House Bill 557

By: Representatives Stephens of the 164<sup>th</sup>, Jones of the 47<sup>th</sup>, Parrish of the 158<sup>th</sup>, Powell of the 33<sup>rd</sup>, Schofield of the 63<sup>rd</sup>, and others

## A BILL TO BE ENTITLED AN ACT

- 1 To amend Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to
- 2 physicians, assistants, and others, so as to authorize physicians to delegate the authority to
- 3 advanced practice registered nurses and physician assistants to prescribe Schedule II
- 4 controlled substances; provide for requirements; to provide for automatic approval of nurse
- 5 protocol agreements and job descriptions under certain conditions; to provide for legislative
- 6 findings; to provide for related matters; to repeal conflicting laws; and for other purposes.

## BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 SECTION 1.

- 9 The General Assembly finds:
- 10 (1) Governor Kemp created the Georgia Healthcare Workforce Commission in 2022;
- 11 (2) The commission recognized that Georgia is now in the minority of states with
- restrictions on certain healthcare occupations, such as nurse practitioners and physician
- assistants, and that research also suggests that in appropriate circumstances, revising
- practice restrictions on certain healthcare occupations and granting increased practice
- authority have the potential to improve access to care without compromising quality or
- 16 increasing costs;

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17 (3) The commission believes that exploring updating scope of practice limitations could

- potentially ease pressure on the healthcare workforce by allowing certain healthcare
- occupations to perform more advanced work in healthcare settings which could decrease
- work burden on other clinical providers;
- 21 (4) Georgia is one of only three states that forbids physician assistants and nurse
- practitioners from prescribing any Schedule II medications; and
- 23 (5) A more streamlined process at the Georgia Composite Medical Board will allow
- 24 already licensed and certified practitioners to more quickly begin work.

25 SECTION 2.

- 26 Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians,
- 27 assistants, and others, is amended by revising paragraph (3) of subsection (a), paragraph (10)
- 28 of subsection (g), and subsections (k) and (m) of Code Section 43-34-25, relating to
- 29 delegation of certain medical acts to advanced practice registered nurse, construction and
- 30 limitations of such delegation, definitions, conditions of nurse protocol, and issuance of
- 31 prescription drug orders, and by adding a new subsection to read as follows:
- 32 "(3) 'Controlled substance' means any controlled substance as defined in Code Section
- 33 16-13-21 but shall not include any Schedule I controlled substance included in Code
- Section 16-13-25 or any and shall only include Schedule II controlled substance
- 35 <u>substances</u> included in Code Section 16-13-26, if authorized pursuant to subsection (d.1)
- 36 <u>of this Code section</u>."
- 37 "(d.1) An advanced practice registered nurse who has at least one year of post-licensure
- 38 <u>clinical experience may be authorized under a nurse protocol agreement to issue</u>
- 39 prescription drug orders for Schedule II controlled substances in emergency situations
- 40 <u>pursuant to the following requirements:</u>
- 41 (1) The authorization is specifically included in the nurse protocol agreement;
- 42 (2) The advanced practice registered nurse has directly evaluated the patient;

43 (3) The prescription drug order is limited to an initial prescription, not to exceed a 44 five-day supply; 45 (4) The prescription drug order is for an individual 18 years of age or older; unless 46 authorized by the delegating physician to order hydrocodone, hydrocodone compounds, or medication to treat attention deficit hyperactivity disorder for an individual under 18 47 years of age, so long as the delegating physician is a pediatrician, family practice 48 49 physician, internal medicine physician, or psychiatrist; (5) Any subsequent prescription drug orders after the initial prescription shall be in 50 51 consultation with and approved by the delegating physician and such approval shall be 52 documented in the patient's chart; and 53 (6) The advanced practice registered nurse completes one hour of continuing education biennially in the appropriate ordering and use of Schedule II controlled substances." 54 "(10) Notwithstanding the provisions of subsection (d.1) of this Code section, in  $\frac{1}{10}$  any 55 56 emergency medical services system operated by, or on behalf of, any county, municipality, or hospital authority with a full-time physician medical director and who 57 58 does not order drugs, except that he or she may order up to a 14 day supply of drugs as 59 necessary in an emergency situation, excluding Schedule II controlled substances and 60 benzodiazepines; provided, however, that an advanced practice registered nurse shall not 61 order radiographic imaging, diagnostic studies, or medical devices pursuant to this 62 paragraph; and provided, further, that a patient shall be referred to a physician, a dentist. 63 or a federally qualified health center." 64 "(k) Nothing in this Code section shall be construed to authorize an advanced practice 65 registered nurse to issue a prescription drug order for a Schedule I or II controlled 66 substance, except as otherwise authorized pursuant to subsection (d.1) of this Code section. 67 or authorize refills of any drug for more than 12 months from the date of the original order except in the case of oral contraceptives, hormone replacement therapy, or prenatal 68 vitamins which may be refilled for a period of 24 months." 69

70 ''(m)(1) The board shall have the authority to promulgate rules and regulations governing a delegating physician in order to carry out the intents and purposes of this Code section. 71 72 (2)(A) Further, the board shall be authorized to: 73 (1)(i) Require that a nurse protocol agreement shall be filed by the delegating 74 physician with the board within a reasonable time from the date of execution; 75 (2)(ii) Determine, after review of a filed nurse protocol agreement, if such nurse 76 protocol agreement fails to meet accepted standards of medical practice as established 77 by the board; and 78 (3)(iii) Require the delegating physician to amend any such noncompliant nurse 79 protocol agreement in order to meet such accepted standards. 80 (B) If a medical practice has an existing approved nurse protocol agreement and an 81 alternate delegating physician or a change in the delegating physician within the same 82 or similar specialty, such new nurse protocol agreement for the new alternate delegating physician or a change in the delegating physician, upon submission, shall be 83 84 automatically deemed approved by the board. 85 (C) If a delegating physician submits a nurse protocol agreement for a new advanced 86 practice registered nurse and such nurse protocol agreement that has substantially the 87 same terms and provisions as a nurse protocol agreement previously submitted by such 88 delegating physician for another advanced practice registered nurse and approved by 89 the board, the nurse protocol agreement for the new advanced practice registered nurse. 90 upon submission, shall be automatically deemed approved by the board."

91 SECTION 3.

92 Said chapter is further amended by revising subsections (c) and (e.1) of Code Section 93 43-34-103, relating to delegation of authority to physician assistants, as follows:

94 "(c)(1) At all times while providing patient services, a physician assistant shall have a 95 signed job description submitted by his or her primary supervising physician and 96 approved by the board.

- 97 (2) Nothing in this article shall prevent a primary supervising physician from submitting 98 to the board a new or amended physician assistant job description.
- 99 (3) If a medical practice has an existing approved job description and an alternate supervising physician or a change in the supervising physician within the same or similar specialty, such new job description for the new alternate supervising physician or a change in the supervising physician, upon submission, shall be automatically deemed approved by the board.

(4) If a primary supervising physician submits a job description for a new physician assistant and such job description that has substantially the same terms and provisions as a job description previously submitted by such primary supervising physician for another physician assistant and approved by the board, the job description for the new physician assistant, upon submission, shall be automatically deemed approved by the board."

"(e.1)(1)(A) In addition to and without limiting the authority granted by Code Section 43-34-23, a physician may delegate to a physician assistant, in accordance with a job description, the authority to issue a prescription drug order or orders for any device as defined in Code Section 26-4-5 or to issue any dangerous drug as defined in Code Section 16-13-71, any Schedule II controlled substance in accordance with subparagraph (B) of this paragraph, or any Schedule III, IV, or V controlled substance as defined in Code Section 16-13-21 on a prescription drug order or prescription device order form as specified in paragraph (3) of this subsection. Delegation of such authority shall be contained in the job description required by this Code section. The delegating physician shall remain responsible for the medical acts of the physician assistant performing such delegated acts and shall adequately supervise the physician assistant. If an existing job description for a physician assistant does not contain such

121 authority to order a prescription drug or device order as provided by this subsection, 122 that physician assistant may not issue any such prescription drug or device order until 123 a new job description delegating such authority is submitted to and approved by the 124 board. Nothing in this Code section shall be construed to authorize the written 125 prescription drug order of a Schedule I or H controlled substance. 126 (B) A physician may delegate to a physician assistant who has at least one year of 127 post-licensure clinical experience the authority to issue prescription drug orders for 128 Schedule II controlled substances in emergency situations pursuant to the following 129 requirements: 130 (i) The authorization is specifically included in the job description; 131 (ii) The physician assistant has directly evaluated the patient; (iii) The drug order is limited to an initial prescription not to exceed a five-day 132 133 supply; 134 (iv) The prescription drug order is for an individual 18 years of age or older; unless 135 authorized by the supervising physician to order hydrocodone, hydrocodone 136 compounds, or medication to treat attention deficit hyperactivity disorder for an 137 individual under 18 years of age, so long as the supervising physician is a 138 pediatrician, family practice physician, internal medicine physician, or psychiatrist; 139 and 140 (v) Any subsequent drug orders after the initial prescription shall be in consultation 141 with and approved by the primary supervising physician, and such approval shall be 142 documented in the patient's chart. 143 (2) Nothing in this subsection shall be construed to create a presumption of liability, 144 either civil or criminal, on the part of a pharmacist who is duly licensed under Title 26 145 and who in good faith fills a prescription drug or device order presented by a patient

pursuant to this subsection. The pharmacist shall presume that the prescription drug or

device order was issued by a physician assistant duly licensed under this article who has

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qualified under this Code section to prescribe pharmaceutical agents. The pharmacist shall also presume that the pharmaceutical agent prescribed by the physician assistant is an approved pharmaceutical agent, unless the pharmacist has actual or constructive knowledge to the contrary.

- (3) The physician assistant shall only be authorized to exercise the rights granted under this subsection using a prescription drug or device order form which includes the name, address, and telephone number of the prescribing supervising or alternate supervising physician, the patient's name and address, the drug or device prescribed, the number of refills, and directions to the patient with regard to the taking and dosage of the drug. A prescription drug order which is transmitted either electronically or via facsimile shall conform to the requirements set out in paragraphs (1) and (2) of subsection (c) of Code Section 26-4-80, respectively. Any form containing less information than that described in this paragraph shall not be offered to or accepted by any pharmacist who is duly licensed under Title 26.
- (4) Nothing in this Code section shall be construed to authorize a physician assistant to authorize refills of any drug for more than 12 months from the date of the original prescription drug or device order.
- (5) A supervising physician or alternate supervising physician shall evaluate or examine,
   at least every three months, any patient receiving controlled substances.
- 167 (6) In addition to the copy of the prescription drug or device order delivered to the patient, a record of such prescription shall be maintained in the patient's medical record in the following manner:
- 170 (A) The physician assistant carrying out a prescription drug or device order shall document such order either in writing or by electronic means; and
- 172 (B) The supervising physician shall periodically review patient records. Such review
  173 may be achieved with a sampling of such records as determined by the supervising
  174 physician.

175 (7) A physician assistant is not permitted to prescribe drugs or devices except as 176 authorized in the physician assistant's job description and in accordance with this article.

- (8) The board shall adopt rules establishing procedures to evaluate an application for a job description containing the authority to order a prescription drug or device and any other rules the board deems necessary or appropriate to regulate the practice of physician assistants, to carry out the intent and purpose of this article, or to protect the public welfare.
- (9) A physician assistant authorized by a primary supervising physician to order controlled substances pursuant to this Code section is authorized to register with the federal United States Drug Enforcement Administration.
  - (10)(A) A physician assistant delegated the authority by the primary supervising physician to issue a prescription drug or device order shall be required to complete a minimum of three hours of continuing education biennially in practice specific pharmaceuticals in which the physician assistant has prescriptive order privileges.
  - (B) A physician assistant delegated the authority by the primary supervising physician to issue a prescription drug or device order for a Schedule II controlled substance shall be required to complete one additional hour of continuing education biennially in the appropriate ordering and use of Schedule II controlled substances.
- (11) A managed care system, health plan, hospital, insurance company, or other similar entity shall not require a physician to be a party to a job description as a condition for participation in or reimbursement from such entity."

196 SECTION 4.

197 All laws and parts of laws in conflict with this Act are repealed.