

BILL SUMMARY
1st Session of the 60th Legislature

Bill No.:	HB2298
Version:	FA1
Request Number:	
Author:	Speaker Hilbert
Date:	3/17/2025
Impact:	State Budget: \$0

Research Analysis

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 requires the Formulary Advisory Council to develop guidelines for supervising physicians on best practices on supervising 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. The measure allows APRNs who have obtained independent prescriptive authority to prescribe and administer Schedule III, IV, and V controlled dangerous substances. An APRN who is recognized to prescribe, with or without independence, who is employed or contracted by a hospital may prescribe and administer certain Schedule II Controlled Dangerous Substances only for acute pain in the hospital setting. These individuals may also prescribe and administer hydrocodone or hydrocodone-containing drugs regardless of schedule for take-home use for no more than three days.

CHANGES IN FLOOR SUB VERSION FROM COMMITTEE SUB:

The floor amendment for HB2298 changes the minimum amount of practice time that an Advanced Practice Registered Nurse must complete with supervised prescriptive authority to apply for independent authority from three years to 6,240 hours. The floor amendment also amends the definition of *supervising physician* and adds a definition of *supervision*. The floor amendment requires the State Board of Osteopathic Examiners and State Board of Medical Licensure and Supervision to promulgate a uniform set of rules establishing expectations for proper supervision of APRNs. The floor amendment removes the requirement that the Executive Director of the respective board creates and maintains a list of physicians willing to serve as supervising physicians.

Prepared By: Suzie Nahach, House Research Staff

Fiscal Analysis

Adoption of FA1 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.

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