

BILL SUMMARY
1st Session of the 60th Legislature

Bill No.:	HB2298
Version:	SAHB
Request Number:	
Author:	Speaker Hilbert
Date:	5/20/2025
Impact:	State Budget: \$0

Research Analysis

The Senate Amendments for HB 2298 strikes language that requires the Board to state the reason for a denial of authority and adds that the Board may suspend or revoke independent prescriptive authority in accordance with the Administrative Procedures Act for violation of the Oklahoma Nursing Practice Act. SAHB provides that while an APRN may advertise their services, they must clearly state that they are an APRN and not imply that they are a physician or that they may perform services outside those permitted by law. An APRN who violates this will be subject to disciplinary action which may include revocation of licensure. The Senate Amendments requires a supervising physician to be trained and fully qualified in the APRN's specialty, but a supervising physician for a Certified Nurse-Midwife may be a family practice physician, obstetrician, or gynecologist. A supervising physician must enter into a written agreement with each APRN they supervise which specifies any fees charged for supervision services, the scope of the APRN's prescriptive authority, a description of the extent of supervision required, the duties and responsibilities of the supervising physician, procedures for notice for periods of absence, and one or more alternate physicians to supervise in the absence of the supervising physician. If either Board imposes limits through rule on the number of APRNs that a supervising physician may supervise, those limits will not apply when an APRN is practicing in a hospital licensed by the State Department of Health. The Executive Director of each Board must report annually the number of complaints received in relation to this section. The Boards will create and maintain on their websites a list of physicians available to supervise APRNs. The measure provides that minimal requirements for renewal of prescriptive authority for an APRN who has obtained independent prescriptive authority will include, but not be limited to, documentation that the APRN has successfully earned at least 40 hours of Category I continuing medical education within the two-year period immediate preceding the effective date of the renewal application. The measure strikes the requirement that the Formulary Advisory Council develop guidelines for APRNs who have not obtained independent prescriptive authority. If an APRN does not have independent prescriptive authority, they may only prescribe and administer such controlled dangerous substances under supervision and must not prescribe or administer anything in a schedule that the supervising physician is not registered to prescribe and administer.

HB 2298 allows a qualified Advanced Practice Registered Nurse (APRN) to apply to the Oklahoma Board of Nursing for the authority to prescribe and order independent of supervision. The application for independent prescriptive authority will include the provisions specified in the measure. The measure requires a licensed practitioner to carry malpractice insurance. The Oklahoma Board of Nursing must promulgate rules governing advertising of health care services by APRNs. Nothing in this fact will be construed to allow an APRN to perform any medical service or prescribe any medication beyond those authorized under state law. The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners will make available a list of physicians that are available to supervise APRNs. The measure also provides

that prescriptive authority is allowed for a licensed APRN under a supervising physician in addition to the independent authority addressed in the measure. Pharmacists may only dispense prescriptions for controlled dangerous substances prescribed by a physician assistant license in this state pursuant to a practice agreement.

Prepared By: Suzie Nahach, House Research Staff

Fiscal Analysis

Adoption of SAHBs would cause no change to the fiscal impact of the measure, which remains:

HB 2298 in its current form deals with regulation and licensing at the Oklahoma Board of Nursing. The Board of Nursing is a nonappropriated licensing agency. Any additional efforts as a result of the measure are anticipated to be absorbable through the Boards existing resources. For these reasons HB 2298 in its current form is not anticipated to have a direct fiscal impact on the State Budget or State Revenues.

Prepared By: John McPhetridge, House Fiscal Director

Other Considerations

None.