1	STATE OF OKLAHOMA
2	1st Session of the 60th Legislature (2025)
3	COMMITTEE SUBSTITUTE
4	FOR HOUSE BILL NO. 2298 By: Hilbert
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7	COMMITTEE SUBSTITUTE
8	An Act relating to the practice of nursing; providing for independent prescriptive authority of Advanced
9	Practice Registered Nurses who meet certain requirements; stating application criteria;
10	specifying duration of authority; providing for application approval, denial, reapplication, fees,
11	and independent prescriptive authority revocation; prescribing certain malpractice insurance
12	requirements; directing promulgation of certain advertising rules; providing certain construction;
13	directing certain boards to make specified information available online; providing definitions;
14	providing eligibility requirements for physicians; providing limits; providing for exceptions; providing
15	certain responsibilities; providing for disciplinary action; authorizing penalties; amending 59 O.S. 2021,
16	Section 353.1, as amended by Section 6, Chapter 288, O.S.L. 2022 (59 O.S. Supp. 2024, Section 353.1),
17	which relates to definitions used in the Oklahoma Pharmacy Act; modifying and adding definitions;
18	amending 59 O.S. 2021, Section 353.1a, which relates to prescriptive authority of Advanced Practice
19	Registered Nurses; modifying prescriptive authority of certain Advanced Practice Registered Nurses;
20	updating statutory language; amending 59 O.S. 2021, Section 567.3a, which relates to definitions used in
21	the Oklahoma Nursing Practice Act; modifying and adding definitions; amending 59 O.S. 2021, Section
22	567.4a, which relates to prescriptive authority; specifying authority of the Oklahoma Board of Nursing
23	to grant prescriptive authority; directing the Board to promulgate certain rules; clarifying certain
24	educational requirement; requiring the Formulary

1 Advisory Council to develop, update, and publish certain guidelines; modifying references; conforming 2 language; amending 59 O.S. 2021, Section 567.5a, as amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, Section 567.5a), which relates to 3 Advanced Practice Registered Nurse license; providing for independent prescriptive authority by 4 endorsement; amending 63 O.S. 2021, Section 2-312, as 5 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 6 relating to supervision requirement; updating 7 statutory references and language; providing for codification; and providing an effective date. 8

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10 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

11 SECTION 1. NEW LAW A new section of law to be codified 12 in the Oklahoma Statutes as Section 567.4c of Title 59, unless there 13 is created a duplication in numbering, reads as follows:

14 An Advanced Practice Registered Nurse recognized by the Α. 1. 15 Oklahoma Board of Nursing as a Certified Nurse Practitioner, 16 Clinical Nurse Specialist, or Certified Nurse-Midwife who has 17 completed a minimum of three (3) years of practice with prescriptive 18 authority supervised by a physician may apply to the Oklahoma Board 19 of Nursing for authority to prescribe and order independent of 20 supervision.

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

1 holds a valid, current license in the appropriate a. 2 Advanced Practice Registered Nurse role issued by the Board and is in good standing with the Board, and 3 4 b. has completed a minimum of three (3) years of practice 5 with prescriptive authority supervised by a physician. This subparagraph shall not be construed to exclude 6 7 practice hours with supervised prescriptive authority obtained prior to the effective date of this act from 8 9 being counted toward the hours required in this 10 subparagraph.

Independent prescriptive authority granted under this subsection 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.

B. The Board shall review any application submitted under this section and shall approve or deny the application, stating the reason or reasons for denial, if denied. If denied, the applicant may reapply using the process prescribed by subsection A of this section.

C. The Board may suspend or revoke independent prescriptive
authority granted under this section for good cause at any time.
D. The Board may establish a fee for the review of initial and
renewal applications under the provisions of this section.

Req. No. 13228

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:

4 An Advanced Practice Registered Nurse, or the employer of Α. 5 the Advanced Practice Registered Nurse on his or her behalf, shall 6 carry malpractice insurance or demonstrate proof of financial 7 responsibility in a minimum amount of One Million Dollars 8 (\$1,000,000.00) per occurrence and Three Million Dollars 9 (\$3,000,000.00) in the aggregate per year. The requirement to carry 10 malpractice insurance shall extend only to the Advanced Practice 11 Registered Nurse, and not be construed as to require the Advance 12 Practice Registered Nurse to provide malpractice insurance coverage 13 to any supervising or collaborating physician.

14 An Advanced Practice Registered Nurse who is employed by or Β. 15 under contract with a federal agency that carries malpractice 16 insurance in any amount on behalf of the Advanced Practice 17 Registered Nurse shall be deemed in compliance with subsection A of 18 this section when practicing under such federal employment or 19 contract. However, to the extent the Advanced Practice Registered 20 Nurse practices outside of such federal employment or contract, the 21 Advanced Practice Registered Nurse, or his or her employer, shall 22 comply with subsection A of this section.

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Req. No. 13228

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

A. The Oklahoma Board of Nursing shall promulgate rules
governing 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. Nothing in this act shall be construed to allow an Advanced
Practice Registered Nurse to perform any medical service or
prescribe any medication beyond those authorized under state law or
in a manner otherwise inconsistent with state law.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 479 of Title 59, unless there is created a duplication in numbering, reads as follows:

The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners shall make available, and keep updated, in a conspicuous location on the website of each Board a list of physicians who are available to supervise Advanced Practice Registered Nurses. The Boards shall develop procedures necessary for the implementation of this section.

22 SECTION 5. NEW LAW A new section of law to be codified 23 in the Oklahoma Statutes as Section 479.1 of Title 59, unless there 24 is created a duplication in numbering, reads as follows:

Req. No. 13228

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A. As used in this section:

1. "Advanced Practice Registered Nurse" or "(APRN)" means a
 registered nurse who has obtained a license from the Oklahoma Board
 of Nursing to practice advanced registered nursing not including
 Certified Registered Nurse Anesthetists;

6 2. "Board" means the State Board of Osteopathic Examiners or7 State Board of Medical Licensure and Supervision;

8 3. "Proper physician supervision" means that the supervising 9 physician routinely reviews the prescribing patterns of an Advanced 10 Practice Registered Nurse under his or her supervision and that the 11 supervising physician is available to the Advanced Practice 12 Registered Nurse for consultation in person or by telemedicine 13 within a reasonable timeframe not exceeding twenty-four (24) hours; 14 and

4. "Supervising physician" means a licensed allopathic or
 osteopathic physician in good standing who is responsible for
 supervising and overseeing the prescribing practices of an Advanced
 Practice Registered Nurse.

B. To be eligible to serve as a supervising physician for an
Advanced Practice Registered Nurse, an allopathic or osteopathic
physician shall meet the following criteria:

1. Have possession of a full and unrestricted Oklahoma license
to practice allopathic or osteopathic medicine;

2. Have possession of a valid permit to prescribe controlled
 drugs with the Drug Enforcement Agency (DEA) and Oklahoma Bureau of
 Narcotics and Dangerous Drugs Control (OBNDD); and

3. Have relevant experience in prescribing and administering
similar prescription medications authorized by the formulary
approved by the Formulary Advisory Council within the Board of
Nursing as established in Section 567.4b of this title which the
APRN is authorized to prescribe and administer.

9 C. A supervising physician may charge a reasonable fee to the APRN for his or her supervision services, which shall be disclosed 10 11 in a written agreement. Any fees charged by a supervising physician shall be appropriate based on the actual duties and responsibilities 12 13 of the supervising physician as outlined in a written agreement. 14 The fees charged shall be a fair market value hourly rate as defined 15 by the respective board biannually or by mutual agreement between 16 the APRN and supervising physician as to the consideration of 17 reasonableness. A supervising physician who charges an Advanced 18 Practice Registered Nurse for supervision services and fails to 19 provided proper physician supervision may be subject to discipline 20 by the physician's respective board. This subsection shall not 21 preclude a supervising physician from entering into a payment 22 arrangement for supervision fees to be paid by his or her employer 23 or health care entity in lieu of the APRN. This subsection does not 24 relate to or impact any compensation a supervising physician

Req. No. 13228

receives from his or her employer or health care entity for
 supervision services. It only pertains to compensation received
 directly from the APRN.

D. All supervising physicians shall have a written agreement with each APRN he or she supervises. The written agreement shall outline any fees charged for supervision services, the scope of the Advanced Practice Registered Nurse's practice as defined by the rules of the Board of Nursing, and the extent of the supervision prequired. The physician shall file the written agreement with the respective licensing board.

E. A supervising physician shall notify Advanced Practice Registered Nurses under his or her supervision of reasonably anticipated periods of unavailability or incapacity on the part of the supervising physicians. Notice shall be given by the method agreed to by the supervising physician and the Advanced Practice Registered Nurse within the written supervision agreement.

F. The supervising physician shall report to the Board and Advanced Practice Registered Nurse any changes to the supervising relationship within thirty (30) days, including the addition or removal of an Advanced Practice Registered Nurse or changes to the practice address, and mobile phone numbers.

G. The Board shall not charge any fees to supervising
physicians or Advanced Practice Registered Nurses for the
maintenance and tracking of the supervision relationship.

Req. No. 13228

H. The Board shall promulgate rules establishing the
 expectations for providing proper supervision to Advanced Practice
 Registered Nurses, including:

The charging of reasonable fees to provide supervision
 services;

Continuous availability of direct communications either in
person or by electronic communications between the APRN and
supervising physician;

9 3. Oversight and acceptance of responsibility for the ordering 10 and transmission of written, telephonic, electronic, or oral 11 prescriptions for drugs and other medical supplies, subject to a 12 defined formulary in Section 567.3a of Title 59 of the Oklahoma 13 Statutes;

Review prescribing patterns of an APRN;

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

16 6. The designation of an alternate physician in the absence of17 the supervising physician.

18 I. Failure to comply with these rules may result in19 disciplinary action by the Board.

J. The Executive Director of the respective board shall report annually to the Board the number of complaints received in relation to this section of law.

K. The Executive Director of the respective board shall createand maintain a list of physicians on the agency's official website

Req. No. 13228

who are willing to serve as a supervising physician to an Advanced
 Practice Registered Nurse licensed in Oklahoma.

L. Advanced Practice Registered Nurses employed by or 3 4 contracted by a hospital, defined pursuant to Section 1-701 of Title 5 63 of the Oklahoma Statutes, are exempt from this section. 6 SECTION 6. AMENDATORY 59 O.S. 2021, Section 353.1, as amended by Section 6, Chapter 288, O.S.L. 2022 (59 O.S. Supp. 2024, 7 Section 353.1), is amended to read as follows: 8 9 Section 353.1. For the purposes of the Oklahoma Pharmacy Act: 1. "Accredited program" means those seminars, classes, 10 meetings, work projects, and other educational courses approved by 11 12 the Board State Board of Pharmacy for purposes of continuing 13 professional education; 14 2. "Act" means the Oklahoma Pharmacy Act; 15 "Administer" means the direct application of a drug, whether 3. 16 by injection, inhalation, ingestion, or any other means, to the body 17 of a patient; 18 4. "Assistant pharmacist" means any person presently licensed 19 as an assistant pharmacist in the State of Oklahoma this state by 20 the Board pursuant to Section 353.10 of this title and for the 21 purposes of the Oklahoma Pharmacy Act shall be considered the same 22 as a pharmacist, except where otherwise specified; 23 5. "Board" or "State Board" means the State Board of Pharmacy;

24

Req. No. 13228

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

8 7. "Chemical" means any medicinal substance, whether simple or 9 compound or obtained through the process of the science and art of 10 chemistry, whether of organic or inorganic origin;

11 8. "Compounding" means the combining, admixing, mixing, 12 diluting, pooling, reconstituting, or otherwise altering of a drug 13 or bulk drug substance to create a drug. Compounding includes the 14 preparation of drugs or devices in anticipation of prescription drug 15 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;

21 10. "Dangerous drug", "legend drug", "prescription drug", or
22 "Rx Only" means a drug:

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

Req. No. 13228

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.";

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

7 12. "Dispense" or "dispensing" means the interpretation, 8 evaluation, and implementation of a prescription drug order 9 including the preparation and delivery of a drug or device to a 10 patient or a patient's agent in a suitable container appropriately 11 labeled for subsequent administration to, or use by, a patient. 12 Dispense includes sell, distribute, leave with, give away, dispose 13 of, deliver, or supply;

14 "Dispenser" means a retail pharmacy, hospital pharmacy, a 13. 15 group of chain pharmacies under common ownership and control that do 16 not act as a wholesale distributor, or any other person authorized 17 by law to dispense or administer prescription drugs, and the 18 affiliated warehouses or distributions of such entities under common 19 ownership and control that do not act as a wholesale distributor. 20 For the purposes of this paragraph, "dispenser" dispenser does not 21 mean a person who dispenses only products to be used in animals in 22 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

Req. No. 13228

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;

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

11 16. "Drug outlet" means all manufacturers, repackagers, 12 outsourcing facilities, wholesale distributors, third-party 13 logistics providers, pharmacies, and all other facilities which are 14 engaged in dispensing, delivery, distribution, or storage of 15 dangerous drugs;

16 17. "Drugs" means all medicinal substances and preparations 17 recognized by the United States Pharmacopoeia Pharmacopeia and 18 National Formulary, or any revision thereof, and all substances and 19 preparations intended for external and/or internal use in the cure, 20 diagnosis, mitigation, treatment, or prevention of disease in humans 21 or animals and all substances and preparations, other than food, 22 intended to affect the structure or any function of the body of a 23 human or animals;

24

Req. No. 13228

1 18. "Drug sample" means a unit of a prescription drug packaged 2 under the authority and responsibility of the manufacturer that is 3 not intended to be sold and is intended to promote the sale of the 4 drug;

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

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

10 21. "Hospital" means any institution licensed as a hospital by 11 this state for the care and treatment of patients, or a pharmacy 12 operated by the Oklahoma Department of Veterans Affairs;

13 22. "Licensed practitioner" means:

- 14 <u>a.</u> an allopathic physician,
- 15 b. an osteopathic physician,
- 16 c. a podiatric physician,
- 17 <u>d.</u> <u>a</u> dentist,
- 18 e. a veterinarian or,
- 19 f. an optometrist, or
 - g. an Advanced Practice Registered Nurse,

21 licensed to practice and authorized to prescribe dangerous drugs 22 within the scope of practice of such practitioner;

23 23. "Manufacturer" or "virtual manufacturer" means with respect 24 to a product:

Req. No. 13228

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1 a person that holds an application approved under 21 a. 2 U.S.C., Section 355 or a license issued under 42 U.S.C., Section 262 for such product, or if such 3 product is not the subject of an approved application 4 5 or license, the person who manufactured the product, a co-licensed partner of the person described in 6 b. 7 subparagraph a of this paragraph that obtains the product directly from a person described in this 8 9 subparagraph or subparagraph a of this paragraph, an affiliate of a person described in subparagraph a 10 с. or b of this paragraph who receives the product 11 12 directly from a person described in this subparagraph 13 or in subparagraph a or b of this paragraph, or 14 d. a person who contracts with another to manufacture a 15 product;

16 "Manufacturing" means the production, preparation, 24. 17 propagation, compounding, conversion, or processing of a device or a 18 drug, either directly or indirectly by extraction from substances of 19 natural origin or independently by means of chemical or biological 20 synthesis and includes any packaging or repackaging of the 21 substances or labeling or relabeling of its container, and the 22 promotion and marketing of such drugs or devices. The term 23 "manufacturing" manufacturing also includes the preparation and 24 promotion of commercially available products from bulk compounds for

Req. No. 13228

1 resale by licensed pharmacies, licensed practitioners, or other
2 persons;

3 25. "Medical gas" means those gases including those in liquid 4 state upon which the manufacturer or distributor has placed one of 5 several cautions, such as "Rx Only", in compliance with federal law; 6 26. "Medical gas order" means an order for medical gas issued 7 by a licensed prescriber;

8 27. "Medical gas distributor" means a person licensed to 9 distribute, transfer, wholesale, deliver, or sell medical gases on 10 drug orders to suppliers or other entities licensed to use, 11 administer, or distribute medical gas and may also include a patient 12 or ultimate user;

13 28. "Medical gas supplier" means a person who dispenses medical 14 gases on drug orders only to a patient or ultimate user;

15 29. "Medicine" means any drug or combination of drugs which has 16 the property of curing, preventing, treating, diagnosing, or 17 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 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

Req. No. 13228

1 requirements of the Federal Food, Drug, and Cosmetic Act, 21
2 U.S.C.A., Section 321 et seq.;

3 31. "Outsourcing facility" including "virtual outsourcing 4 facility" means a facility at one geographic location or address 5 that:

- a. is engaged in the compounding of sterile drugs,
 b. has elected to register as an outsourcing facility,
 and
- 9 c. complies with all requirements of 21 U.S.C., Section 10 353b;

"Package" means the smallest individual saleable unit of 11 32. product for distribution by a manufacturer or repackager that is 12 13 intended by the manufacturer for ultimate sale to the dispenser of 14 such product. For the purposes of this paragraph, "individual 15 saleable unit" means the smallest container of a product introduced 16 into commerce by the manufacturer or repackager that is intended by 17 the manufacturer or repackager for individual sale to a dispenser; 18 33. "Person" means an individual, partnership, limited 19 liability company, corporation, or association, unless the context 20 otherwise requires;

21 34. "Pharmacist-in-charge" or "PIC" means the pharmacist 22 licensed in this state responsible for the management control of a 23 pharmacy and all other aspects of the practice of pharmacy in a

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1 licensed pharmacy as defined provided by Section 353.18 of this
2 title;

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

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

14 37. "Poison" means any substance which when introduced into the 15 body, either directly or by absorption, produces violent, morbid, or 16 fatal changes, or which destroys living tissue with which such 17 substance comes into contact;

- 18 38. "Practice of pharmacy" means:
- a. the interpretation and evaluation of prescription
 orders,
- b. the compounding, dispensing, administering, and
 labeling of drugs and devices, except labeling by a
 manufacturer, repackager, or distributor of
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- nonprescription drugs and commercially packaged legend
 drugs and devices,
- 3 c. the participation in drug selection and drug4 utilization reviews,
- d. the proper and safe storage of drugs and devices and
 the maintenance of proper records thereof,
- e. the responsibility for advising by counseling and
 providing information, where professionally necessary
 or where regulated, of therapeutic values, content,
 hazards, and use of drugs and devices,
- f. the offering or performing of those acts, services,
 operations, or transactions necessary in the conduct,
 operation, management, and control of a pharmacy, or
 the provision of those acts or services that are
 - necessary to provide pharmaceutical care;

16 39. "Preparation" means an article which may or may not contain 17 sterile products compounded in a licensed pharmacy pursuant to the 18 order of a licensed prescriber;

40. "Prescriber" means a person licensed in this state who is authorized to prescribe dangerous drugs within the scope of practice of the person's profession;

41. "Prescription" means and includes any order for drug or medical supplies written or signed, or transmitted by word of mouth, telephone, or other means of communication:

Req. No. 13228

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1		a.	by a	licensed prescriber,
2		b.	unde	r the supervision of an Oklahoma licensed
3			prac	titioner, an Oklahoma licensed advanced practice
4			regi	stered nurse or an Oklahoma licensed <u>by a</u>
5			phys	ician assistant pursuant to a practice agreement,
6			or	
7		с.	(1)	under the supervision of a supervising physician,
8				by a Certified Nurse Practitioner, Clinical Nurse
9				Specialist, or Certified Nurse-Midwife licensed
10				in this state who has not obtained independent
11				prescriptive authority under Section 1 of this
12				act, or
13			(2)	by a Certified Nurse Practitioner, Clinical Nurse
14				Specialist, or Certified Nurse-Midwife licensed
15				in this state who has obtained independent
16				prescriptive authority under Section 1 of this
17				act, or
18		<u>d.</u>	by a	n Oklahoma licensed wholesaler or distributor as
19			auth	orized in Section 353.29.1 of this title;
20	42.	"Pro	duct"	means a prescription drug in a finished dosage
21	form for	admi	nistr	ation to a patient without substantial further
22	manufactu	ıring	, suc	h as capsules, tablets, and lyophilized products
23	before re	econs	titut	ion. <u>"Product"</u> <u>Product</u> does not include blood

components intended for transfusion, radioactive drugs or biologics 1 2 and medical gas;

"Repackager", including "virtual repackager", means a 3 43. person who owns or operates an establishment that repacks and 4 5 relabels a product or package for further sale or distribution without further transaction; 6

7 44. "Sterile drug" means a drug that is intended for parenteral administration, an ophthalmic or oral inhalation drug in aqueous 8 9 format, or a drug that is required to be sterile under state and 10 federal law;

11 "Supervising physician" means an individual holding a 45. 12 current license to practice as a physician from the State Board of 13 Medical Licensure and Supervision, pursuant to the provisions of the 14 Oklahoma Allopathic Medical and Surgical Licensure and Supervision 15 Act, or the State Board of Osteopathic Examiners, pursuant to the 16 provisions of the Oklahoma Osteopathic Medicine Act, who supervises 17 an advanced practice registered nurse a Certified Nurse

Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife 19 as defined in Section 567.3a of this title who has not obtained 20 independent prescriptive authority under Section 1 of this act, 21 and who is not in training as an intern, resident, or fellow. To be 22 eligible to supervise an advanced practice registered nurse, such 23 The supervising physician shall remain in compliance with the rules

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promulgated by the State Board of Medical Licensure and Supervision
 or the State Board of Osteopathic Examiners;

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

7 "Third-party logistics provider" including "virtual third-47. party logistics provider" means an entity that provides or 8 9 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 manufacturer's co-licensed partner, a third-party logistics 19 provider, or repackager engaged in wholesale distribution as defined 20 by 21 U.S.C., Section 353(e)(4) as amended by the Drug Supply Chain 21 Security Act;

49. "County jail" means a facility operated by a county for the 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 7. AMENDATORY 59 O.S. 2021, Section 353.1a, is
13 amended to read as follows:

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

<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 11 that is intended to be filled, compounded, or dispensed by a 12 pharmacist. The supervising physician, if applicable, and the 13 advanced practice nurse prescribing Advanced Practice Registered 14 Nurse shall be identified at the time of origination of the 15 prescription and the name of the advanced practice nurse prescribing 16 Advanced Practice Registered Nurse shall be printed on the 17 prescription label.

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.

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

Req. No. 13228

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

1	f.	participating in the evaluation of responses to
2		interventions,
3	g.	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		<u>Assistant</u> ;
11	5. "Adva	anced Practice Registered Nurse" means a licensed
12	Registered Nu	irse:
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
21 22		maintains recertification in the role and specialty through a national certification program,
	с.	
22	с.	through a national certification program,

1 indirect care to patients; however, the defining 2 factor for all Advanced Practice Registered Nurses is that a significant component of the education and 3 4 practice focuses on direct care of individuals, 5 d. whose practice builds on the competencies of Registered Nurses by demonstrating a greater depth and 6 7 breadth of knowledge, a greater synthesis of data, and 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: 11 Certified Registered Nurse Anesthetist, Certified 12 Nurse-Midwife, Clinical Nurse Specialist, or Certified 13 Nurse Practitioner.

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

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 4 abbreviations or to use any other titles or abbreviations that would 5 reasonably lead a person to believe the user is an Advanced Practice Registered Nurse, unless permitted by the Oklahoma Nursing Practice 6 7 Act. Any individual doing so shall be guilty of a misdemeanor, 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 10 than One Hundred Dollars (\$100.00) nor more than One Thousand 11 Dollars (\$1,000.00), or by both such imprisonment and fine for each 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:

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

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 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 .

(4) any
 Any nurse holding a specialty certification as a
 Clinical Nurse Specialist valid on January 1, 1994,
 granted by a national certifying organization

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- 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.
- 8 b. In the expanded role, the Clinical Nurse Specialist
 9 performs at an advanced practice level which shall
 10 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,
- enhancing patient or client care by integrating
 the competencies of clinical practice, education,
 consultation, and research, and
- 20 (4) referring patients or clients to other services.
 21 c. A Clinical Nurse Specialist in accordance with the
 22 scope of practice of such Clinical Nurse Specialist
 23 shall be eligible to obtain recognition as authorized
 24 by the Board to prescribe, as defined by the rules

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

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
10 care of normal newborns and women, antepartally, intrapartally,
11 postpartally, and gynecologically, occurring within a health care
12 system which provides for medical consultation, medical management,
13 or referral, and is in accord with the standards for nurse-midwifery
14 practice as defined by the American College of Nurse-Midwives;

15 "Certified Registered Nurse Anesthetist" is means an 10. a. 16 Advanced Practice Registered Nurse who: 17 (1)is certified by the National Board of 18 Certification and Recertification for Nurse 19 Anesthetists as a Certified Registered Nurse 20 Anesthetist within one (1) year following 21 completion of an approved certified registered 22 nurse anesthetist Certified Registered Nurse 23 Anesthetist education program, and continues to 24 maintain such recertification by the National

Board of Certification and Recertification for
 Nurse Anesthetists, and

- (2) administers anesthesia in collaboration with a medical doctor, an osteopathic physician, a podiatric physician, or a dentist licensed in this state and under conditions in which timely onsite <u>on-site</u> consultation by such doctor, osteopath, podiatric physician, or dentist is available.
- A Certified Registered Nurse Anesthetist, in 10 b. collaboration with a medical doctor, osteopathic 11 12 physician, podiatric physician, or dentist licensed in 13 this state, and under conditions in which timely, on-14 site consultation by such medical doctor, osteopathic 15 physician, podiatric physician, or dentist is 16 available, shall be authorized, pursuant to rules 17 adopted by the Oklahoma Board of Nursing, to order, 18 select, obtain, and administer legend drugs, Schedules 19 II through V controlled substances, devices, and 20 medical gases only when engaged in the preanesthetic 21 preparation and evaluation; anesthesia induction, 22 maintenance, and emergence; and postanesthesia care. 23 A Certified Registered Nurse Anesthetist may order,
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1		select, obtain $\underline{\prime}$ 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 <u>,</u> 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 <u>,</u> or administered
23		drugs outside of the Certified Registered Nurse
24		Anesthetist scope of practice or ordered,

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

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

23 11. "Supervising physician" means an individual holding a 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 4 independent prescriptive authority under Section 1 of this act, and 5 who is not in training as an intern, resident, or fellow. To be eligible to supervise such Advanced Practice Registered Nurse, such 6 7 The supervising physician shall remain in compliance with the rules promulgated by the State Board of Medical Licensure and Supervision 8 9 or the State Board of Osteopathic Examiners;

10 "Supervision of an Advanced Practice Registered Nurse with 12. 11 prescriptive authority" means overseeing and accepting 12 responsibility for the ordering and transmission by assuring 13 availability of the supervising physician to a Certified Nurse 14 Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-15 Midwife of who has not obtained independent prescriptive authority 16 under Section 1 of this act through direct contact, 17 telecommunications, or other appropriate electronic means for 18 consultation, assistance with medical emergencies, or patient 19 referral with respect to written, telephonic, electronic, or oral 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 2 settings under the direction and supervision of the Registered Nurse or, Licensed Practical Nurse or Advanced Practice Registered Nurse. 3 SECTION 9. AMENDATORY 59 O.S. 2021, Section 567.4a, is 4 5 amended to read as follows: 6 Section 567.4a. The Oklahoma Board of Nursing may grant 7 prescriptive authority through the Advanced Practice Registered 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 11 rules. The rules regarding prescriptive authority recognition 12 promulgated by the Oklahoma Board of Nursing pursuant to paragraphs 13 6 through 9, 11 and 12 of this section, Section 567.3a of this 14 title, and Section 1 of this act shall: 1. Define the procedure for documenting supervision by a 15 16 supervising physician licensed in Oklahoma to practice by the State 17 Board of Medical Licensure and Supervision or the State Board of 18 Osteopathic Examiners, as defined in Section 567.3a of this title, 19 of a Certified Nurse Practitioner, Clinical Nurse Specialist, or 20 Certified Nurse-Midwife who has not obtained independent 21 prescriptive authority under Section 1 of this act. Such procedure 22 shall include a written statement that defines appropriate referral, 23 consultation, and collaboration between the Advanced Practice 24 Registered Nurse, recognized to prescribe as defined in paragraphs 6

Req. No. 13228

1 through 9, 11 and 12 of Section 567.3a of this title, and the 2 supervising physician. The written statement shall include a method of assuring availability of the supervising physician through direct 3 contact, telecommunications, or other appropriate electronic means 4 5 for consultation, assistance with medical emergencies, or patient referral. The written statement shall be part of the initial 6 7 application and the renewal application submitted to the Board for recognition for prescriptive authority for the Advanced Practice 8 9 Registered Nurse. Changes to the written statement shall be filed 10 with the Board within thirty (30) days of the change and shall be 11 effective on filing;

Define the procedure for documenting independent
 prescriptive authority for Certified Nurse Practitioners, Clinical
 Nurse Specialists, and Certified Nurse-Midwives who have obtained
 independent prescriptive authority under Section 1 of this act;

16 3. Define minimal requirements for initial application for 17 prescriptive authority which shall include, but not be limited to, 18 evidence of completion of a minimum of forty-five (45) contact hours 19 or three (3) academic credit hours of education in 20 pharmacotherapeutics, clinical application, and use of 21 pharmacological agents in the prevention of illness, and in the 22 restoration and maintenance of health in a program beyond basic 23 registered nurse preparation, approved by the Board. Such contact 24 hours or academic credits shall be obtained within a time period of

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;

4. <u>5.</u> Require that beginning July 1, 2002, an Advanced Practice
Registered Nurse shall demonstrate demonstrates successful
completion of a master's degree or higher in a clinical nurse

Req. No. 13228

1 specialty one of the following Advanced Practice Registered Nurse
2 roles:

- 3 <u>a.</u> <u>Certified Nurse Practitioner</u>,
 - b. Clinical Nurse Specialist, or
- 5 c. Certified Nurse-Midwife,

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in order to be eligible for initial application for prescriptive 6 7 authority under the provisions of the Oklahoma Nursing Practice Act; 5. 6. Define the method for communicating authority to 8 9 prescribe or termination of same, and the formulary to the State 10 Board of Pharmacy, all pharmacies, and all registered pharmacists; 11 6. 7. Define terminology used in such rules; 12 7. 8. Define the parameters for the prescribing practices of 13 the Advanced Practice Registered Nurse; 14 8. 9. Define the methods for termination of prescriptive 15 authority for the Advanced Practice Registered Nurse; and 16 9. 17 10. a. Establish a Formulary Advisory Council that shall 18 develop and submit to the Board recommendations for an 19 exclusionary formulary that shall list drugs or

20categories of drugs that shall not be prescribed by an21Advanced Practice Registered Nurse recognized to22prescribe by the Oklahoma Board of Nursing. The23Formulary Advisory Council shall also develop and24submit to the Board recommendations for practice-

specific prescriptive standards for each category of Advanced Practice Registered Nurse recognized to prescribe by the Oklahoma Board of Nursing pursuant to the provisions of the Oklahoma Nursing Practice Act. The Board shall either accept or reject the recommendations made by the Council. No amendments to the recommended exclusionary formulary may be made by the Board without the approval of the Formulary Advisory Council.

In addition to the other powers and duties of the 10 b. Formulary Advisory Council prescribed by this 11 12 paragraph, the Formulary Advisory Council shall 13 develop guidelines for supervising physicians on best 14 practices for the supervision of Advanced Practice 15 Registered Nurses who have not obtained independent 16 prescriptive authority. The supervision guidelines 17 shall be published on the Board's website and the 18 Formulary Advisory Council shall periodically update 19 the guidelines as necessary.

20c.The Formulary Advisory Council shall be composed of21twelve (12) members as follows:22(1) four members, to include a pediatrician, an23obstetrician-gynecological physician, a general

internist, and a family practice physician;

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2 appointed by the Oklahoma State Medical 3 Association, and one shall be appointed by the 4 Oklahoma Osteopathic Association, 5 (2) four members who are registered pharmacists, 6 appointed by the Oklahoma Pharmaceutical 7 Fharmacists Association, and 8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 Gr 16 d. 17 Council shall be in active clinical practice, at least 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expirat	1		provided $_{\underline{\prime}}$ that three of such members shall be
4 Oklahoma Osteopathic Association, 5 (2) four members who are registered pharmacists, 6 appointed by the Oklahoma Pharmaceutical 7 Pharmacists Association, and 8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be a 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 er 16 d. All professional members of the Formulary Advisory 17 Council shall be in active clinical practice, at least 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	2		appointed by the Oklahoma State Medical
5 (2) four members who are registered pharmacists, 6 appointed by the Oklahoma Pharmaceutical 7 Pharmacists Association, and 8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be a 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 e. 16 d. 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	3		Association, and one shall be appointed by the
6 appointed by the Oklahoma Pharmaceutical 7 Pharmacists Association, and 8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be a 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 er 16 d. 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	4		Oklahoma Osteopathic Association,
7 Pharmacists Association, and 8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 e. 16 d. 17 Council shall be in active clinical practice, at least 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	5		(2) four members who are registered pharmacists,
8 (3) four members, one of whom shall be a Certified 9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 er 16 d. 17 Council shall be in active clinical practice, at least 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	6		appointed by the Oklahoma Pharmaceutical
9 Nurse Practitioner, one of whom shall be a 10 Clinical Nurse Specialist, one of whom shall be a 11 Certified Nurse-Midwife, and one of whom shall be 12 a current member of the Oklahoma Board of 13 Nursing, all of whom shall be appointed by the 14 Oklahoma Board of Nursing. 15 er 16 d. 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	7		Pharmacists Association, and
10Clinical Nurse Specialist, one of whom shall be a11Certified Nurse-Midwife, and one of whom shall be12a current member of the Oklahoma Board of13Nursing, all of whom shall be appointed by the14Oklahoma Board of Nursing.15e.16d.17Council shall be in active clinical practice, at least18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	8		(3) four members, one of whom shall be a Certified
11Certified Nurse-Midwife, and one of whom shall be12a current member of the Oklahoma Board of13Nursing, all of whom shall be appointed by the14Oklahoma Board of Nursing.15e.16d.18fifty percent (50%) of the Formulary Advisory19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	9		Nurse Practitioner, one of whom shall be a
12a current member of the Oklahoma Board of13Nursing, all of whom shall be appointed by the14Oklahoma Board of Nursing.15e.16d.17Council shall be in active clinical practice, at least18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	10		Clinical Nurse Specialist, one of whom shall be a
13Nursing, all of whom shall be appointed by the14Oklahoma Board of Nursing.15e.16d. All professional members of the Formulary Advisory17Council shall be in active clinical practice, at least18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	11		Certified Nurse-Midwife, and one of whom shall be
14Oklahoma Board of Nursing.15e.16d. All professional members of the Formulary Advisory17Council shall be in active clinical practice, at least18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	12		a current member of the Oklahoma Board of
 15 6. 16 17 17 Council shall be in active clinical practice, at least 18 fifty percent (50%) of the time, within their defined 19 area of specialty. The members of the Formulary 20 Advisory Council shall serve at the pleasure of the 21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of 	13		Nursing, all of whom shall be appointed by the
16d.All professional members of the Formulary Advisory17Council shall be in active clinical practice, at least18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	14		Oklahoma Board of Nursing.
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	15	c.	
18fifty percent (50%) of the time, within their defined19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	16	<u>d.</u>	All professional members of the Formulary Advisory
19area of specialty. The members of the Formulary20Advisory Council shall serve at the pleasure of the21appointing authority for a term of three (3) years.22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	17		Council shall be in active clinical practice, at least
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	18		fifty percent (50%) of the time, within their defined
21 appointing authority for a term of three (3) years. 22 The terms of the members shall be staggered. Members 23 of the Council may serve beyond the expiration of	19		area of specialty. The members of the Formulary
22The terms of the members shall be staggered. Members23of the Council may serve beyond the expiration of	20		Advisory Council shall serve at the pleasure of the
23 of the Council may serve beyond the expiration of	21		appointing authority for a term of three (3) years.
	22		The terms of the members shall be staggered. Members
24 their term of office until a successor is appointed by	23		of the Council may serve beyond the expiration of
	24		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.

5 Members of the Council shall elect a chair and a vicee. chair vice chair from among the membership of the 6 7 Council. For the transaction of business, at least seven members, with a minimum of two members present 8 9 from each of the identified categories of physicians, 10 pharmacists, and advanced practice registered nurses Advanced Practice Registered Nurses, shall constitute 11 a quorum. The Council shall recommend and the Board 12 13 shall approve and implement an initial exclusionary 14 formulary on or before January 1, 1997. The Council 15 and the Board shall annually review the approved 16 exclusionary formulary and shall make any necessary 17 revisions utilizing the same procedures used to 18 develop the initial exclusionary formulary.

SECTION 10. AMENDATORY 59 O.S. 2021, Section 567.5a, as amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, Section 567.5a), is amended to read as follows:

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

Req. No. 13228

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d.

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;

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

20 6. Provide any and all other evidence as required by the Board21 in its rules.

C. The Board may issue a license by endorsement to an Advanced Practice Registered Nurse licensed under the laws of another state 24

Req. No. 13228

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

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

21 7. Meet continued competency requirements as set forth in Board 22 rules; and

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

Req. No. 13228

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

Req. No. 13228

Board in its rules, or submit documentation that the applicant meets
 the requirements for independent prescriptive authority under
 Section 1 of this act;
 Meet continued competency requirements as set forth in Board

5 rules; and

7. Provide any and all other evidence as required by the Board7 in its rules.

8 E. An Advanced Practice Registered Nurse license issued under 9 this section shall be renewed concurrently with the registered nurse 10 <u>Registered Nurse</u> license, provided that qualifying criteria continue 11 to be met.

12 F. The Board may reinstate a license as set forth in Board 13 rules.

SECTION 11. AMENDATORY 63 O.S. 2021, Section 2-312, as amended by Section 2, Chapter 184, O.S.L. 2022 (63 O.S. Supp. 2024, 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 physician, podiatrist, optometrist, or dentist, and only may

Req. No. 13228

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.

10 C. <u>1.</u> An advanced practice nurse <u>Advanced Practice Registered</u> 11 <u>Nurse</u> who is recognized to prescribe by the Oklahoma Board of 12 Nursing as an advanced registered nurse practitioner, clinical nurse 13 specialist or certified nurse-midwife, a Certified Nurse

14 Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife

15 but who has not obtained independent prescriptive authority under 16 Section 1 of this act and therefore is subject to medical direction 17 by a current supervision agreement with a supervising physician, 18 pursuant to Section 567.3a of Title 59 of the Oklahoma Statutes, and 19 who has complied with the registration requirements of the Uniform 20 Controlled Dangerous Substances Act, in good faith and in the course of professional practice only, may prescribe and administer Schedule 21 22 III, IV, and V controlled dangerous substances.

23 <u>2. An Advanced Practice Registered Nurse who is recognized to</u>
 24 prescribe by the Oklahoma Board of Nursing as a Certified Nurse

Req. No. 13228

1 Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife 2 who has obtained independent prescriptive authority under Section 1 of this act, and who has complied with the registration requirements 3 4 of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of professional practice only, may prescribe and 5 administer Schedule III, IV, and V controlled dangerous substances. 6 7 3. An Advanced Practice Registered Nurse who is recognized to prescribe, with or without independence, as a Certified Nurse 8 9 Practitioner, Clinical Nurse Specialist, or Certified Nurse Midwife, 10 who is employed or contracted by a hospital, defined pursuant to 11 Section 1-701 of Title 63 of the Oklahoma Statutes, may prescribe 12 and administer certain Schedule II Controlled Dangerous Substances, 13 for acute pain in the hospital setting and hydrocodone or 14 hydrocodone-containing drugs regardless of schedule, for take-home 15 use for no more than three (3) days. 16 An advanced practice nurse Advanced Practice Registered D. 17 Nurse who is recognized to order, select, obtain, and administer 18 drugs by the Oklahoma Board of Nursing as a certified registered 19 nurse anesthetist Certified Registered Nurse Anesthetist pursuant to Section 353.1b of Title 59 of the Oklahoma Statutes and who has 20 21 complied with the registration requirements of the Uniform 22 Controlled Dangerous Substances Act, in good faith and in the course 23 of such practitioner's professional practice only, may order, 24 select, obtain, and administer Schedules II through V controlled

dangerous substances in a preanesthetic preparation or evaluation; anesthesia induction, maintenance, or emergence; or postanesthesia care setting only. A certified registered nurse anesthetist <u>Certified Registered Nurse Anesthetist</u> may order, select, obtain, and administer such drugs only during the perioperative or periobstetrical period.

7 A physician assistant who is recognized to prescribe by the Ε. 8 State Board of Medical Licensure and Supervision under the medical 9 direction of a supervising physician, pursuant to Section 519.6 of 10 Title 59 of the Oklahoma Statutes, and who has complied with the 11 registration requirements of the Uniform Controlled Dangerous 12 Substances Act, in good faith and in the course of professional 13 practice only, may prescribe and administer Schedule II through V 14 controlled dangerous substances.

15 SECTION 12. This act shall become effective November 1, 2025.
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