

1 State of Arkansas
2 93rd General Assembly
3 Regular Session, 2021
4
5 By: Senator K. Hammer

A Bill

SENATE BILL 186

For An Act To Be Entitled

8 AN ACT TO REMOVE THE COLLABORATIVE PRACTICE AGREEMENT
9 AS APPLICABLE TO ADVANCED PRACTICE REGISTERED NURSES
10 WHO MEET CERTAIN REQUIREMENTS; TO IMPROVE HEALTHCARE
11 ACCESSIBILITY IN ARKANSAS BY CLARIFYING THE PROCESS
12 FOR AN ADVANCED PRACTICE REGISTERED NURSE TO QUALIFY
13 FOR PRESCRIPTIVE AUTHORITY; TO AMEND THE PRESCRIPTIVE
14 AUTHORITY FOR AN ADVANCED PRACTICE REGISTERED NURSE;
15 AND FOR OTHER PURPOSES.

Subtitle

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19 TO REMOVE THE COLLABORATIVE PRACTICE
20 AGREEMENT AS APPLICABLE TO ADVANCED
21 PRACTICE REGISTERED NURSES WHO MEET
22 CERTAIN REQUIREMENTS; AND TO AMEND THE
23 PRESCRIPTIVE AUTHORITY OF AN ADVANCED
24 PRACTICE REGISTERED NURSE.

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27 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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29 SECTION 1. DO NOT CODIFY. Legislative findings and intent.

30 (a) The General Assembly finds that:

31 (1) Advanced practice registered nurses are nurses with advanced
32 education and clinical competencies in providing care to diverse populations
33 in a variety of settings;

34 (2) Advanced practice registered nurses are nationally certified
35 and practice in all fifty (50) states;

36 (3) Twenty-three (23) states authorize advanced practice



1 registered nurses to have full practice authority that includes full
2 prescriptive authority without supervision;

3 (4) Nearly fifty (50) years of research consistently support the
4 high quality and cost-effectiveness of advanced practice registered nurses;

5 (5) Since the 1960s, studies have found no difference in health
6 outcomes, including patient health status, number of prescriptions written,
7 return visits requested, or referral to other providers, of care delivered by
8 an advanced practice registered nurse or physician;

9 (6) Collaborative practice agreements do not add patient safety
10 or added value to the healthcare system, but add to the cost of care for the
11 consumer;

12 (7) Negative impacts of mandatory collaborative practice
13 agreements include without limitation:

14 (A) Potential interruption or closing of an advanced
15 practice registered nurse-operated clinic due to a loss of a collaborative
16 practice physician;

17 (B) Significant added cost to overhead of the practice due
18 to fees charged by many collaborating physicians;

19 (C) Added paperwork for the advanced practice registered
20 nurse and the physician, which adds to the cost of care;

21 (D) Decreased healthcare access by adding a barrier for
22 advanced practice registered nurses who would like to establish a new clinic;

23 (E) Inhibits the establishment of new healthcare access
24 points in rural and medically underserved areas of the state; and

25 (F) Acts as a disincentive to remain in the state to
26 practice for new graduates of Arkansas advanced practice registered nurse
27 programs;

28 (8) The following major groups and organizations support full
29 practice authority for advanced practice registered nurses:

30 (A) The National Governors Association;

31 (B) The National Academy of Medicine, which was formerly
32 named the Institute of Medicine;

33 (C) The AARP, Inc.; and

34 (D) The Federal Trade Commission; and

35 (9) The State of Arkansas should modernize scope of practice
36 laws for advanced practice registered nurses by removing the mandatory

1 collaborative practice agreement for qualified advanced practice registered
 2 nurses, including certified nurse practitioners, clinical nurse specialists,
 3 and certified nurse midwives.

4 (b) It is the intent of the General Assembly to:

5 (1) Increase patient access to health care, reduce healthcare
 6 costs, and promote efficient and timely health care in the State of Arkansas;
 7 and

8 (2) Authorize qualified advanced practice registered nurses,
 9 including certified nurse practitioners, clinical nurse specialists, and
 10 certified nurse midwives, to have full practice authority without a
 11 collaborative practice agreement.

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 13 SECTION 2. Arkansas Code § 17-87-310 is amended to read as follows:

14 17-87-310. Prescriptive authority.

15 (a) The Arkansas State Board of Nursing may grant a certificate of
 16 prescriptive authority to an advanced practice registered nurse who:

17 (1) Submits proof of successful completion of an Arkansas State
 18 Board of Nursing-approved advanced pharmacology course that shall include
 19 preceptorial experience in the prescription of drugs, medicines, and
 20 therapeutic devices; and

21 (2) Either:

22 (A) Has a collaborative practice agreement with a
 23 practicing physician who is licensed under the Arkansas Medical Practices
 24 Act, § 17-95-201 et seq., § 17-95-301 et seq., and § 17-95-401 et seq., or a
 25 podiatrist licensed by the Arkansas Board of Podiatric Medicine under § 17-
 26 96-101 et seq., if employed by the podiatrist, or an advanced practice
 27 registered nurse who has been granted removal of the collaborative practice
 28 agreement requirement, and who has training in scope, specialty, or expertise
 29 to that of the advanced practice registered nurse on file with the Arkansas
 30 State Board of Nursing; or

31 (B)(i) Is granted by the Arkansas State Board of Nursing
 32 the removal of the collaborative practice agreement requirement if the
 33 certified nurse practitioner, clinical nurse specialist, or certified nurse
 34 midwife applies to the Arkansas State Board of Nursing and has completed one
 35 thousand (1,000) hours of practice experience.

36 (ii) Completion of one thousand (1,000) hours of

1 practice experience places a certified nurse practitioner, clinical nurse
 2 specialist, or certified nurse midwife in the status as a qualified advanced
 3 practice nurse.

4 (b)(1) An advanced practice registered nurse with a certificate of
 5 prescriptive authority may receive and prescribe drugs, medicines, or
 6 therapeutic devices appropriate to the advanced practice registered nurse's
 7 area of practice in accordance with rules established by the Arkansas State
 8 Board of Nursing.

9 (2)~~(A)~~ An advanced practice registered nurse's prescriptive
 10 authority shall extend ~~only~~ to drugs listed in ~~Schedules III—V and, if~~
 11 ~~expressly authorized by the collaborative practice agreement, also to those~~
 12 ~~hydrocodone combination products reclassified from Schedule III to Schedule~~
 13 ~~II as of October 6, 2014~~ Schedules II – V.

14 ~~(B) An advanced practice registered nurse's prescriptive~~
 15 ~~authority also extends to drugs listed in Schedule II if:~~

16 ~~(i) The prescription is for an opioid and the~~
 17 ~~prescription is only for a five-day period or less; or~~

18 ~~(ii) The prescription is for a stimulant and meets~~
 19 ~~the following criteria:~~

20 ~~(a) The prescription was originally initiated~~
 21 ~~by a physician;~~

22 ~~(b) The physician has evaluated the patient~~
 23 ~~within six (6) months before the advanced practice registered nurse issues a~~
 24 ~~prescription; and~~

25 ~~(c) The prescription by the advanced practice~~
 26 ~~registered nurse is to treat the same condition as the original prescription.~~

27 (3)(A) The Arkansas State Board of Nursing shall promptly
 28 adopt rules applicable to an advanced practice registered nurse that are
 29 consistent with the Arkansas State Medical Board's rules governing the
 30 prescription of dangerous drugs and controlled substances.

31 (B) Before approval of the Arkansas State Board of
 32 Nursing's rules, the Arkansas State Medical Board shall review the proposed
 33 rules and verify that the proposed rules are consistent with the Arkansas
 34 State Medical Board's rules concerning the prescription of dangerous drugs
 35 and controlled substances.

36 (c) A collaborative practice agreement shall include, but not be

1 limited to, provisions addressing:

2 (1) The availability of the collaborating physician, podiatrist,
3 or advanced practice registered nurse who has been granted removal of the
4 collaborative practice agreement requirement for consultation or referral, or
5 both;

6 (2) Methods of management of the collaborative practice, which
7 shall include protocols for prescriptive authority;

8 (3) Coverage of the healthcare needs of a patient in the
9 emergency absence of the advanced practice registered nurse or physician; and

10 (4) Quality assurance.

11 (d) If a collaborative practice results in complaints of violations of
12 the Arkansas Medical Practices Act, § 17-95-201 et seq., § 17-95-301 et seq.,
13 and § 17-95-401 et seq., the Arkansas State Medical Board may review the role
14 of the physician in the collaborative practice to determine if the physician
15 is unable to manage his or her responsibilities under the agreement without
16 an adverse effect on the quality of care of the patient.

17 (e) If a collaborative practice results in complaints of violations of
18 this chapter, the Arkansas State Board of Nursing may review the role of the
19 advanced practice registered nurse in the collaborative practice to determine
20 if the nurse is unable to manage his or her responsibilities under the
21 agreement without an adverse effect on the quality of care of the patient.

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