- 1 HB683
- 2 139769-2
- 3 By Representative Wren
- 4 RFD: Boards, Agencies and Commissions
- 5 First Read: 12-APR-12

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8 SYNOPSIS: Existing law provides for the licensure of
9 certified registered nurse practitioners and the
10 State Board of Medical Examiners established the
11 qualifications for physicians engaged in
12 collaborative practice with certified registered
13 nurse practitioners.

This bill would allow for the prescribing of certain schedules of controlled substances; would provide for qualifications to obtain a Qualified Alabama Controlled Substances Registration

Certificate (QACSC) and prescription authority; would certify the State Board of Medical Examiners to register and approve certified registered nurse practitioners to obtain or renew a QACSC and would authorize the board to adopt regulations regarding the application procedures, fees, fines, punishment, and conduct for any disciplinary hearings for certified registered nurse practitioners applying for or in possession of a QACSC; would provide for denials of application and

disciplinary action; would provide for an appeals process; would provide for the board to charge and collect fees, costs, and expenses; and would provide for immunity.

Existing law provides for limited access to the controlled substances prescription database and a surcharge on a controlled substance registration certificate.

This bill would provide for access by a certified registered nurse practitioner with a QACSC and payment of the surcharge on each QACSC.

A BILL

TO BE ENTITLED

15 AN ACT

Relating to certified registered nurse practitioners; to add a new Article 3B to Chapter 2 to Title 20 to the Code of Alabama 1975, to allow for the prescribing of certain schedules of controlled substances by certified registered nurse practitioners in collaboration with certain physicians; to provide qualifications of certified registered nurse practitioners to obtain a Qualified Alabama Controlled Substances Registration Certificate (QACSC); to provide for prescriptive authority of certified registered nurse practitioners in possession of a QACSC; to certify the State Board of Medical Examiners to register and approve certified

registered nurse practitioners to obtain or renew a QACSC; to 2 authorize the board to adopt regulations regarding the application procedures, fees, fines, punishment, and conduct 3 for any disciplinary hearings for certified registered nurse practitioners applying for or in possession of a QACSC; to 5 6 provide for denials of applications and for disciplinary 7 action; to provide for an appeals process; to provide for the board to charge and collect fees, costs, and expenses; to 8 provide for immunity; to amend Sections 20-2-214 and 20-2-217 9 10 of the Code of Alabama 1975, relating to the controlled substances prescription database; to provide for access by a 11 12 certified registered nurse practitioner with a QACSC; and to 13 provide for payment of the surcharge on each QACSC. BE IT ENACTED BY THE LEGISLATURE OF ALABAMA: 14 15 Section 1. Article 3B to Chapter 2 of Title 20 is added to the Code of Alabama 1975, to read as follows: 16

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As used in this article, the following words shall 18 have the following meanings: 19

\$20-2-80.

- (1) ADMINISTER. The direct application of a controlled substance, whether by injection, inhalation, ingestion, or any other means, to the body of a patient by any of the following persons:
- a. A collaborating physician or in his or her presence, his or her authorized agent.
- b. A certified registered nurse practitioner in collaborative practice with a physician.

1 c. The patient at the direction and in the presence 2 of the collaborating physician or certified registered nurse 3 practitioners.

- (2) BOARD. The State Board of Medical Examiners.
- (3) CERTIFIED REGISTERED NURSE PRACTITIONER. Any person who is a graduate of an approved program, is licensed by the Alabama Board of Nursing (ABN), and is registered by the ABN to perform medical services in coordination with a physician approved by the State Board of Medical Examiners to engage in collaborative practice with CRNP.
- (4) COLLABORATING PHYSICIAN. A doctor of medicine or a doctor of osteopathy licensed to practice medicine in Alabama who agrees in writing to practice in collaboration with one or more CRNPs in accordance with the rules and regulations adopted by the State Board of Medical Examiners and the Board of Nursing.
- (5) COLLABORATIVE AGREEMENT. A formal relationship between one or more certified CRNPs and a physician or physicians under which these nurses may engage in advanced practice nursing as evidenced by written protocols approved in accordance with Section 34-21-81. The term "collaboration" does not require direct, on-site oversight of the activities of a CRNP by the collaborating physician. The term does require such professional oversight and direction as may be required by the rules and regulations of the State Board of Medical Examiners and the Board of Nursing.

- 1 (6) PHYSICIAN OVERSIGHT OF A CERTIFIED NURSE
 2 PRACTITIONER. Ten percent collaborating physician oversight
 3 with a CRNP or immediate availability by phone, email, text,
 4 video feed, or other telemedicine options between a CRNP and
 5 collaborating physician.
 - (7) PRESCRIBE or PRESCRIBING. The act of issuing a prescription for a controlled substance.
 - (8) PRESCRIPTION. Any order for a controlled substance written or signed or transmitted by word of mouth, telephone, telegraph, closed circuit television, or other means of communication by a legally competent collaborating physician or CRNP authorized by law to prescribe and administer such drug which is intended to be filled, compounded, or dispensed by a pharmacist.

§20-2-81.

(a) The board is designated as the certifying board for the registration and approval of CRNPs in obtaining or renewing a Qualified Alabama Controlled Substances
Registration Certificate, hereinafter QACSC. Only the Joint
Committee of the State Board of Medical Examiners and the
Board of Nursing for Advanced Practice Nurses may adopt
regulations concerning the formulary for any and all
medications including controlled substances. The board shall
establish a unique qualified Alabama controlled substances
registration certificate number that identifies the particular
applicant as a CRNP in collaboration with a physician with a
valid OACSC.

- 1 (b) The board, and its agents, attorneys, or
 2 investigators shall be permitted access to the records of any
 3 physician in collaboration with a CRNP, including patient
 4 records, which would relate to a request for a QACSC, a
 5 renewal of a QACSC or the possible violations of any
 6 provisions of the Alabama Uniform Controlled Substances Act,
 7 this article, or applicable regulations of the board and the
 8 Board of Nursing.
 - (c) The Joint Committee of the board and the Board of Nursing for Advanced Practice Nurses may establish protocols, formularies, or medical regimens which relate to, govern, or regulate a QACSC, and any such protocol, formulary, or medical regimen shall not be considered a rule or regulation under the Alabama Administrative Procedure Act.

§20-2-82.

The board may grant a QACSC to a CRNP, in collaboration with a physician, who:

- (1) Is practicing with appropriate physician collaboration as defined in this article and in accordance with Article 81 of Chapter 21 of Title 34 and all rules and regulations pertaining to the collaborating agreement between qualified physicians and qualified CRNPs.
- (2) Submits proof of successful completion of a course or courses approved by the board which includes advanced pharmacology and prescribing trends relating to controlled substances.

(3) Provides accurate and complete documentation of a minimum of 12 months of active, collaborative practice with a physician.

\$20-2-83.

- (a) Upon receipt of a QACSC and a valid registration number issued by the United States Drug Enforcement Administration, a CRNP may prescribe, administer, authorize for administration, or dispense only those controlled substances listed in Schedules III, IV, and V of Article 2 of Chapter 2 of Title 20 in accordance with rules adopted by the board and any protocols, formularies, and medical regimens as approved by the Joint Committee of the board and the Board of Nursing for Advanced Practice Nurses for regulation of a QACSC.
- (b) A CRNP shall not utilize his or her QACSC for the purchasing, obtaining, maintaining, or ordering of any stock supply or inventory of any controlled substance in any form.
- (c) A CRNP authorized to prescribe, administer, or dispense controlled substances in accordance with this article shall not prescribe, administer, or dispense any controlled substance to his or her own self, spouse, child, or parent.

\$20-2-84.

The board and the joint committee of the board and the Board of Nursing for Advanced Practice Nurses may deny an application of a CRNP requesting a QACSC, deny a request for a

- renewal of a QACSC, or initiate disciplinary action against a CRNP possessing a QACSC based on any of the following:
- 3 (1) Fraud or deceit in applying for, procuring, or attempting to procure a QACSC in the state.
 - (2) Conviction of a crime under any state or federal law relating to any controlled substance.
 - (3) Conviction of a crime or offense which affects the ability of the CRNP to practice with due regard for the health or safety of his or her patients.
 - (4) Prescribing a drug or utilizing a QACSC in such a manner as to endanger the health of any person or patient of the CRNP or collaborating physician.
 - (5) Suspension or revocation of the registration number issued to the CRNP by the United States Drug Enforcement Administration.
 - (6) Excessive dispensing or prescribing of any drug to any person or patient of the CRNP or collaborating physician.
 - (7) Unfitness or incompetence due to the use of or dependence on alcohol, chemicals, or any mood altering drug to such an extent as to render the CRNP unsafe or unreliable to prescribe drugs or to hold a QACSC.
 - (8) Any violation of a requirement set forth in this article or a rule adopted pursuant to this article.
- 25 \$20-2-85.

- 1 (a) Any hearing for disciplinary action against a
 2 CRNP holding a valid QACSC for violations of this article
 3 shall be before the board.
 - (b) The board may restrict, suspend, or revoke a QACSC, or to assess an administrative fine against a QACSC whenever a CRNP is guilty on the basis of substantial evidence of any of the acts or offenses enumerated in Section 20-2-84. The board may reinstate or deny reinstatement a QACSC.
 - (c) The board may limit revocation or suspension of a QACSC to the particular controlled substance with respect to which grounds for revocation or suspension exist.
 - (d) The board shall promptly notify the Drug Enforcement Administration of the United States Department of Justice of all orders suspending or revoking a QACSC.
 - (e) Any hearing conducted before the board shall be considered a contested case under the Alabama Administrative Procedure Act, Section 41-22-1, and shall be conducted in accordance with the requirements of that act.

§20-2-86.

- (a) A CRNP adversely affected by an order of the board denying an application for a QACSC or the renewal of a QACSC may obtain judicial review thereof by filing a written petition for review with the Circuit Court of Montgomery County in accordance with Section 41-22-20.
- (b) A CRNP adversely affected by an order of the board suspending, revoking, or restricting a QACSC, whether or not such suspension, revocation, or restriction is limited;

- assessing an administrative fine; or denying reinstatement of a QACSC, may obtain judicial review thereof by filing a written petition for review with the Circuit Court of Montgomery County in accordance with Section 41-22-20.
 - (c) The following procedures shall take precedence over subsection (c) of Section 41-22-20 relating to the issuance of a stay of any order of the board suspending, revoking, or restricting a QACSC. The suspension, revocation, or restriction of a QACSC shall be given immediate effect and no stay or supersedeas bond shall be granted pending judicial review of a decision by the board to suspend, revoke, or restrict a QACSC unless a reviewing court, upon proof by the party seeking judicial review, finds in writing that the action of the board was taken without statutory authority, was arbitrary or capricious, or constituted a gross abuse of discretion.
 - (d) From the judgment of the circuit court, either the board or the affected party who invoked judicial review may obtain a review of any final judgment of the circuit court under Section 41-22-21. No security shall be required of the board.

\$20-2-87.

(a) The board may charge and collect fees to defray expenses incurred in the registration and issuance of QACSCs and the administration of this article. The types and amounts of fees shall be established in rules adopted by the board.

The fees shall be retained by the board and may be expended for the general operation of the board.

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- (b) The board may require a CRNP who has been found to be in violation of Section 20-2-84 or whose application for a QACSC or its renewal or reinstatement has been denied, to pay the administrative costs, fees, and expenses of the board incurred in connection with any proceedings before the board referred to in Section 20-2-85 or in connection with any investigation of the board to determine eligibility of an applicant for a QACSC including, but not limited to, the actual costs of independent medical review and expert testimony, fees, and expenses paid to outside counsel by the board, deposition, costs, travel expenses for board staff, charges incurred for obtaining documentary evidence, and such other categories of expenses as may be prescribed in rules published by the board. Payment of any such costs, fees, or expenses ordered by the board shall be made and enforced in the same manner as an administrative fine.
- (c) Any administrative fine assessed by the board shall be paid to the board and shall not exceed the amount of one thousand dollars (\$1,000) for each violation of any of the provisions of Section 20-2-84, or any rule or regulation promulgated by the board. Any administrative fine collected by the board may be expended for the general operation of the board.

\$20-2-88.

Any member of the board, any agent, employee, consultant, or attorney of the board, any person making any report or rendering any opinion or supplying any evidence or information or offering any testimony to the board in connection with any investigation or hearing conducted by the board as authorized in this article, shall be immune from any lawsuit or legal proceeding for any conduct in the course of his or her official duties with respect to such investigations or hearings.

\$20-2-89.

The board and the Board of Nursing may adopt rules necessary to carry out the intent, purposes, and provisions of this article.

Section 2. Sections 20-2-214 and 20-2-217 of the Code of Alabama 1975, are amended to read as follows:

"\$20-2-214.

"The following persons or entities shall be permitted access to the information in the controlled substances database, subject to the limitations indicated below:

- "(1) Authorized representatives of the certifying boards, provided, however, that access shall be limited to inquiries concerning the licensees of the certifying board.
- "(2) A licensed practitioner approved by the department who has authority to prescribe, dispense, or administer controlled substances, provided, however, that such access shall be limited to information concerning an assistant

Registration Certificate over whom the practitioner exercises physician supervision and a current or prospective patient of the practitioner. Practitioners a CRNP with a Qualified

Alabama Controlled Substances Registration Certificate over whom the CRNP collaborates with the physician and a current or prospective patient of the CRNP. CRNPs shall have no requirement or obligation to access or check the information in the controlled substances database prior to prescribing, dispensing, or administering medications or as part of their professional practice.

"(3) A licensed assistant to physician approved by
the department who is authorized to prescribe, administer, or
dispense pursuant to a Qualified Alabama Controlled Substances
Registration Certificate; provided, however, that such access
shall be limited to information concerning a current or
prospective patient of the assistant to physician. A licensed
CRNP approved by the department who is authorized to
prescribe, administer, or dispense pursuant to a Qualified
Alabama Controlled Substances Registration Certificate;
provided, however, that such access shall be limited to
information concerning a current or prospective patient of the
CRNP.

"(4) A licensed pharmacist approved by the department, provided, however, that such access is limited to information related to the patient or prescribing practitioner designated on a controlled substance prescription that a

pharmacist has been asked to fill. Pharmacists shall have no requirement or obligation to access or check the information in the controlled substances database prior to dispensing or administering medications or as part of their professional practices.

- "(5) State and local law enforcement authorities as authorized under Section 20-2-91, and federal law enforcement authorities authorized to access prescription information upon application to the department accompanied by an affidavit stating probable cause for the use of the requested information.
- "(6) Employees of the department and consultants engaged by the department for operational and review purposes.
- "(7) The prescription drug monitoring program of any of the other states or territories of the United States, if recognized by the Alliance for Prescription Drug Monitoring Programs under procedures developed by the United States

 Department of Justice or the Integrated Justice Information

 Systems Institute or successor entity subject to or consistent with limitations for access prescribed by this chapter for the Alabama Prescription Drug Monitoring Program.

"\$20-2-217.

"(a) There is hereby assessed a surcharge in the amount of ten dollars (\$10) per year on the controlled substance registration certificate of each licensed medical, nursing, dental, podiatric, optometric, and veterinary medicine practitioner authorized to prescribe or dispense

controlled substances and on the Qualified Alabama Controlled Substances Registration Certificate (QACSC) of each licensed assistant to physician CRNP. This surcharge shall be effective for every practitioner certificate or QACSC and every Qualified Alabama Controlled Substances Registration

Certificate issued or renewed on or after August 1, 2004, shall be in addition to any other fees collected by the certifying boards, and shall be collected by each of the certifying boards and remitted to the department at such times and in such manner as designated in the regulations of the department. The proceeds of the surcharge assessed herein shall be used exclusively for the development, implementation, operation, and maintenance of the controlled substances prescription database.

"(b) At the end of the first fiscal year after the controlled substances database becomes operational, and at the end of each succeeding fiscal year thereafter, the State

Health Officer shall determine the actual operating costs for the database, to include an allocation of costs for the services of employees of the department. If, at the end of the fiscal year, the State Health Officer determines that the funds received by the department for operation of the database exceed the operational costs incurred by at least twenty-five thousand dollars (\$25,000), then the department shall refund a portion of such excess to the certifying boards which made payments to the department under this section in an amount proportional to the boards' payment; provided, however, that

1	no payment of less than five thousand dollars (\$5,000) to a
2	<pre>certifying board shall be made."</pre>
3	Section 3. This act shall become effective on the
4	first day of the third month following its passage and
5	approval by the Governor, or its otherwise becoming law.