INTERIM STUDY PROPOSAL 2017-142

A Bill

By: Representative Lundstrum

Filed with: House Committee on Public Health, Welfare, and Labor
pursuant to A.C.A. §10-3-217.

For An Act To Be Entitled

AN ACT TO REMOVE THE REQUIREMENT FOR A COLLABORATIVE
PRACTICE AGREEMENT AS APPLICABLE TO ADVANCED PRACTICE
REGISTERED NURSES; TO IMPROVE HEALTHCARE
ACCESSIBILITY IN ARKANSAS BY CLARIFYING THE PROCESS
NECESSARY FOR AN ADVANCED PRACTICE REGISTERED NURSE
TO QUALIFY FOR PRESCRIPTIVE AUTHORITY; AND FOR OTHER
PURPOSES.

Subtitle

TO REMOVE THE COLLABORATIVE PRACTICE
AGREEMENT AS APPLICABLE TO ADVANCED
PRACTICE REGISTERED NURSES; AND TO
CLARIFY THE PROCESS NECESSARY FOR AN
ADVANCED PRACTICE REGISTERED NURSE TO
QUALIFY FOR PRESCRIPTIVE AUTHORITY.

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

SECTION 1. DO NOT CODIFY. Legislative findings and intent.
    (a) The General Assembly finds that:
    (1) Advanced practice registered nurses are nurses with a
Master's or doctorate degree in nursing and clinical competencies in
providing care to diverse populations in a variety of settings;
    (2) Advanced practice registered nurses are nationally certified
and practice in all fifty (50) states;
(3) Twenty-two (22) states, two (2) territories, and the District of Columbia authorize advanced practice registered nurses to have full practice authority that includes full prescriptive authority without supervision;

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

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

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

(7) Negative impacts of mandatory collaborative practice agreements include without limitation:
   (A) Potential interruption or closing of an advanced practice registered nurse-operated clinic due to a loss of a collaborative practice physician;
   (B) Significant added cost to overhead of the practice due to higher fees charged by many collaborative physicians;
   (C) Added paperwork for the advanced practice registered nurse and the physician, which adds to the cost of care;
   (D) Decreased healthcare access by adding a barrier for advanced practice registered nurses who would like to establish a new clinic;
   (E) Inhibits the establishment of new healthcare access points in rural and medically underserved areas of the state; and
   (F) Acts as a disincentive to remain in the state to practice for new graduates of Arkansas advanced practice registered nurse programs;

(8) The following major groups and organizations support full practice authority for advanced practice registered nurses:
   (A) The National Governors Association;
   (B) The National Academy of Medicine;
   (C) The American Association of Retired Persons;
   (D) The Federal Trade Commission; and
   (E) The National Council of State Boards of Nursing; and
(9) The State of Arkansas should modernize scope of practice laws for advanced practice registered nurses by removing the mandatory collaborative practice agreement.

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

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

(2) Authorize advanced practice registered nurses to have full prescriptive authority, which also means to have the ability to prescribe, without a collaborative practice agreement.

SECTION 2. Arkansas Code § 17-87-102(2), concerning the definition of collaborative practice agreement, is repealed.

(2) "Collaborative practice agreement" means a written plan that identifies a physician who agrees to collaborate with an advanced practice registered nurse in the joint management of the health care of the advanced practice registered nurse's patients and that outlines procedures for consultation with or referral to the collaborating physician or other healthcare professional as indicated by a patient's healthcare needs.

SECTION 3. Arkansas Code § 17-87-205(b), concerning the Prescriptive Authority Advisory Committee, is amended to read as follows:

(b) The board shall appoint six (6) five (5) members, to be approved by the Governor, who have the following qualifications:

(1) Four (4) members shall be advanced practice registered nurses, at least three (3) of whom hold certificates of prescriptive authority and an active United States Drug Enforcement Administration registration number;

(2) One (1) member shall be a licensed physician who has been involved in a collaborative practice with an advanced practice registered nurse for at least five (5) years; and

(3) One (1) member shall be a licensed pharmacist who has been licensed for at least five (5) years.

SECTION 4. Arkansas Code § 17-87-310 is amended to read as follows:

17-87-310. Prescriptive authority.
(a) The Arkansas State Board of Nursing may grant a certificate of prescriptive authority to an advanced practice registered nurse who:

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

(2) has a collaborative practice agreement with a practicing physician who is licensed under the Arkansas Medical Practices Act, § 17-95-201 et seq., § 17-95-301 et seq., and § 17-95-401 et seq., and who has training in scope, specialty, or expertise to that of the advanced practice registered nurse on file with the Arkansas State Board of Nursing.

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

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

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

(B) Prior to approval of the Arkansas State Board of Nursing’s rules, the Arkansas State Medical Board shall review the proposed rules and verify that the proposed rules are consistent with the Arkansas State Medical Board’s rules concerning the prescription of dangerous drugs and controlled substances.

(c) A collaborative practice agreement shall include, but not be limited to, provisions addressing:

(1) The availability of the collaborating physician for consultation or referral, or both.
(2) Methods of management of the collaborative practice, which shall include protocols for prescriptive authority;

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

(4) Quality assurance.

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

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

Referred by Representative Lundstrum

Prepared by: JMB/JMB