws of another state if
11 the applicant meets the requirements set forth in this section. An
12 applicant for prescriptive authority recognition by endorsement
13 shall:

14 1. Submit a completed written application and appropriate fees
15 as established by the Board;

16 2. Hold current Registered Nurse and Advanced Practice
17 Registered Nurse licenses (APRN-CNP, APRN-CNS, or APRN-CNM) in the
18 state;

19 3. Hold current licensure or recognition as an Advanced
20 Practice Registered Nurse in the same role and specialty with
21 prescribing privileges in another state or territory;

22 4. Submit documentation verifying successful completion of a
23 graduate level advanced practice registered nursing education
24 program that included an academic course in pharmacotherapeutic

1 management, and didactic and clinical preparation for prescribing
2 incorporated throughout the program;

3 5. Submit a ~~written statement~~ letter of recommendation from an
4 Oklahoma licensed physician ~~supervising prescriptive authority as~~
5 ~~required by the Board in its rules~~ or an Oklahoma licensed Advanced
6 Practice Registered Nurse with at least ten (10) years of
7 experience;

8 6. Meet continued competency requirements as set forth in Board
9 rules; and

10 7. Provide any and all other evidence as required by the Board
11 in its rules.

12 E. An Advanced Practice Registered Nurse license issued under
13 this section shall be renewed concurrently with the registered nurse
14 license provided that qualifying criteria continue to be met.

15 F. The Board may reinstate a license as set forth in Board
16 rules.

17 SECTION 5. NEW LAW A new section of law to be codified
18 in the Oklahoma Statutes as Section 567.27 of Title 59, unless there
19 is created a duplication in numbering, reads as follows:

20 Either an Advanced Practice Registered Nurse or his or her
21 employer shall be required to carry One Million/Three Million
22 Dollars (\$1,000,000.00/\$3,000,000.00) of malpractice insurance.

1 SECTION 6. NEW LAW A new section of law to be codified
2 in the Oklahoma Statutes as Section 567.28 of Title 59, unless there
3 is created a duplication in numbering, reads as follows:

4 A. An Advanced Practice Registered Nurse shall complete a
5 mentorship with an allopathic or osteopathic physician or an
6 Advanced Practice Registered Nurse with at least ten (10) years of
7 experience for a minimum of three thousand (3,000) hours within
8 three (3) years before applying for full practice authority.

9 B. An Advance Practice Registered Nurse licensed in this state
10 on or before November 1, 2019, who has three (3) years of national
11 certification and is currently in clinical practice shall be granted
12 full practice authority.

13 C. An Advanced Practice Registered Nurse shall have graduated
14 from a program accredited by the Accreditation Commission for
15 Education in Nursing (ACEN) or the Commission of Collegiate Nursing
16 Education (CCNE). As a condition of licensure, an Advanced Practice
17 Registered Nurse shall show evidence of periodic on-campus
18 attendance for assessment and evaluation of student progress and
19 competence in addition to completing a minimum of eight hundred
20 (800) clinical hours in the graduate program.

21 SECTION 7. AMENDATORY 63 O.S. 2011, Section 2-312, is
22 amended to read as follows:

23 Section 2-312. A. A physician, podiatrist, optometrist ~~or a~~,
24 dentist or Advanced Practice Registered Nurse who has complied with

1 the registration requirements of the Uniform Controlled Dangerous
2 Substances Act, in good faith and in the course of such person's
3 professional practice only, may prescribe and administer controlled
4 dangerous substances, or may cause the same to be administered by
5 medical or paramedical personnel acting under the direction and
6 supervision of the physician, podiatrist, optometrist ~~or~~, dentist or
7 Advanced Practice Registered Nurse, and only may dispense controlled
8 dangerous substances pursuant to the provisions of Sections ~~355,~~
9 355.1 and 355.2 of Title 59 of the Oklahoma Statutes.

10 B. A veterinarian who has complied with the registration
11 requirements of the Uniform Controlled Dangerous Substances Act, in
12 good faith and in the course of the professional practice of the
13 veterinarian only, and not for use by a human being, may prescribe,
14 administer, and dispense controlled dangerous substances and may
15 cause them to be administered by an assistant or orderly under the
16 direction and supervision of the veterinarian.

17 C. An ~~advanced practice nurse~~ Advanced Practice Registered
18 Nurse who is recognized to prescribe by the Oklahoma Board of
19 Nursing as ~~an advanced registered nurse practitioner~~ a Certified
20 Nurse Practitioner, clinical nurse specialist or certified nurse-
21 midwife, ~~who is subject to medical direction by a supervising~~
22 ~~physician,~~ pursuant to Section 567.3a of Title 59 of the Oklahoma
23 Statutes, and who has complied with the registration requirements of
24 the Uniform Controlled Dangerous Substances Act, in good faith and

1 in the course of professional practice only, may prescribe and
2 administer Schedule II, III, IV and V controlled dangerous
3 substances.

4 D. An ~~advanced practice nurse~~ Advanced Practice Registered
5 Nurse who is recognized to order, select, obtain and administer
6 drugs by the Oklahoma Board of Nursing as a ~~certified registered~~
7 ~~nurse anesthetist~~ Certified Registered Nurse Anesthetist pursuant to
8 Section 353.1b of Title 59 of the Oklahoma Statutes and who has
9 complied with the registration requirements of the Uniform
10 Controlled Dangerous Substances Act, in good faith and in the course
11 of such practitioner's professional practice only, may order,
12 select, obtain and administer Schedules II through V controlled
13 dangerous substances in a preanesthetic preparation or evaluation;
14 anesthesia induction, maintenance or emergence; or postanesthesia
15 care setting only. A certified registered nurse anesthetist may
16 order, select, obtain and administer such drugs only during the
17 perioperative or periobstetrical period.

18 E. A physician assistant who is recognized to prescribe by the
19 State Board of Medical Licensure and Supervision under the medical
20 direction of a supervising physician, pursuant to subsection D of
21 Section 519.6 of Title 59 of the Oklahoma Statutes, and who has
22 complied with the registration requirements of the Uniform
23 Controlled Dangerous Substances Act, in good faith and in the course
24

1 of professional practice only, may prescribe and administer Schedule
2 II through V controlled dangerous substances.

3 SECTION 8. REPEALER 59 O.S. 2011, Section 567.4b, is
4 hereby repealed.

5 SECTION 9. This act shall become effective November 1, 2018.

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