



ARIZONA STATE SENATE
Fifty-Second Legislature, Second Regular Session

FACT SHEET FOR S.B. 1473

registered nurses; advanced practice

Purpose

Modifies statutes related to the licensing and certification of advanced practice registered nurses (APRN).

Background

The Arizona State Board of Nursing (Board) was established in 1921 to regulate the practice of nursing in Arizona through licensure, the investigations of complaints and the approval of nursing education programs. The Board is comprised of 11 Governor-appointed members who serve five-year terms (A.R.S. § 32-1602). According to its website, the Board regulates over 120,000 active licensed or certified nursing professionals, of which: 5,645 licensees are nurse practitioners; 183 licensees are clinical nurse specialists; and 255 are certified nurse midwives.

A registered nurse seeking certification as a nurse practitioner or as a certified nurse midwife must meet the following requirements: 1) have a current Arizona registered nurse license with multistate privileges in another compact state; 2) have an official transcript directly from the institution attended that provides evidence of a graduate degree with a major in nursing for registered nurse practitioner and clinical nurse specialist applicants; 3) have an official letter sent directly from the program to the Board, stating the role and population focus of the program; 4) prove the educational program was part of a graduate degree/post-master's program at an accredited institution or was approved or recognized in the U.S. jurisdiction of program location for the purpose of granting APRN licensure or certification; 5) have national certification or recertification as an APRN in the role and population focus if certification was issued after July 1, 2004, with the exception of a CNS granted a waiver of certification; and 6) meet certain practice requirements as outlined.

Pursuant to A.R.S. §§ 32-3104 and 32-3106, the Arizona Nurses Association, the Arizona Association of Nurse Anesthetists, the Arizona Affiliate of the American College of Nurse-Midwives and the Arizona Nurse Practitioner Council submitted a sunrise application to the President of the Senate and the Speaker of the House of Representatives to expand the scope of practice for APRNs by allowing certified registered nurse anesthetists and certified nurse specialists to obtain certification for prescribing authority as outlined. Additionally, the sunrise application sought to address statutory language regarding the acts that may be performed by a registered nurse practitioner in collaboration with a licensed physician. Finally, the sunrise application proposed moving the APRN certifications to licensure. The Senate Health and Human Services and the House of Representatives Health Committee of Reference conducted one public meeting on December 7, 2015, to review the sunrise application as required by A.R.S.

§ 32-3104 and to receive public testimony. The Committee of Reference recommended that the APRN sunrise application be approved with consideration that oversight of new practitioners be included in the legislation for the oversight and clarification of the prescribing context for psychiatric clinical nurse specialists and clarification of licensure requirements, with the commitment that there be further discussions among stakeholders.

There is no anticipated fiscal impact to the state General Fund associated with this legislation.

Provisions

Advanced Practice Registered Nurses (APRN)

1. Defines *advanced practice registered nurse* as a registered nurse who is licensed to practice advanced practice nursing and who practices within the limits of education, certification and licensure according to statute and Board rule in one of the following roles:
 - a) certified nurse practitioner (NP);
 - b) certified registered nurse anesthetist (CRNA);
 - c) certified nurse midwife; and
 - d) clinical nurse specialist (CNS).
2. Allows the Board to license a registered nurse as an APRN if the registered nurse meets all of the following requirements:
 - a) submits an application as prescribed by the Board;
 - b) has completed an accredited graduate-level education program for APRNs in one of the four designated roles, and if applying for licensure as a CNS or an NP, in at least one population focus;
 - c) has passed a national certification examination as specified by the Board that measures the APRN role and the related competencies; and
 - d) has paid the required fee.
3. Requires the APRN scope of practice, in addition to the registered nurse scope of practice and within the role and competency focus of the APRN, to include:
 - a) maintaining and promoting health and the prevention of disease;
 - b) diagnosing, including ordering the interpreting diagnostic procedures as appropriate for the person's level of education and training;
 - c) if granted privileges and subject to the specified requirements and limitations, prescribing, ordering and dispensing pharmacological agents;
 - d) delegating and assisting therapeutic measures to assistive personnel;
 - e) consulting with other disciplines and providing referrals to health care agencies, health care providers and community resources;
 - f) planning and initiating a therapeutic regimen that may include ordering and prescribing nonpharmacological interventions, including durable medical equipment, medical devices, nutrition and diagnostic and supportive services such as home health care, hospice care and physical and occupational therapies; and
 - g) performing additional acts that require education and training as prescribed by the Board and that are proper to be performed by an APRN within the focus of care for each role.

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4. Requires, if granted privileges and subject to requirements and limitations, prescribing, administering, procuring, ordering and dispensing pharmacological agents to include the authority to prescribe, administer, procure, order and dispense pharmacological agents, including over-the-counter medications and legend and controlled substances, consistent with the education, certification and licensure of the applicant.
5. Requires the Board to adopt rules establishing those acts that may be performed by an APRN, instead of establishing those acts that may be performed by an NP in collaboration with a licensed physician.
6. Requires the Board to establish standards for approving and reapproving APRN programs and provide for surveys of APRN programs as it deems necessary, including those programs for certified nurse midwives and CRNAs.
7. Codifies the requirements for an APRN to be granted privileges to prescribe pharmacological agents to include, in addition to having passed a national certification examination as specified by the Board, graduate level courses in each of the following:
 - a) advanced physiology and pathophysiology, including general principles across a person's lifespan;
 - b) advanced health assessment, which includes assessment of all human systems and advanced assessment techniques, concepts and approaches as appropriate for each role and population focus;
 - c) advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmatherapeutics of all broad category agents;
 - d) the diagnosis and management of diseases as related to the role and population focus of the applicant; and
 - e) a clinical preceptorship in patient management, including pharmacotherapeutics, that is comparable to the requirements for the completion of a certified NP program as appropriate for each role and population focus, and requires the clinical preceptors to hold a current unencumbered license to practice either as a physician or as an APRN with prescribing authority and at least one year clinical experience.
8. Requires an APRN to consult with or refer to one or more persons who are licensed as a medical doctor, a doctor of osteopathy, a podiatrist or a dentist if the consultation or referral is appropriate.
9. States an APRN's activities are not required to be supervised by a physician and that a referral agreement is not required.
10. Requires an applicant for renewal of an APRN license to submit a verified statement that indicates whether the applicant has been convicted of a felony and, if convicted of one or more felonies, indicates the date of absolute discharge from the sentences for all felony convictions.

Certified Registered Nurse Anesthetists (CRNA)

11. Allows a CRNA in coordination with a health care provider or a designated provider and without supervision by the health care provider, as part of and complementary to a procedure, test or childbirth delivery performed or ordered by that health care provider, to:
 - a) prescribe and provide anesthesia and analgesia services and treatment including those controlled substances necessary to provide those services; and
 - b) if granted prescribing privileges, prescribe and provide for not more than seven days before or after a procedure, test or childbirth delivery non-anesthesia and non-analgesic pharmacological agents necessary to facilitate the provision of anesthesia and analgesic services.
12. Prohibits a CRNA from prescribing an opioid medication for patient self-administration.
13. States *coordination* means that through the period in which anesthesia or analgesic services are provided by the CRNA, either:
 - a) the health care provider is performing the procedure, test or childbirth; or
 - b) the health care provider has ordered anesthesia or analgesic services and the health care provider or the health care provider's designee is available onsite or through telecommunication.
14. States that only a person who holds a valid and current license issued to practice as a CRNA may use the title *certified nurse anesthetist* or *nurse anesthetist* or use any words or letters to indicate the person is a certified registered nurse anesthetist, and requires a person who is licensed as a certified registered nurse anesthetist to indicate by title or initials the area of licensure.

Clinical Nurse Specialists (CNS)

15. Limits the prescribing privileges of a CNS as follows:
 - a) prohibits a CNS from prescribing opioid medications for self-administration;
 - b) allows a CNS who has been granted prescribing privileges to prescribe only for patients of an accredited or licensed health care institution or health care agency that uses the services of the CNS and requires the CNS to observe the protocols and standards of care of the institution or agency; and
 - c) requires a CNS to notify the medical director or the physician responsible for managing a patient within one business day after writing a prescription order for the patient that is new or that changes an existing dosage, unless the CNS is acting pursuant to a written protocol that provides for the types and amounts of pharmacological agents to be prescribed.

Board Approval

16. Requires the Board to approve all new pre-licensure programs for all APRNs, including CRNAs and certified nurse midwives.

17. Allows instead of requires the Board or its authorized agent to conduct a survey of the institution or program applying for approval and requires the Board to approve the applicant as an APRN program if the Board determines that the program meets the requirements prescribed by Rule.
18. States that certified NP programs and CNS programs may be approved only for the specific population of care.

Fees

19. Requires an APRN to renew the license every four years on or before April 1, and prescribes an application for renewal fee of \$160 and a late fee of \$50 if renewed after expiration for each month the license is lapsed, not to exceed \$200.
20. Removes the ability of the Board to establish application for renewal fees for prescribing and dispensing medication privileges before and after expiration of the privileges.

Definitions

21. Defines *opioid* as a class II controlled substance
22. Defines *health care provider* as a person who is a licensed podiatrist, dentist, medical doctor, doctor of osteopathy or a certified nurse midwife who is acting within the midwife's scope of practice.

Grandfather Provisions

23. States an NP, a CNS, a certified nurse midwife or a CRNA who is currently certified but has not passed a national certification exam or who has not completed a graduate-level education program may receive or renew a license if:
 - a) the NP or certified nurse midwife received certification from the Board before January 1, 2005, or was certified or licensed in that role before January 1, 2001, in any U.S. jurisdiction and has continuously maintained that licensure or certification; or
 - b) the CNS or CRNA received certification from the Board before July 1, 2017, or was certified or licensed in that role before July 1, 2017, in any U.S. jurisdiction and has continuously maintained that licensure or certification.
24. States an NP or certified nurse midwife who has not passed a national certification examination may renew prescribing privileges if the prescribing privileges were granted before July 1, 2017.
25. States an NP or CNS who holds a current certificate issued by the Board and who is a member of the Board may continue to serve on the Board for the remainder of the person's term.

Rulemaking

26. Exempts the Board from rulemaking requirements until July 1, 2017, and requires the Board to provide public notice and an opportunity for public comment on proposed rules at least 60 days before the rules are amended or adopted.
27. Requires the Board, when establishing rules for the prescribing and dispensing of drugs or prescription medications by an APRN, to provide to the Arizona Medical Board, the Arizona Board of Osteopathic Examiners and the Arizona Board of Pharmacy a draft of the proposed rules at least 60 days before any noticed opportunity for public comment.

Miscellaneous

28. Modifies Board membership by allowing an APRN, including a certified nurse midwife, to serve on the Board.
29. Requires a person who is a certified nurse midwife to indicate by title or initials the specialty area of licensure.
30. Allows the Board to issue a temporary license to certified nurse midwives in addition to CRNAs, NPs and CNSs.
31. Becomes effective July 1, 2017.

Prepared by Senate Research

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