NURSE PRACTITIONER AMENDMENTS
2014 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Paul Ray
Senate Sponsor:
LONG TITLE
General Description:
This bill allows an advanced practice registered nurse to prescribe a schedule II or III
controlled substance without supervision by a consulting physician.
Highlighted Provisions:
This bill:
 allows an advanced practice registered nurse to prescribe a schedule II or III
controlled substance without supervision by a consulting physician; and
 makes technical and conforming amendments.
Money Appropriated in this Bill:
None
Other Special Clauses:
None
Utah Code Sections Affected:
AMENDS:
58-31b-102, as last amended by Laws of Utah 2011, Chapter 366
58-31b-502, as last amended by Laws of Utah 2012, Chapter 234
58-31d-103, as last amended by Laws of Utah 2007, Chapter 57

27 Section 1. Section **58-31b-102** is amended to read:

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28	58-31b-102. Definitions.
29	In addition to the definitions in Section 58-1-102, as used in this chapter:
30	(1) "Administrative penalty" means a monetary fine or citation imposed by the division
31	for acts or omissions determined to constitute unprofessional or unlawful conduct in
32	accordance with a fine schedule established by rule and as a result of an adjudicative
33	proceeding conducted in accordance with Title 63G, Chapter 4, Administrative Procedures Act.
34	(2) "Applicant" means a person who applies for licensure or certification under this
35	chapter by submitting a completed application for licensure or certification and the required
36	fees to the department.
37	(3) "Approved education program" means a nursing education program that meets the
38	minimum standards for educational programs established under this chapter and by division
39	rule in collaboration with the board.
40	(4) "Board" means the Board of Nursing created in Section 58-31b-201.
41	[(5) "Consultation and referral plan" means a written plan jointly developed by an
42	advanced practice registered nurse and a consulting physician that permits the advanced
43	practice registered nurse to prescribe schedule II-III controlled substances in consultation with
44	the consulting physician.]
45	[(6) "Consulting physician" means a physician and surgeon or osteopathic physician
46	and surgeon licensed in accordance with this title who has agreed to consult with an advanced
47	practice registered nurse with a controlled substance license, a DEA registration number, and
48	who will be prescribing schedule II-III controlled substances.]
49	[(7)] (5) "Diagnosis" means the identification of and discrimination between physical
50	and psychosocial signs and symptoms essential to the effective execution and management of
51	health care.
52	[(8)] <u>(6)</u> "Examinee" means a person who applies to take or does take any examination
53	required under this chapter for licensure.
54	[(9)] (7) "Licensee" means a person who is licensed or certified under this chapter.
55	[(10)] (8) "Long-term care facility" means any of the following facilities licensed by
56	the Department of Health pursuant to Title 26, Chapter 21, Health Care Facility Licensing and
57	Inspection Act:
58	(a) a nursing care facility;

59	(b) a small health care facility;
60	(c) an intermediate care facility for people with an intellectual disability;
61	(d) an assisted living facility Type I or II; or
62	(e) a designated swing bed unit in a general hospital.
63	[(11)] (9) "Medication aide certified" means a certified nurse aide who:
64	(a) has a minimum of 2,000 hours experience working as a certified nurse aide;
65	(b) has received a minimum of 60 hours of classroom and 40 hours of practical training
66	that is approved by the division in collaboration with the board, in administering routine
67	medications to patients or residents of long-term care facilities; and
68	(c) is certified by the division as a medication aide certified.
69	$\left[\frac{(12)}{(10)}\right]$ (a) "Practice as a medication aide certified" means the limited practice of
70	nursing under the supervision, as defined by the division by administrative rule, of a licensed
71	nurse, involving routine patient care that requires minimal or limited specialized or general
72	knowledge, judgment, and skill, to an individual who:
73	(i) is ill, injured, infirm, has a physical, mental, developmental, or intellectual
74	disability; and
75	(ii) is in a regulated long-term care facility.
76	(b) "Practice as a medication aide certified":
77	(i) includes:
78	(A) providing direct personal assistance or care; and
79	(B) administering routine medications to patients in accordance with a formulary and
80	protocols to be defined by the division by rule; and
81	(ii) does not include assisting a resident of an assisted living facility, a long term care
82	facility, or an intermediate care facility for people with an intellectual disability to self
83	administer a medication, as regulated by the Department of Health by administrative rule.
84	[(13)] (11) "Practice of advanced practice registered nursing" means the practice of
85	nursing within the generally recognized scope and standards of advanced practice registered
86	nursing as defined by rule and consistent with professionally recognized preparation and
87	education standards of an advanced practice registered nurse by a person licensed under this
88	chapter as an advanced practice registered nurse. Advanced practice registered nursing
89	includes:

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90	(a) maintenance and promotion of health and prevention of disease;
91	(b) diagnosis, treatment, correction, consultation, and referral for common health
92	problems;
93	(c) prescription or administration of prescription drugs or devices including:
94	(i) local anesthesia; <u>and</u>
95	(ii) schedule [IV-V] <u>II-V</u> controlled substances; [and] or
96	[(iii) schedule II-III controlled substances in accordance with a consultation and
97	referral plan; or]
98	(d) the provision of preoperative, intraoperative, and postoperative anesthesia care and
99	related services upon the request of a licensed health care professional by an advanced practice
100	registered nurse specializing as a certified registered nurse anesthetist, including:
101	(i) preanesthesia preparation and evaluation including:
102	(A) performing a preanesthetic assessment of the patient;
103	(B) ordering and evaluating appropriate lab and other studies to determine the health of
104	the patient; and
105	(C) selecting, ordering, or administering appropriate medications;
106	(ii) anesthesia induction, maintenance, and emergence, including:
107	(A) selecting and initiating the planned anesthetic technique;
108	(B) selecting and administering anesthetics and adjunct drugs and fluids; and
109	(C) administering general, regional, and local anesthesia;
110	(iii) postanesthesia follow-up care, including:
111	(A) evaluating the patient's response to anesthesia and implementing corrective
112	actions; and
113	(B) selecting, ordering, or administering the medications and studies listed in
114	Subsection [(13)] <u>(11)</u> (d); and
115	(iv) other related services within the scope of practice of a certified registered nurse
116	anesthetist, including:
117	(A) emergency airway management;
118	(B) advanced cardiac life support; and
119	(C) the establishment of peripheral, central, and arterial invasive lines; and
120	(v) for purposes of Subsection $[(13)]$ (11)(d), "upon the request of a licensed health

121 care professional": 122 (A) means a health care professional practicing within the scope of the health care 123 professional's license, requests anesthesia services for a specific patient; and 124 (B) does not require an advanced practice registered nurse specializing as a certified 125 registered nurse anesthetist to [enter into a consultation and referral plan or] obtain additional 126 authority to select, administer, or provide preoperative, intraoperative, or postoperative 127 anesthesia care and services. 128 [(14)] (12) "Practice of nursing" means assisting individuals or groups to maintain or 129 attain optimal health, implementing a strategy of care to accomplish defined goals and 130 evaluating responses to care and treatment. The practice of nursing requires substantial 131 specialized or general knowledge, judgment, and skill based upon principles of the biological, 132 physical, behavioral, and social sciences, and includes: 133 (a) initiating and maintaining comfort measures; 134 (b) promoting and supporting human functions and responses; 135 (c) establishing an environment conducive to well-being; 136 (d) providing health counseling and teaching; 137 (e) collaborating with health care professionals on aspects of the health care regimen; 138 (f) performing delegated procedures only within the education, knowledge, judgment, 139 and skill of the licensee; and 140 (g) delegating nurse interventions that may be performed by others and are not in 141 conflict with this chapter. 142 [(15)] (13) "Practice of practical nursing" means the performance of nursing acts in the 143 generally recognized scope of practice of licensed practical nurses as defined by rule and as 144 provided in this Subsection $\left[\frac{(15)}{(13)}\right]$ (13) by a person licensed under this chapter as a licensed 145 practical nurse and under the direction of a registered nurse, licensed physician, or other 146 specified health care professional as defined by rule. Practical nursing acts include: 147 (a) contributing to the assessment of the health status of individuals and groups; 148 (b) participating in the development and modification of the strategy of care; 149 (c) implementing appropriate aspects of the strategy of care; 150 (d) maintaining safe and effective nursing care rendered to a patient directly or indirectly; and 151

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152	(e) participating in the evaluation of responses to interventions.
152	[(16)] (14) "Practice of registered nursing" means performing acts of nursing as
154	provided in this Subsection [(16)] (14) by a person licensed under this chapter as a registered
155	nurse within the generally recognized scope of practice of registered nurses as defined by rule.
156	Registered nursing acts include:
157	(a) assessing the health status of individuals and groups;
158	(b) identifying health care needs;
159	(c) establishing goals to meet identified health care needs;
160	(d) planning a strategy of care;
161	(e) prescribing nursing interventions to implement the strategy of care;
162	(f) implementing the strategy of care;
163	(g) maintaining safe and effective nursing care that is rendered to a patient directly or
164	indirectly;
165	(h) evaluating responses to interventions;
166	(i) teaching the theory and practice of nursing; and
167	(j) managing and supervising the practice of nursing.
168	[(17)] <u>(15)</u> "Routine medications":
169	(a) means established medications administered to a medically stable individual as
170	determined by a licensed health care practitioner or in consultation with a licensed medical
171	practitioner; and
172	(b) is limited to medications that are administered by the following routes:
173	(i) oral;
174	(ii) sublingual;
175	(iii) buccal;
176	(iv) eye;
177	(v) ear;
178	(vi) nasal;
179	(vii) rectal;
180	(viii) vaginal;
181	(ix) skin ointments, topical including patches and transdermal;
182	(x) premeasured medication delivered by aerosol/nebulizer; and
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183	(xi) medications delivered by metered hand-held inhalers.
184	[(18)] (16) "Unlawful conduct" is as defined in Sections 58-1-501 and 58-31b-501.
185	[(19)] (17) "Unlicensed assistive personnel" means any unlicensed person, regardless
186	of title, to whom tasks are delegated by a licensed nurse as permitted by rule and in accordance
187	with the standards of the profession.
188	[(20)] (18) "Unprofessional conduct" is as defined in Sections 58-1-501 and
189	58-31b-502 and as may be further defined by rule.
190	Section 2. Section 58-31b-502 is amended to read:
191	58-31b-502. Unprofessional conduct.
192	"Unprofessional conduct" includes:
193	(1) failure to safeguard a patient's right to privacy as to the patient's person, condition,
194	diagnosis, personal effects, or any other matter about which the licensee is privileged to know
195	because of the licensee's or person with a certification's position or practice as a nurse or
196	practice as a medication aide certified;
197	(2) failure to provide nursing service or service as a medication aide certified in a
198	manner that demonstrates respect for the patient's human dignity and unique personal character
199	and needs without regard to the patient's race, religion, ethnic background, socioeconomic
200	status, age, sex, or the nature of the patient's health problem;
201	(3) engaging in sexual relations with a patient during any:
202	(a) period when a generally recognized professional relationship exists between the
203	person licensed or certified under this chapter and patient; or
204	(b) extended period when a patient has reasonable cause to believe a professional
205	relationship exists between the person licensed or certified under the provisions of this chapter
206	and the patient;
207	(4) (a) as a result of any circumstance under Subsection (3), exploiting or using
208	information about a patient or exploiting the licensee's or the person with a certification's
209	professional relationship between the licensee or holder of a certification under this chapter and
210	the patient; or
211	(b) exploiting the patient by use of the licensee's or person with a certification's
212	knowledge of the patient obtained while acting as a nurse or a medication aide certified;
213	(5) unlawfully obtaining, possessing, or using any prescription drug or illicit drug;

H.B. 139 214 (6) unauthorized taking or personal use of nursing supplies from an employer; 215 (7) unauthorized taking or personal use of a patient's personal property; 216 (8) knowingly entering into any medical record any false or misleading information or 217 altering a medical record in any way for the purpose of concealing an act, omission, or record 218 of events, medical condition, or any other circumstance related to the patient and the medical or 219 nursing care provided; 220 (9) unlawful or inappropriate delegation of nursing care; 221 (10) failure to exercise appropriate supervision of persons providing patient care 222 services under supervision of the licensed nurse; 223 (11) employing or aiding and abetting the employment of an unqualified or unlicensed 224 person to practice as a nurse; 225 (12) failure to file or record any medical report as required by law, impeding or 226 obstructing the filing or recording of such a report, or inducing another to fail to file or record 227 such a report; 228 (13) breach of a statutory, common law, regulatory, or ethical requirement of 229 confidentiality with respect to a person who is a patient, unless ordered by a court; 230 (14) failure to pay a penalty imposed by the division; 231 [(15) prescribing a schedule II-III controlled substance without a consulting physician 232 or outside of a consultation and referral plan;] 233 [(16)] (15) violating Section 58-31b-801; and 234 [(17)] (16) violating the dispensing requirements of Section 58-17b-309 or 235 58-17b-309.5, if applicable. 236 Section 3. Section 58-31d-103 is amended to read: 237 58-31d-103. Rulemaking authority -- Enabling provisions. (1) The division may adopt rules necessary to implement Section 58-31d-102. 238 239 (2) As used in Article VIII (1) of the Advanced Practice Registered Nurse Compact. 240 "head of the licensing board" means the executive administrator of the Utah Board of Nursing. 241 (3) For purposes of the Advanced Practice Registered Nurse Compact, "APRN" as 242 defined in Article II (1) of the compact includes an individual who is:

243 (a) licensed to practice under Subsection 58-31b-301(2) as an advanced practice 244 registered nurse; or

245	(b) licensed to practice under Section 58-44a-301 as a certified nurse midwife.
246	(4) An APRN practicing in this state under a multistate licensure privilege may only be
247	granted prescriptive authority if that individual can document completion of graduate level
248	course work in the following areas:
249	(a) advanced health assessment;
250	(b) pharmacotherapeutics; and
251	(c) diagnosis and treatment.
252	(5) (a) An APRN practicing in this state under a multistate privilege who seeks to
253	obtain prescriptive authority must:
254	(i) meet all the requirements of Subsection (4) and this Subsection (5); and
255	(ii) be placed on a registry with the division.
256	(b) To be placed on a registry under Subsection (5)(a)(ii), an APRN must:
257	(i) submit a form prescribed by the division;
258	(ii) pay a fee; and
259	(iii) if prescribing a controlled substance:
260	(A) obtain a controlled substance license as required under Section 58-37-6; and
261	(B) if prescribing a Schedule II or III controlled substance as a nurse midwife, have a
262	consultation and referral plan with a physician licensed in Utah as required under Subsection
263	58-31b-102(13)(c)(iii) or 58-44a-102(8)(b)(iii)(C).

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Office of Legislative Research and General Counsel