1	STATE OF OKLAHOMA
2	1st Session of the 60th Legislature (2025)
3	COMMITTEE SUBSTITUTE FOR ENGROSSED
4 5	HOUSE BILL 2298 By: Hilbert, Fetgatter, Cornwell, Turner, and Cantrell of the House
с С	and
0	and
7	Paxton and Murdock of the Senate
8	
9	
10	COMMITTEE SUBSTITUTE
11	An Act relating to the practice of nursing; providing for independent prescriptive authority of Advanced
12	Practice Registered Nurses who meet certain requirements; stating application criteria;
13	specifying duration of authority; providing for disciplinary action; authorizing certain fee;
14	prescribing certain malpractice insurance requirements; directing promulgation of certain
15	advertising rules; requiring certain disclosure; providing penalties; defining terms; providing
16	eligibility requirements for supervising physicians; requiring specified supervision agreement;
17	authorizing supervision fees subject to certain conditions; requiring certain notices; prohibiting
18	certain fees; directing promulgation of certain rules; providing for disciplinary action; requiring
19	certain reporting; directing online publication of certain list; amending 59 O.S. 2021, Section 353.1,
20	as amended by Section 6, Chapter 288, O.S.L. 2022 (59
21	O.S. Supp. 2024, Section 353.1), which relates to definitions used in the Oklahoma Pharmacy Act;
22	modifying and adding definitions; amending 59 O.S. 2021, Section 353.1a, which relates to prescriptive
23	authority of Advanced Practice Registered Nurses; modifying prescriptive authority of certain Advanced
24	Practice Registered Nurses; updating statutory language; amending 59 O.S. 2021, Section 567.3a,

1 which relates to definitions used in the Oklahoma Nursing Practice Act; modifying and adding definitions; amending 59 O.S. 2021, Section 567.4a, 2 which relates to prescriptive authority; specifying authority of the Oklahoma Board of Nursing to grant 3 prescriptive authority; directing the Board to promulgate certain rules; clarifying certain 4 educational requirement; requiring the Formulary 5 Advisory Council to develop, update, and publish certain guidelines; modifying references; conforming language; amending 59 O.S. 2021, Section 567.5a, as 6 amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, Section 567.5a), which relates to 7 Advanced Practice Registered Nurse license; providing for independent prescriptive authority by 8 endorsement; amending 63 O.S. 2021, Section 2-312, as 9 amended by Section 2, Chapter 184, O.S.L. 2022 (63 O.S. Supp. 2024, Section 2-312), which relates to controlled dangerous substances; conforming language; 10 limiting effect of certain authority; updating statutory references and language; providing for 11 codification; and providing an effective date. 12 13 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 14 A new section of law to be codified 15 SECTION 1. NEW LAW in the Oklahoma Statutes as Section 567.4c of Title 59, unless there 16 is created a duplication in numbering, reads as follows: 17 An Advanced Practice Registered Nurse recognized by the 18 Α. Oklahoma Board of Nursing as a Certified Nurse Practitioner, 19 Clinical Nurse Specialist, or Certified Nurse-Midwife who has 20 completed a minimum of six thousand two hundred forty (6,240) 21

22 clinical practice hours with prescriptive authority supervised by a
23 physician may apply to the Oklahoma Board of Nursing for authority

24 to prescribe and order independent of supervision.

B. The application for independent prescriptive authority shall
 include proof that the Certified Nurse Practitioner, Clinical Nurse
 Specialist, or Certified Nurse-Midwife:

Holds a valid, current license in the appropriate Advanced
 Practice Registered Nurse role issued by the Board and is in good
 standing with the Board; and

7 2. Has completed a minimum of six thousand two hundred forty
8 (6,240) clinical practice hours with prescriptive authority
9 supervised by a physician. This paragraph shall not be construed to
10 exclude practice hours with supervised prescriptive authority
11 obtained prior to the effective date of this act from being counted
12 toward the hours required in this paragraph.

C. Independent prescriptive authority granted under this section shall be valid until the expiration of the current license to practice and may be renewed upon application to the Board at the same time and for the same period as the renewal of the license to practice.

D. The Board may suspend or revoke independent prescriptive authority granted under this section in accordance with the Administrative Procedures Act for violation of the provisions of, or the rules promulgated under, the Oklahoma Nursing Practice Act.

E. The Board may assess a reasonable fee for the review of
initial and renewal applications under the provisions of this
section.

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SECTION 2. NEW LAW A new section of law to be codified
 in the Oklahoma Statutes as Section 567.5b of Title 59, unless there
 is created a duplication in numbering, reads as follows:

An Advanced Practice Registered Nurse, or the employer of 4 Α. 5 the Advanced Practice Registered Nurse on his or her behalf, shall carry malpractice insurance or demonstrate proof of financial 6 responsibility in a minimum amount of One Million Dollars 7 (\$1,000,000.00) per occurrence and Three Million Dollars 8 9 (\$3,000,000.00) in the aggregate per year. This requirement shall 10 apply only to the Advanced Practice Registered Nurse and shall not be construed as to require the Advanced Practice Registered Nurse to 11 12 provide malpractice insurance coverage to any supervising physician.

13 B. An Advanced Practice Registered Nurse who is employed by or under contract with a federal agency that carries malpractice 14 insurance in any amount on behalf of the Advanced Practice 15 Registered Nurse shall be deemed in compliance with subsection A of 16 17 this section when practicing under such federal employment or However, to the extent the Advanced Practice Registered 18 contract. Nurse practices outside of such federal employment or contract, the 19 Advanced Practice Registered Nurse, or his or her employer, shall 20 comply with subsection A of this section. 21

22 SECTION 3. NEW LAW A new section of law to be codified 23 in the Oklahoma Statutes as Section 567.5c of Title 59, unless there 24 is created a duplication in numbering, reads as follows:

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A. The Oklahoma Board of Nursing shall promulgate rules
 governing the advertising of health care services by Advanced
 Practice Registered Nurses to include, but not be limited to, the
 specialty areas or types of health care services Advanced Practice
 Registered Nurses may advertise based on their training or
 experience.

B. Any such advertisement shall clearly state that the person
providing such services is an Advanced Practice Registered Nurse and
shall not imply that the Advanced Practice Registered Nurse is a
physician or that he or she may perform any medical service or
prescribe any medication beyond those authorized under state law or
in a manner otherwise inconsistent with state law.

C. An Advanced Practice Registered Nurse who violates the provisions of this section shall be subject to disciplinary action by the Oklahoma Board of Nursing which may include, but not be limited to, revocation of licensure.

17 SECTION 4. NEW LAW A new section of law to be codified 18 in the Oklahoma Statutes as Section 479.1 of Title 59, unless there 19 is created a duplication in numbering, reads as follows:

20 A. As used in this section:

1. "Advanced Practice Registered Nurse" has the same meaning as
 defined in Section 567.3a of Title 59 of the Oklahoma Statutes,
 except that such term does not include a Certified Registered Nurse
 Anesthetist;

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2. "Board" means the State Board of Medical Licensure and
 Supervision or the State Board of Osteopathic Examiners, or both, as
 the context indicates; and

3. The terms "supervising physician" and "supervision" have the
5 same meaning as defined in Section 567.3a of Title 59 of the
6 Oklahoma Statutes.

B. To be eligible to serve as a supervising physician for an
Advanced Practice Registered Nurse who has not obtained independent
prescriptive authority under Section 1 of this act, the physician
shall meet the following criteria:

Have possession of a full and unrestricted license to
 practice allopathic or osteopathic medicine issued by the State
 Board of Medical Licensure and Supervision or the State Board of
 Osteopathic Examiners;

Have possession of a valid registration to prescribe
 controlled substances issued by the Drug Enforcement Administration
 and the Oklahoma State Bureau of Narcotics and Dangerous Drugs
 Control; and

Be trained and fully qualified in the field of the Advanced
 Practice Registered Nurse's specialty as determined by the
 physician's respective Board.

C. A supervising physician shall enter into a written
supervision agreement with each Advanced Practice Registered Nurse
he or she supervises. The supervising physician shall file the

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supervision agreement with his or her respective Board in the manner
 prescribed by such Board. The supervision agreement shall specify:

3 1. Any fees charged to the Advanced Practice Registered Nurse
4 for supervision services in accordance with subsection D of this
5 section;

2. The scope of the Advanced Practice Registered Nurse's
prescriptive authority, subject to any limits on scope of
prescriptive authority provided by the rules of the Oklahoma Board
of Nursing;

A description of the extent of the supervision required;
 4. The duties and responsibilities of the supervising
 physician;

5. Procedures for notice to be provided by the supervising
 physician to Advanced Practice Registered Nurses for periods of
 absence in accordance with subsection E of this section; and

6. One or more alternate physicians designated to supervise the
 Advanced Practice Registered Nurse in such periods of absence in
 accordance with the rules promulgated under subsection H of this
 section.

D. 1. A supervising physician may charge a reasonable fee to the Advanced Practice Registered Nurse for his or her supervision services. Any such fees shall be:

a. disclosed in the supervision agreement required under
 subsection C of this section,

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1 b. appropriate based on the actual duties and responsibilities of the supervising physician as 2 outlined in the supervision agreement, and 3 a fair market value hourly rate in accordance with the 4 с. 5 rules promulgated under subsection H of this section, or by mutual agreement between the Advanced Practice 6 Registered Nurse and supervising physician. 7 2. The provisions of this subsection shall apply only to 8 9 compensation received by the supervising physician directly from the Advanced Practice Registered Nurse. This subsection shall not be 10 construed to:

preclude a supervising physician from entering into a 12 a. payment arrangement for supervision fees to be paid by 13 his or her employer or health care entity in lieu of 14 the Advanced Practice Registered Nurse, 15 b. preclude an employer or health care entity of a 16 supervising physician from prohibiting, limiting, or 17 otherwise addressing such supervision fees through 18 policies, contracts, or bylaws, or 19 apply to or impact any compensation a supervising 20 с. physician receives from his or her employer or health 21 care entity for supervision services. 22 A supervising physician shall notify all Advanced Practice 23 Ε.

Registered Nurses under his or her supervision of reasonably

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anticipated periods of unavailability or incapacity on the part of
 the supervising physician. Notice shall be given by the method
 agreed to by the supervising physician and the Advanced Practice
 Registered Nurse within the written supervision agreement.

5 F. The supervising physician shall report to his or her respective Board, and shall notify all Advanced Practice Registered 6 Nurses under his or her supervision of, any changes to the 7 supervising relationship within thirty (30) calendar days including, 8 9 but not limited to, the addition or removal of an Advanced Practice 10 Registered Nurse under the physician's supervision or a change to the physician's practice address or contact information. 11 The 12 physician's supervision agreements shall be amended as necessary to 13 reflect any such changes.

G. The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners shall not charge any fees to supervising physicians or Advanced Practice Registered Nurses for the maintenance or oversight of supervision agreements or other administrative functions related to the implementation or enforcement of this section.

H. The State Board of Medical Licensure and Supervision and the
State Board of Osteopathic Examiners shall promulgate a uniform set
of rules establishing standards for proper supervision of Advanced
Practice Registered Nurses who have not obtained independent
prescriptive authority under Section 1 of this act, including:

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The charging of reasonable fees to provide supervision
 services. The rules shall establish a fair market value hourly rate
 for such fees, which shall be redetermined biennially;

2. Continuous availability of direct communications either in
person or by electronic communications between the Advanced Practice
Registered Nurse and supervising physician;

3. Oversight and acceptance of responsibility for the ordering
and transmission of written, telephonic, electronic, or oral
prescriptions for drugs and other medical supplies, subject to the
formulary established by the Oklahoma Board of Nursing;

Review of prescribing patterns of the Advanced Practice
 Registered Nurse;

13 5. The delineation of a plan for emergencies; and

14 6. The designation of one or more alternate physicians in the15 absence of the supervising physician.

I. A supervising physician may be subject to disciplinary action by his or her respective Board for failure to comply with the provisions of, or the rules promulgated under, this section including, but not limited to, failure to provide proper supervision.

J. If either Board imposes limits through rule on the number of Advanced Practice Registered Nurses that a supervising physician may supervise, such limits shall not apply when an Advanced Practice

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Registered Nurse is practicing in a hospital licensed by the State
 Department of Health

K. The Executive Director of each Board shall report annually
to the respective Board the number of complaints received in
relation to this section.

L. The State Board of Medical Licensure and Supervision and the
State Board of Osteopathic Examiners shall each create and maintain
on the respective Board's website a list of physicians who are
available to supervise Advanced Practice Registered Nurses.

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 SECTION 5.
 AMENDATORY
 59 O.S. 2021, Section 353.1, as

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 amended by Section 6, Chapter 288, O.S.L. 2022 (59 O.S. Supp. 2024,

 12
 Section 353.1), is amended to read as follows:

13 Section 353.1. For the purposes of the Oklahoma Pharmacy Act:

14 1. "Accredited program" means those seminars, classes,
 15 meetings, work projects, and other educational courses approved by
 16 the Board State Board of Pharmacy for purposes of continuing
 17 professional education;

18 2. "Act" means the Oklahoma Pharmacy Act;

19 3. "Administer" means the direct application of a drug, whether 20 by injection, inhalation, ingestion, or any other means, to the body 21 of a patient;

4. "Assistant pharmacist" means any person presently licensed
as an assistant pharmacist in the State of Oklahoma this state by
the Board pursuant to Section 353.10 of this title and for the

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purposes of the Oklahoma Pharmacy Act shall be considered the same
 as a pharmacist, except where otherwise specified;

5. "Board" or "State Board" means the State Board of Pharmacy; 3 "Certify" or "certification of a prescription" means the 6. 4 5 review of a filled prescription by a licensed pharmacist or a licensed practitioner with dispensing authority to confirm that the 6 medication, labeling, and packaging of the filled prescription are 7 accurate and meet all requirements prescribed by state and federal 8 9 law. For the purposes of this paragraph, "licensed practitioner" 10 shall not include optometrists with dispensing authority;

11 7. "Chemical" means any medicinal substance, whether simple or 12 compound or obtained through the process of the science and art of 13 chemistry, whether of organic or inorganic origin;

14 8. "Compounding" means the combining, admixing, mixing,
15 diluting, pooling, reconstituting, or otherwise altering of a drug
16 or bulk drug substance to create a drug. Compounding includes the
17 preparation of drugs or devices in anticipation of prescription drug
18 orders based on routine, regularly observed prescribing patterns;

9. "Continuing professional education" means professional,
 pharmaceutical education in the general areas of the socioeconomic
 and legal aspects of health care; the properties and actions of
 drugs and dosage forms; and the etiology, characteristics, and
 therapeutics of the diseased state;

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1 10. "Dangerous drug", "legend drug", "prescription drug", or 2 "Rx Only" means a drug:

a. for human use subject to 21 U.S.C., Section 353(b)(1),
or

b. is labeled "Prescription Only", or labeled with the
following statement: "Caution: Federal law restricts
this drug except for to use by or on the order of a
licensed veterinarian.";

9 11. "Director" means the Executive Director of the State Board
10 of Pharmacy unless context clearly indicates otherwise;

11 12. "Dispense" or "dispensing" means the interpretation, 12 evaluation, and implementation of a prescription drug order 13 including the preparation and delivery of a drug or device to a 14 patient or a patient's agent in a suitable container appropriately 15 labeled for subsequent administration to, or use by, a patient. 16 Dispense includes sell, distribute, leave with, give away, dispose 17 of, deliver, or supply;

18 13. "Dispenser" means a retail pharmacy, hospital pharmacy, a 19 group of chain pharmacies under common ownership and control that do 20 not act as a wholesale distributor, or any other person authorized 21 by law to dispense or administer prescription drugs, and the 22 affiliated warehouses or distributions of such entities under common 23 ownership and control that do not act as a wholesale distributor. 24 For the purposes of this paragraph, <u>"dispenser"</u> dispenser does not

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1 mean a person who dispenses only products to be used in animals in 2 accordance with 21 U.S.C., Section 360b(a)(5);

14. "Distribute" or "distribution" means the sale, purchase,
trade, delivery, handling, storage, or receipt of a product, and
does not include the dispensing of a product pursuant to a
prescription executed in accordance with 21 U.S.C., Section
353(b)(1) or the dispensing of a product approved under 21 U.S.C.,
<u>Section</u> 360b(b); provided, taking actual physical possession of a
product or title shall not be required;

10 15. "Doctor of Pharmacy" means a person licensed by the Board 11 to engage in the practice of pharmacy. The terms "pharmacist", 12 "D.Ph.", and "Doctor of Pharmacy" shall be interchangeable and shall 13 have the same meaning wherever they appear in the Oklahoma Statutes 14 and the rules promulgated by the Board;

15 16. "Drug outlet" means all manufacturers, repackagers, 16 outsourcing facilities, wholesale distributors, third-party 17 logistics providers, pharmacies, and all other facilities which are 18 engaged in dispensing, delivery, distribution, or storage of 19 dangerous drugs;

20 17. "Drugs" means all medicinal substances and preparations 21 recognized by the United States Pharmacopoeia <u>Pharmacopeia</u> and 22 National Formulary, or any revision thereof, and all substances and 23 preparations intended for external and/or internal use in the cure, 24 diagnosis, mitigation, treatment, or prevention of disease in humans or animals and all substances and preparations, other than food,
 intended to affect the structure or any function of the body of a
 human or animals;

4 18. "Drug sample" means a unit of a prescription drug packaged 5 under the authority and responsibility of the manufacturer that is 6 not intended to be sold and is intended to promote the sale of the 7 drug;

8 19. "Durable medical equipment" has the same meaning as
9 provided by Section 2 of this act Section 375.2 of this title;

10 20. "Filled prescription" means a packaged prescription 11 medication to which a label has been affixed which contains such 12 information as is required by the Oklahoma Pharmacy Act;

13 21. "Hospital" means any institution licensed as a hospital by 14 this state for the care and treatment of patients, or a pharmacy 15 operated by the Oklahoma Department of Veterans Affairs;

- 16 22. "Licensed practitioner" means:
- 17 <u>a.</u> an allopathic physician,
- 18 b. an osteopathic physician,
- 19 c. a podiatric physician,
- 20 d. a dentist,
- 21 <u>e.</u> <u>a</u> veterinarian or,
- 22 <u>f.</u> an optometrist, or
- 23 g. an Advanced Practice Registered Nurse,
- 24

licensed to practice and authorized to prescribe dangerous drugs
 within the scope of practice of such practitioner;

3 23. "Manufacturer" or "virtual manufacturer" means with respect 4 to a product:

5 a. a person that holds an application approved under 21 U.S.C., Section 355 or a license issued under 42 6 U.S.C., Section 262 for such product, or if such 7 product is not the subject of an approved application 8 9 or license, the person who manufactured the product, b. a co-licensed partner of the person described in 10 subparagraph a of this paragraph that obtains the 11 product directly from a person described in this 12 subparagraph or subparagraph a of this paragraph, 13 an affiliate of a person described in subparagraph a с. 14 or b of this paragraph who receives the product 15 directly from a person described in this subparagraph 16 or in subparagraph a or b of this paragraph, or 17 d. a person who contracts with another to manufacture a 18

19 product;
20 24. "Manufacturing" means the production, preparation,
21 propagation, compounding, conversion, or processing of a device or a
22 drug, either directly or indirectly by extraction from substances of
23 natural origin or independently by means of chemical or biological
24 synthesis and includes any packaging or repackaging of the

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substances or labeling or relabeling of its container, and the promotion and marketing of such drugs or devices. The term "manufacturing" manufacturing also includes the preparation and promotion of commercially available products from bulk compounds for resale by licensed pharmacies, licensed practitioners, or other persons;

7 25. "Medical gas" means those gases including those in liquid 8 state upon which the manufacturer or distributor has placed one of 9 several cautions, such as "Rx Only", in compliance with federal law; 10 26. "Medical gas order" means an order for medical gas issued 11 by a licensed prescriber;

12 27. "Medical gas distributor" means a person licensed to 13 distribute, transfer, wholesale, deliver, or sell medical gases on 14 drug orders to suppliers or other entities licensed to use, 15 administer, or distribute medical gas and may also include a patient 16 or ultimate user;

17 28. "Medical gas supplier" means a person who dispenses medical18 gases on drug orders only to a patient or ultimate user;

19 29. "Medicine" means any drug or combination of drugs which has 20 the property of curing, preventing, treating, diagnosing, or 21 mitigating diseases, or which is used for that purpose;

30. "Nonprescription drugs" means medicines or drugs which are sold without a prescription and which are prepackaged for use by the consumer and labeled in accordance with the requirements of the

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statutes and regulations of this state and the federal government.
Such items shall also include medical and dental supplies and
bottled or nonbulk chemicals which are sold or offered for sale to
the general public if such articles or preparations meet the
requirements of the Federal Food, Drug, and Cosmetic Act, 21
U.S.C.A., Section 321 et seq.;

7 31. "Outsourcing facility" including "virtual outsourcing 8 facility" means a facility at one geographic location or address 9 that:

a. is engaged in the compounding of sterile drugs,
b. has elected to register as an outsourcing facility,
and

13 c. complies with all requirements of 21 U.S.C., Section 14 353b;

32. "Package" means the smallest individual saleable unit of 15 product for distribution by a manufacturer or repackager that is 16 17 intended by the manufacturer for ultimate sale to the dispenser of such product. For the purposes of this paragraph, "individual 18 saleable unit" means the smallest container of a product introduced 19 into commerce by the manufacturer or repackager that is intended by 20 the manufacturer or repackager for individual sale to a dispenser; 21 33. "Person" means an individual, partnership, limited 22 liability company, corporation, or association, unless the context 23 otherwise requires; 24

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1 34. "Pharmacist-in-charge" or "PIC" means the pharmacist 2 licensed in this state responsible for the management control of a 3 pharmacy and all other aspects of the practice of pharmacy in a 4 licensed pharmacy as defined provided by Section 353.18 of this 5 title;

35. "Pharmacy" means a place regularly licensed by the <u>State</u>
Board of Pharmacy in which prescriptions, drugs, medicines,
chemicals, and poisons are compounded or dispensed or such place
where pharmacists practice the profession of pharmacy, or a pharmacy
operated by the Oklahoma Department of Veterans Affairs;

11 36. "Pharmacy technician", "technician", "Rx tech", or "tech"
12 means a person issued a Technician technician permit by the State
13 Board of Pharmacy to assist the pharmacist and perform
14 nonjudgmental, technical, manipulative, non-discretionary functions
15 in the prescription department under the immediate and direct
16 supervision of a pharmacist;

17 37. "Poison" means any substance which when introduced into the 18 body, either directly or by absorption, produces violent, morbid, or 19 fatal changes, or which destroys living tissue with which such 20 substance comes into contact;

21 38. "Practice of pharmacy" means:

a. the interpretation and evaluation of prescriptionorders,

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1	b.	the compounding, dispensing, administering, and
2		labeling of drugs and devices, except labeling by a
3		manufacturer, repackager <u>,</u> or distributor of
4		nonprescription drugs and commercially packaged legend
5		drugs and devices,
6	с.	the participation in drug selection and drug
7		utilization reviews,
8	d.	the proper and safe storage of drugs and devices and
9		the maintenance of proper records thereof,
10	e.	the responsibility for advising by counseling and
11		providing information, where professionally necessary
12		or where regulated, of therapeutic values, content,
13		hazards, and use of drugs and devices,
14	f.	the offering or performing of those acts, services,
15		operations, or transactions necessary in the conduct,
16		operation, management, and control of a pharmacy, or
17	g.	the provision of those acts or services that are
18		necessary to provide pharmaceutical care;
19	39. "Prep	paration" means an article which may or may not contain
20	sterile produc	cts compounded in a licensed pharmacy pursuant to the
21	order of a lic	censed prescriber;
22	40. "Pres	scriber" means a person licensed in this state who is
23	authorized to	prescribe dangerous drugs within the scope of practice
24	of the person	's profession;

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1	41.	"Pre	scrip	tion" means and includes any order for drug or
2	medical s	uppl	ies w	ritten or signed, or transmitted by word of mouth,
3	telephone	<u>,</u> or	othe	r means of communication:
4		a.	by a	licensed prescriber,
5		b.	unde	r the supervision of an Oklahoma licensed
6			prac	titioner, an Oklahoma licensed advanced practice
7			regi	stered nurse or an Oklahoma licensed by a
8			phys	ician assistant pursuant to a practice agreement,
9			or	
10		с.	(1)	under the supervision of a supervising physician,
11				by a Certified Nurse Practitioner, Clinical Nurse
12				Specialist, or Certified Nurse-Midwife licensed
13				in this state who has not obtained independent
14				prescriptive authority under Section 1 of this
15				act, or
16			(2)	by a Certified Nurse Practitioner, Clinical Nurse
17				Specialist, or Certified Nurse-Midwife licensed
18				in this state who has obtained independent
19				prescriptive authority under Section 1 of this
20				act, or
21		<u>d.</u>	by a	n Oklahoma licensed wholesaler or distributor as
22			auth	orized in Section 353.29.1 of this title;
23	42.	"Pro	duct"	means a prescription drug in a finished dosage
24	form for	admi	nistr	ation to a patient without substantial further

1 manufacturing, such as capsules, tablets, and lyophilized products 2 before reconstitution. <u>"Product" Product</u> does not include blood 3 components intended for transfusion, radioactive drugs or biologics 4 and medical gas;

5 43. "Repackager", including "virtual repackager", means a 6 person who owns or operates an establishment that repacks and 7 relabels a product or package for further sale or distribution 8 without further transaction;

9 44. "Sterile drug" means a drug that is intended for parenteral 10 administration, an ophthalmic or oral inhalation drug in aqueous 11 format, or a drug that is required to be sterile under state and 12 federal law;

45. "Supervising physician" means an individual holding a 13 current license to practice as a physician from the State Board of 14 Medical Licensure and Supervision, pursuant to the provisions of the 15 Oklahoma Allopathic Medical and Surgical Licensure and Supervision 16 Act, or the State Board of Osteopathic Examiners, pursuant to the 17 provisions of the Oklahoma Osteopathic Medicine Act, who supervises 18 an advanced practice registered nurse a Certified Nurse 19 Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife 20 as defined in Section 567.3a of this title who has not obtained 21 independent prescriptive authority under Section 1 of this act, 22 and who is not in training as an intern, resident, or fellow. To be 23 24 eligible to supervise an advanced practice registered nurse, such

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<u>The supervising</u> physician shall remain in compliance with the rules promulgated by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners;

4 46. "Supportive personnel" means technicians and auxiliary
5 supportive persons who are regularly paid employees of a pharmacy
6 who work and perform tasks in the pharmacy as authorized by Section
7 353.18A of this title;

47. "Third-party logistics provider" including "virtual third-8 9 party logistics provider" means an entity that provides or coordinates warehousing, or other logistics services of a product in 10 interstate commerce on behalf of a manufacturer, wholesale 11 distributor, or dispenser of a product but does not take ownership 12 of the product, nor have responsibility to direct the sale or 13 disposition of the product. For the purposes of this paragraph, 14 "third-party logistics provider" third-party logistics provider does 15 not include shippers and the United States Postal Service; 16 48. "Wholesale distributor" including "virtual wholesale 17 distributor" means a person other than a manufacturer, a 18

19 manufacturer's co-licensed partner, a third-party logistics 20 provider, or repackager engaged in wholesale distribution as defined 21 by 21 U.S.C., Section 353(e)(4) as amended by the Drug Supply Chain 22 Security Act;

23 49. "County jail" means a facility operated by a county for the 24 physical detention and correction of persons charged with, or

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1 convicted of, criminal offenses or ordinance violations or persons 2 found guilty of civil or criminal contempt;

3 50. "State correctional facility" means a facility or
4 institution that houses a prisoner population under the jurisdiction
5 of the Department of Corrections;

51. "Unit dose package" means a package that contains a single
dose drug with the name, strength, control number, and expiration
date of that drug on the label; and

9 52. "Unit of issue package" means a package that provides
10 multiple doses of the same drug, but each drug is individually
11 separated and includes the name, lot number, and expiration date.
12 SECTION 6. AMENDATORY 59 O.S. 2021, Section 353.1a, is
13 amended to read as follows:

Section 353.1a. A. Prescribing 1. Prescriptive authority 14 shall be allowed, under the medical direction of a current 15 supervision agreement with a supervising physician, for an advanced 16 practice nurse a licensed Advanced Practice Registered Nurse 17 recognized by the Oklahoma Board of Nursing in one of the following 18 categories: advanced registered nurse practitioners, clinical nurse 19 20 specialists, or certified nurse-midwives as a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife 21 who has not obtained independent prescriptive authority under 22 Section 1 of this act. 23

24

<u>2. Prescriptive authority shall be allowed, independent of a</u>
 <u>current supervision agreement with a supervising physician, for a</u>
 <u>licensed Advanced Practice Registered Nurse recognized by the</u>
 <u>Oklahoma Board of Nursing as a Certified Nurse Practitioner,</u>
 <u>Clinical Nurse Specialist, or Certified Nurse-Midwife who has</u>
 <u>obtained independent prescriptive authority under Section 1 of this</u>
 <u>act.</u>

The advanced practice nurse Advanced Practice Registered 8 в. 9 Nurse may write or sign, or transmit by word of mouth, telephone, or other means of communication an order for drugs or medical supplies 10 that is intended to be filled, compounded, or dispensed by a 11 12 pharmacist. The supervising physician, if applicable, and the advanced practice nurse prescribing Advanced Practice Registered 13 Nurse shall be identified at the time of origination of the 14 prescription and the name of the advanced practice nurse prescribing 15 Advanced Practice Registered Nurse shall be printed on the 16 prescription label. 17

B. C. Pharmacists may dispense prescriptions for non-controlled
 prescription drugs authorized by an advanced practice nurse Advanced
 Practice Registered Nurse or physician assistant, not located in
 Oklahoma this state, provided that they are licensed in the state in
 which they are actively prescribing.

23 C. D. 1. Pharmacists may only dispense prescriptions for
 24 controlled dangerous substances prescribed by an advanced practice

1 nurse or physician assistant Advanced Practice Registered Nurse 2 licensed in the State of Oklahoma and supervised by an Oklahomalicensed practitioner this state who meets the criteria in paragraph 3 1 or 2 of subsection A of this section. 4 5 2. Pharmacists may only dispense prescriptions for controlled dangerous substances prescribed by a physician assistant licensed in 6 this state pursuant to a practice agreement. 7 SECTION 7. AMENDATORY 59 O.S. 2021, Section 567.3a, is 8 9 amended to read as follows: Section 567.3a. As used in the Oklahoma Nursing Practice Act: 10 "Board" means the Oklahoma Board of Nursing; 11 1. "The practice of nursing" means the performance of services 12 2. provided for purposes of nursing diagnosis and treatment of human 13 responses to actual or potential health problems consistent with 14 educational preparation. Knowledge and skill are the basis for 15 assessment, analysis, planning, intervention, and evaluation used in 16 17 the promotion and maintenance of health and nursing management of illness, injury, infirmity, restoration or of optimal function, or 18 death with dignity. Practice is based on understanding the human 19 condition across the human lifespan and understanding the 20 relationship of the individual within the environment. This 21 practice includes execution of the medical regime including the 22 administration of medications and treatments prescribed by any 23 person authorized by state law to so prescribe; 24

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1	3.	"Regis	stered nursing" means the practice of the full scope of
2	nursing	which	includes, but is not limited to:
3		a.	assessing the health status of individuals, families <u>,</u>
4			and groups,
5		b.	analyzing assessment data to determine nursing care
6			needs,
7		с.	establishing goals to meet identified health care
8			needs,
9		d.	planning a strategy of care,
10		e.	establishing priorities of nursing intervention to
11			implement the strategy of care,
12		f.	implementing the strategy of care,
13		g.	delegating such tasks as may safely be performed by
14			others, consistent with educational preparation and
15			that do not conflict with the provisions of the
16			Oklahoma Nursing Practice Act,
17		h.	providing safe and effective nursing care rendered
18			directly or indirectly,
19		i.	evaluating responses to interventions,
20		j.	teaching the principles and practice of nursing,
21		k.	managing and supervising the practice of nursing,
22		l.	collaborating with other health professionals in the
23			management of health care,
24			

1	1 m. performing additional nursing functions in acco	ordance
2	2 with knowledge and skills acquired beyond basic	2
3	3 nursing preparation, and	
4	4 n. delegating those nursing tasks as defined in th	ne rules
5	5 of the Board that may be performed by an advance	ed
6	6 unlicensed assistive person Advanced Unlicensed	1
7	7 <u>Assistant</u> ;	
8	8 4. "Licensed practical nursing" means the practice of nu	irsing
9	9 under the supervision or direction of a registered nurse Regi	stered
10	0 <u>Nurse</u> , licensed physician <u>,</u> or dentist. This directed scope of	of
11	1 nursing practice includes, but is not limited to:	
12	2 a. contributing to the assessment of the health st	atus of
13	3 individuals and groups,	
14	4 b. participating in the development and modificate	on of
15	5 the plan of care,	
16	6 c. implementing the appropriate aspects of the pla	an of
17	7 care,	
18	8 d. delegating such tasks as may safely be performe	ed by
19	9 others, consistent with educational preparation	n and
20	0 that do not conflict with the Oklahoma Nursing	
21	1 Practice Act,	
22	2 e. providing safe and effective nursing care rende	ered
23	directly or indirectly,	
24	4	

1	f.	participating in the evaluation of responses to
2		interventions,
3	đ.	teaching basic nursing skills and related principles,
4	h.	performing additional nursing procedures in accordance
5		with knowledge and skills acquired through education
6		beyond nursing preparation, and
7	i.	delegating those nursing tasks as defined in the rules
8		of the Board that may be performed by an advanced
9		unlicensed assistive person Advanced Unlicensed
10		Assistant;
11	5. "Ad	vanced Practice Registered Nurse" means a licensed
12	Registered	Nurse:
13	a.	who has completed an advanced practice registered
14		nursing education program in preparation for one of
15		four recognized advanced practice registered nurse
16		Advanced Practice Registered Nurse roles,
17	b.	who has passed a national certification examination
18		recognized by the Board that measures the advanced
19		practice registered nurse Advanced Practice Registered
20		Nurse role and specialty competencies and who
21		maintains recertification in the role and specialty
22		through a national certification program,
23	c.	who has acquired advanced clinical knowledge and
24		skills in preparation for providing both direct and
	l	

1 indirect care to patients; however, the defining factor for all Advanced Practice Registered Nurses is 2 3 that a significant component of the education and practice focuses on direct care of individuals, 4 5 d. whose practice builds on the competencies of Registered Nurses by demonstrating a greater depth and 6 breadth of knowledge, a greater synthesis of data, and 7 increased complexity of skills and interventions, and 8 9 e. who has obtained a license as an Advanced Practice 10 Registered Nurse in one of the following roles: Certified Registered Nurse Anesthetist, Certified 11 12 Nurse-Midwife, Clinical Nurse Specialist, or Certified Nurse Practitioner. 13

Only those persons who hold a license to practice advanced 14 practice registered nursing in this state shall have the right to 15 use the title "Advanced Practice Registered Nurse" Advanced Practice 16 17 Registered Nurse and to use the abbreviation "APRN". Only those persons who have obtained a license in the following disciplines 18 shall have the right to fulfill the roles and use the applicable 19 titles: Certified Registered Nurse Anesthetist and the abbreviation 20 "CRNA", Certified Nurse-Midwife and the abbreviation "CNM", Clinical 21 Nurse Specialist and the abbreviation "CNS", and Certified Nurse 22 Practitioner and the abbreviation "CNP". 23

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1 It shall be unlawful for any person to assume the role or use 2 the title Advanced Practice Registered Nurse or use the abbreviation "APRN" APRN or use the respective specialty role titles and 3 abbreviations or to use any other titles or abbreviations that would 4 5 reasonably lead a person to believe the user is an Advanced Practice Registered Nurse, unless permitted by the Oklahoma Nursing Practice 6 Act. Any individual doing so shall be guilty of a misdemeanor, 7 which shall be punishable, upon conviction, by imprisonment in the 8 9 county jail for not more than one (1) year or by a fine of not less than One Hundred Dollars (\$100.00) nor more than One Thousand 10 Dollars (\$1,000.00), or by both such imprisonment and fine for each 11 12 offense;

6. "Certified Nurse Practitioner" is <u>means</u> an Advanced Practice Registered Nurse who performs in an expanded role in the delivery of health care:

consistent with advanced educational preparation as a 16 а. Certified Nurse Practitioner in an area of specialty, 17 functions within the Certified Nurse Practitioner b. 18 scope of practice for the selected area of 19 specialization, and 20 is in accord with the standards for Certified Nurse с. 21 Practitioners as identified by the certifying body and 22 approved by the Board. 23

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1	A Certified Nurse Practitioner shall be eligible, in accordance
2	with the scope of practice of the Certified Nurse Practitioner, to
3	obtain recognition as authorized by the Board to prescribe, as
4	defined by the rules promulgated by the Board pursuant to $rac{ extsf{this}}{ extsf{this}}$
5	section and subject to the medical direction of a supervising
6	physician Section 567.4a of this title and Section 1 of this act.
7	This authorization shall not include dispensing drugs, but shall not
8	preclude, subject to federal regulations, the receipt of, the
9	signing for, or the dispensing of professional samples to patients.
10	The Certified Nurse Practitioner accepts responsibility,
11	accountability, and obligation to practice in accordance with usual
12	and customary advanced practice registered nursing standards and
13	functions as defined by the scope of practice/role definition
14	statements for the Certified Nurse Practitioner;
15	7. a. "Clinical Nurse Specialist" is <u>means</u> an Advanced
16	Practice Registered Nurse who holds:
17	(1) a master's degree or higher in nursing with
18	clinical specialization preparation to function
19	in an expanded role,
20	(2) specialty certification from a national
21	certifying organization recognized by the Board,
22	and
23	(3) an Advanced Practice Registered Nurse license
24	from the Board , and

1 <u>(4) any.</u>

Any nurse holding a specialty certification as a 2 Clinical Nurse Specialist valid on January 1, 1994, 3 granted by a national certifying organization 4 5 recognized by the Board, shall be deemed to be a Clinical Nurse Specialist under the provisions of the 6 Oklahoma Nursing Practice Act. 7 b. In the expanded role, the Clinical Nurse Specialist 8 9 performs at an advanced practice level which shall include, but not be limited to: 10 practicing as an expert clinician in the 11 (1)provision of direct nursing care to a selected 12 13 population of patients or clients in any setting, including private practice, 14 (2) managing the care of patients or clients with 15 complex nursing problems, 16 (3) enhancing patient or client care by integrating 17 the competencies of clinical practice, education, 18 consultation, and research, and 19 (4) referring patients or clients to other services. 20 с. A Clinical Nurse Specialist in accordance with the 21 scope of practice of such Clinical Nurse Specialist 22 shall be eligible to obtain recognition as authorized 23 by the Board to prescribe, as defined by the rules 24

1 promulgated by the Board pursuant to this section, and 2 subject to the medical direction of a supervising physician Section 567.4a of this title and Section 1 3 of this act. This authorization shall not include 4 5 dispensing drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, 6 or the dispensing of professional samples to patients. 7 d. The Clinical Nurse Specialist accepts responsibility, 8 9 accountability, and obligation to practice in accordance with usual and customary advanced practice 10 nursing standards and functions as defined by the 11 scope of practice/role definition statements for the 12 Clinical Nurse Specialist; 13

14 8. <u>"Nurse-Midwife" is <u>"Certified Nurse-Midwife" means</u> a nurse 15 who has received an Advanced Practice Registered Nurse license from 16 the Oklahoma Board of Nursing who possesses evidence of 17 certification according to the requirements of the American College 18 of Nurse-Midwives.</u>

A Certified Nurse-Midwife in accordance with the scope of practice of such Certified Nurse-Midwife shall be eligible to obtain recognition as authorized by the Board to prescribe, as defined by the rules promulgated by the Board pursuant to this section and subject to the medical direction of a supervising physician Section 567.4a of this title and Section 1 of this act. This authorization

shall not include the dispensing of drugs, but shall not preclude,
 subject to federal regulations, the receipt of, the signing for, or
 the dispensing of professional samples to patients.

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

9 9. "Nurse-midwifery practice" means providing management of care of normal newborns and women, antepartally, intrapartally, 10 postpartally, and gynecologically, occurring within a health care 11 12 system which provides for medical consultation, medical management, or referral, and is in accord with the standards for nurse-midwifery 13 practice as defined by the American College of Nurse-Midwives; 14 "Certified Registered Nurse Anesthetist" is means an 15 10. a. Advanced Practice Registered Nurse who: 16 (1)is certified by the National Board of 17

18Certification and Recertification for Nurse19Anesthetists as a Certified Registered Nurse20Anesthetist within one (1) year following21completion of an approved certified registered22nurse anesthetist Certified Registered Nurse23Anesthetist education program, and continues to24maintain such recertification by the National

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1 Board of Certification and Recertification for Nurse Anesthetists, and

- administers anesthesia in collaboration with a (2) medical doctor, an osteopathic physician, a podiatric physician, or a dentist licensed in this state and under conditions in which timely onsite on-site consultation by such doctor, osteopath, podiatric physician, or dentist is available.
- A Certified Registered Nurse Anesthetist, in b. 10 collaboration with a medical doctor, osteopathic 11 12 physician, podiatric physician, or dentist licensed in this state, and under conditions in which timely, on-13 site consultation by such medical doctor, osteopathic 14 physician, podiatric physician, or dentist is 15 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. 22 A Certified Registered Nurse Anesthetist may order, 23
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1		select, obtain <u>,</u> and administer drugs only during the
2		perioperative or periobstetrical period.
3	с.	A Certified Registered Nurse Anesthetist who applies
4		for authorization to order, select, obtain, and
5		administer drugs shall:
6		(1) be currently recognized as a Certified Registered
7		Nurse Anesthetist in this state,
8		(2) provide evidence of completion, within the two-
9		year period immediately preceding the date of
10		application, of a minimum of fifteen (15) units
11		of continuing education in advanced pharmacology
12		related to the administration of anesthesia as
13		recognized by the National Board of Certification
14		and Recertification for Nurse Anesthetists, and
15		(3) complete and submit a notarized application, on a
16		form prescribed by the Board, accompanied by the
17		application fee established pursuant to this
18		section.
19	d.	The authority to order, select, obtain, and administer
20		drugs shall be terminated if a Certified Registered
21		Nurse Anesthetist has:
22		(1) ordered, selected, obtained, or administered
23		drugs outside of the Certified Registered Nurse
24		Anesthetist scope of practice or ordered,

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1 selected, obtained, or administered drugs for other than therapeutic purposes, or 2 violated any provision of state laws or rules or 3 (2) federal laws or regulations pertaining to the 4 5 practice of nursing or the authority to order, select, obtain, and administer drugs. 6 The Oklahoma Board of Nursing shall notify the State 7 e. Board of Pharmacy after termination of or a change in 8 9 the authority to order, select, obtain, and administer drugs for a Certified Registered Nurse Anesthetist. 10 f. The Board shall provide by rule for biennial 11 application renewal and reauthorization of authority 12 to order, select, obtain, and administer drugs for 13 Certified Registered Nurse Anesthetists. At the time 14 of application renewal, a Certified Registered Nurse 15 Anesthetist shall submit documentation of a minimum of 16 eight (8) units of continuing education, completed 17 during the previous two (2) years, in advanced 18 pharmacology relating to the administration of 19 anesthesia, as recognized by the Council on 20 Recertification of Nurse Anesthetists or the Council 21 on Certification of Nurse Anesthetists National Board 22 of Certification and Recertification for Nurse 23 24 Anesthetists.

1g.This paragraph shall not prohibit the administration2of local or topical anesthetics as now permitted by3law. Provided further, nothing in this paragraph4shall limit the authority of the Board of Dentistry to5establish the qualifications for dentists who direct6the administration of anesthesia.

As used in this paragraph, "collaboration" means an 7 h. agreement between a medical doctor, osteopathic 8 9 physician, podiatric physician, or dentist performing the procedure or directly involved with the procedure 10 and the Certified Registered Nurse Anesthetist working 11 jointly toward a common goal providing services for 12 the same patient. This collaboration involves the 13 joint formulation, discussion, and agreement of the 14 anesthesia plan by both parties, and the collaborating 15 medical doctor, osteopathic physician, podiatric 16 physician, or dentist performing the procedure or 17 directly involved with the procedure and that 18 collaborating physician shall remain available for 19 timely onsite on-site consultation during the delivery 20 of anesthesia for diagnosis, consultation, and 21 treatment of medical conditions; 22 "Supervising physician" means an individual holding a 11. 23

24 current license to practice as a physician from the State Board of

1 Medical Licensure and Supervision or the State Board of Osteopathic Examiners, who supervises a Certified Nurse Practitioner, a Clinical 2 Nurse Specialist, or a Certified Nurse-Midwife who has not obtained 3 independent prescriptive authority under Section 1 of this act, and 4 5 who is not in training as an intern, resident, or fellow. To be eligible to supervise such Advanced Practice Registered Nurse, such 6 The supervising physician shall remain in compliance with the rules 7 promulgated by the State Board of Medical Licensure and Supervision 8 9 or the State Board of Osteopathic Examiners;

"Supervision of an Advanced Practice Registered Nurse with 10 12. prescriptive authority" "Supervision" means overseeing and accepting 11 12 responsibility for the ordering and transmission by assuring availability of the supervising physician to a Certified Nurse 13 Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-14 Midwife of who has not obtained independent prescriptive authority 15 under Section 1 of this act through direct contact, 16 17 telecommunications, or other appropriate electronic means for consultation, assistance with medical emergencies, or patient 18 referral with respect to written, telephonic, electronic, or oral 19

20 prescriptions for drugs and other medical supplies, subject to a 21 defined formulary; and

13. "Advanced Unlicensed Assistant" means any person who has
successfully completed a certified training program approved by the
Board that trains the Advanced Unlicensed Assistant to perform

1 specified technical skills identified by the Board in acute care settings under the direction and supervision of the Registered Nurse 2 or, Licensed Practical Nurse, or Advanced Practice Registered Nurse. 3 SECTION 8. AMENDATORY 59 O.S. 2021, Section 567.4a, is 4 5 amended to read as follows: Section 567.4a. The Oklahoma Board of Nursing may grant 6 prescriptive authority through the Advanced Practice Registered 7 Nurse license to Certified Nurse Practitioners, Clinical Nurse 8 9 Specialists, and Certified Nurse-Midwives who meet the requirements 10 for prescriptive authority identified by law and in the Board's rules. The rules regarding prescriptive authority recognition 11 promulgated by the Oklahoma Board of Nursing pursuant to paragraphs 12 13 6 through 9, 11 and 12 of this section, Section 567.3a of this title, and Sections 1 and 4 of this act shall: 14 1. Define the procedure for documenting supervision by a 15 supervising physician licensed in Oklahoma to practice by the State 16 17 Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, as defined in Section 567.3a of this title, 18 of a Certified Nurse Practitioner, Clinical Nurse Specialist, or 19 Certified Nurse-Midwife who has not obtained independent 20 prescriptive authority under Section 1 of this act. Such procedure 21 shall include a written statement supervision agreement that defines 22 appropriate referral, consultation, and collaboration between the 23 24 Advanced Practice Registered Nurse, recognized to prescribe as

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1 defined in paragraphs 6 through 9, 11 and 12 of Section 567.3a of 2 this title, and the supervising physician. The written statement shall include a method of assuring availability of the supervising 3 physician through direct contact, telecommunications or other 4 5 appropriate electronic means for consultation, assistance with medical emergencies, or patient referral meets the requirements of 6 Section 4 of this act. The written statement supervision agreement 7 shall be part of the initial application and the renewal application 8 9 submitted to the Board for recognition for prescriptive authority for the Advanced Practice Registered Nurse. Changes to the written 10 statement supervision agreement shall be filed with the Board within 11 thirty (30) days of the change and shall be effective on filing; 12 2. Define procedures for assessing the qualifications of 13 applicants for independent prescriptive authority as provided by 14 15 Section 1 of this act; 3. Define minimal requirements for initial application for 16 prescriptive authority which shall include, but not be limited to, 17 evidence of completion of a minimum of forty-five (45) contact hours 18 or three (3) academic credit hours of education in 19 pharmacotherapeutics, clinical application, and use of 20 pharmacological agents in the prevention of illness, and in the 21 restoration and maintenance of health in a program beyond basic 22

23 registered nurse preparation, approved by the Board. Such contact

24 hours or academic credits shall be obtained within a time period of

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1 three (3) years immediately preceding the date of application for 2 prescriptive authority;

3 3. <u>4.</u> Define minimal requirements for application for renewal 4 of prescriptive authority which shall include, but not be limited 5 to, documentation of a minimum of:

- a. fifteen (15) contact hours or one (1) academic credit
 hour of education in pharmacotherapeutics, clinical
 application, and use of pharmacological agents in the
 prevention of illness, and in the restoration and
 maintenance of health in a program beyond basic
 registered nurse preparation, and
- b. two (2) hours of education in pain management or two
 (2) hours of education in opioid use or addiction,
 unless the Advanced Practice Registered Nurse has
 demonstrated to the satisfaction of the Board that the
 Advanced Practice Registered Nurse does not currently
 hold a valid federal Drug Enforcement Administration
 registration number,

19 approved by the Board, within the two-year period immediately 20 preceding the effective date of application for renewal of 21 prescriptive authority. Such minimal requirements for renewal of 22 prescriptive authority for an Advanced Practice Registered Nurse who 23 <u>has obtained independent prescriptive authority under Section 1 of</u> 24 this act shall include, but not be limited to, documentation that

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1	the Advanced Practice Registered Nurse has successfully earned at		
2	least twenty (20) hours of Category I continuing medical education		
3	hours within the two-year period immediately preceding the effective		
4	date of application for renewal of independent prescriptive		
5	authority, which may include the continuing education described in		
6	subparagraphs a and b of this paragraph if such continuing education		
7	meets the criteria for Category I continuing medical education;		
8	4. <u>5.</u> Require that beginning July 1, 2002, an Advanced Practice		
9	Registered Nurse shall demonstrate demonstrates successful		
10	completion of a master's degree or higher in a clinical nurse		
11	specialty one of the following Advanced Practice Registered Nurse		
12	<u>roles:</u>		
13	a. <u>Certified Nurse Practitioner</u> ,		
14	<u>b.</u> <u>Clinical Nurse Specialist, or</u>		
15	<u>c.</u> <u>Certified Nurse-Midwife</u> ,		
16	in order to be eligible for initial application for prescriptive		
17	authority under the provisions of the Oklahoma Nursing Practice Act;		
18	$\frac{5.6}{0.0}$ Define the method for communicating authority to		
19	prescribe or termination of same, and the formulary to the <u>State</u>		
20	Board of Pharmacy, all pharmacies, and all registered pharmacists;		
21	6. 7. Define terminology used in such rules;		
22	$\frac{7}{2}$ <u>8.</u> Define the parameters for the prescribing practices of		
23	the Advanced Practice Registered Nurse;		
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1 8. 9. Define the methods for termination of prescriptive authority for the Advanced Practice Registered Nurse; and 2 9. 3 10. Establish a Formulary Advisory Council that shall 4 a. 5 develop and submit to the Board recommendations for an exclusionary formulary that shall list drugs or 6 categories of drugs that shall not be prescribed by an 7 Advanced Practice Registered Nurse recognized to 8 9 prescribe by the Oklahoma Board of Nursing. The Formulary Advisory Council shall also develop and 10 submit to the Board recommendations for practice-11 12 specific prescriptive standards for each category of Advanced Practice Registered Nurse recognized to 13 prescribe by the Oklahoma Board of Nursing pursuant to 14 the provisions of the Oklahoma Nursing Practice Act. 15 The Board shall either accept or reject the 16 recommendations made by the Council. No amendments to 17 the recommended exclusionary formulary may be made by 18 the Board without the approval of the Formulary 19 Advisory Council. 20 b. The Formulary Advisory Council shall be composed of 21

(1) four members, to include a pediatrician, an obstetrician-gynecological physician, a general

twelve (12) members as follows:

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1		internist, and a family practice physician;
2		provided, that three of such members shall be
3		appointed by the Oklahoma State Medical
4		Association, and one shall be appointed by the
5		Oklahoma Osteopathic Association,
6	(2)	four members who are registered pharmacists,
7		appointed by the Oklahoma Pharmaceutical
8		Pharmacists Association, and
9	(3)	four members, one of whom shall be a Certified
10		Nurse Practitioner, one of whom shall be a
11		Clinical Nurse Specialist, one of whom shall be a
12		Certified Nurse-Midwife, and one of whom shall be
13		a current member of the Oklahoma Board of
14		Nursing, all of whom shall be appointed by the
15		Oklahoma Board of Nursing.
16	c. All	professional members of the Formulary Advisory
17	Coun	cil shall be in active clinical practice, at least
18	fift	y percent (50%) of the time, within their defined
19	area	of specialty. The members of the Formulary
20	Advi	sory Council shall serve at the pleasure of the
21	appo	inting authority for a term of three (3) years.
22	The	terms of the members shall be staggered. Members
23	of t	he Council may serve beyond the expiration of

1 the original appointing authority. A vacancy on the Council shall be filled for the balance of the 2 unexpired term by the original appointing authority. 3 d. Members of the Council shall elect a chair and a vice-4 5 chair vice chair from among the membership of the Council. For the transaction of business, at least 6 seven members, with a minimum of two members present 7 from each of the identified categories of physicians, 8 9 pharmacists, and advanced practice registered nurses 10 Advanced Practice Registered Nurses, shall constitute a quorum. The Council shall recommend and the Board 11 12 shall approve and implement an initial exclusionary formulary on or before January 1, 1997. The Council 13 and the Board shall annually review the approved 14 exclusionary formulary and shall make any necessary 15 revisions utilizing the same procedures used to 16 develop the initial exclusionary formulary. 17 SECTION 9. AMENDATORY 59 O.S. 2021, Section 567.5a, as 18 amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, 19 20 Section 567.5a), is amended to read as follows: Section 567.5a. A. All applicants for a license to practice as 21 an Advanced Practice Registered Nurse shall be subject to Section 22

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567.8 of this title.

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

3 1. Submit a completed written application and appropriate fees
4 as established by the <u>Oklahoma</u> Board <u>of Nursing;</u>

5 2. Submit a criminal history records check that complies with6 Section 567.18 of this title;

3. Hold a current Registered Nurse license in this state; 7 Have completed an advanced practice registered nursing 8 4. 9 education program in one of the four advanced practice registered 10 nurse Advanced Practice Registered Nurse roles and a specialty area recognized by the Board. Effective January 1, 2016, the applicant 11 12 shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the 13 following population foci: family/individual across the lifespan, 14 adult-gerontology, neonatal, pediatrics, women's health/gender-15 related, or psychiatric/mental health; 16

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

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

C. The Board may issue a license by endorsement to an AdvancedPractice Registered Nurse licensed under the laws of another state

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1 if the applicant meets the qualifications for licensure in this
2 state. An applicant by endorsement shall:

3 1. Submit a completed written application and appropriate fees4 as established by the Board;

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

7 3. Hold a current Registered Nurse license in this state;
8 4. Hold recognition as an Advanced Practice Registered Nurse in
9 a state or territory;

Have completed an advanced practice registered nursing 10 5. education program in one of the four roles and a specialty area 11 recognized by the Board. Effective January 1, 2016, the applicant 12 shall have completed an accredited graduate level advanced practice 13 registered nursing education program in at least one of the 14 following population foci: family/individual across the lifespan, 15 adult-gerontology, neonatal, pediatrics, women's health/gender-16 related, or psychiatric/mental health; 17

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

7. Meet continued competency requirements as set forth in Boardrules; and

8. Provide any and all other evidence as required by the Boardin its rules.

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1 D. The Board may issue prescriptive authority recognition by endorsement to an Advanced Practice Registered Nurse licensed as an 2 APRN-CNP Advanced Practice Registered Nurse-Certified Nurse 3 Practitioner (APRN-CNP), APRN-CNS Advanced Practice Registered 4 5 Nurse-Clinical Nurse Specialist (APRN-CNS), or APRN-CNM Advanced Practice Registered Nurse-Certified Nurse-Midwife (APRN-CNM) under 6 the laws of another state if the applicant meets the requirements 7 set forth in this section. An applicant for prescriptive authority 8 9 recognition by endorsement shall: Submit a completed written application and appropriate fees 10 1. as established by the Board; 11 12 2. Hold current Registered Nurse and Advanced Practice Registered Nurse licenses (APRN-CNP, APRN-CNS, or APRN-CNM) in the 13 state; 14 Hold current licensure or recognition as an Advanced 15 3. Practice Registered Nurse in the same role and specialty with 16 17 prescribing privileges in another state or territory; Submit documentation verifying successful completion of a 18 4. graduate level graduate-level advanced practice registered nursing 19 education program that included an academic course in 20 pharmacotherapeutic management, and didactic and clinical 21 preparation for prescribing incorporated throughout the program; 22 5. Submit a written statement from an Oklahoma licensed 23 24 physician supervising prescriptive authority all supervision

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1 agreements entered into with supervising physicians as required by 2 the Board in its rules Section 4 of this act, or submit documentation that the applicant meets the requirements for 3 independent prescriptive authority under Section 1 of this act; 4 5 6. Meet continued competency requirements as set forth in Board rules; and 6 7. Provide any and all other evidence as required by the Board 7 in its rules. 8 9 E. An Advanced Practice Registered Nurse license issued under this section shall be renewed concurrently with the registered nurse 10 Registered Nurse license, provided that qualifying criteria continue 11 12 to be met. F. The Board may reinstate a license as set forth in Board 13 rules. 14 AMENDATORY 63 O.S. 2021, Section 2-312, as SECTION 10. 15 amended by Section 2, Chapter 184, O.S.L. 2022 (63 O.S. Supp. 2024, 16 Section 2-312), is amended to read as follows: 17 Section 2-312. A. A physician, podiatrist, optometrist, or a 18 dentist who has complied with the registration requirements of the 19 Uniform Controlled Dangerous Substances Act, in good faith and in 20 the course of such person's professional practice only, may 21 prescribe and administer controlled dangerous substances, or may 22 cause the same to be administered by medical or paramedical 23 personnel acting under the direction and supervision of the 24

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physician, podiatrist, optometrist, or dentist, and only may
 dispense controlled dangerous substances pursuant to the provisions
 of Sections 355.1 and 355.2 of Title 59 of the Oklahoma Statutes.

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

C. An advanced practice nurse Advanced Practice Registered 11 12 Nurse who is recognized to prescribe by the Oklahoma Board of Nursing as an advanced registered nurse practitioner, clinical nurse 13 specialist or certified nurse-midwife, who is subject to medical 14 direction by a supervising physician, pursuant to Section 567.3a of 15 Title 59 of the Oklahoma Statutes, a Certified Nurse Practitioner, 16 17 Clinical Nurse Specialist, or Certified Nurse-Midwife and who has complied with the registration requirements of the Uniform 18 Controlled Dangerous Substances Act, in good faith and in the course 19 of professional practice only, may prescribe and administer Schedule 20 III, IV, and V controlled dangerous substances. If the Advanced 21 Practice Registered Nurse has not obtained independent prescriptive 22 authority under Section 1 of this act, he or she may only prescribe 23 and administer such controlled dangerous substances under the 24

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Supervision of a supervising physician in accordance with the
Oklahoma Nursing Practice Act and Section 4 of this act and shall
not prescribe or administer any controlled dangerous substance in a
schedule that the supervising physician is not registered to
prescribe and administer.

D. An advanced practice nurse Advanced Practice Registered 6 Nurse who is recognized to order, select, obtain, and administer 7 drugs by the Oklahoma Board of Nursing as a certified registered 8 9 nurse anesthetist Certified Registered Nurse Anesthetist pursuant to Section 353.1b of Title 59 of the Oklahoma Statutes and who has 10 complied with the registration requirements of the Uniform 11 12 Controlled Dangerous Substances Act, in good faith and in the course of such practitioner's professional practice only, may order, 13 select, obtain, and administer Schedules II through V controlled 14 dangerous substances in a preanesthetic preparation or evaluation; 15 anesthesia induction, maintenance, or emergence; or postanesthesia 16 care setting only. A certified registered nurse anesthetist 17 Certified Registered Nurse Anesthetist may order, select, obtain, 18 and administer such drugs only during the perioperative or 19 periobstetrical period. 20

E. A physician assistant who is recognized to prescribe by the State Board of Medical Licensure and Supervision under the medical direction of a supervising physician, pursuant to Section 519.6 of Title 59 of the Oklahoma Statutes, and who has complied with the

1	registration requirements of the Uniform Controlled Dangerous
2	Substances Act, in good faith and in the course of professional
3	practice only, may prescribe and administer Schedule II through V
4	controlled dangerous substances.
5	SECTION 11. This act shall become effective November 1, 2025.
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