The House Committee on Public Health offers the following substitute to HB 557:

A BILL TO BE ENTITLED AN ACT

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

7

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 12 restrictions on certain healthcare occupations, such as nurse practitioners and physician 13 assistants, and that research also suggests that in appropriate circumstances, revising 14 practice restrictions on certain healthcare occupations and granting increased practice 15 authority have the potential to improve access to care without compromising quality or 16 increasing costs; 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;

(4) Georgia is one of only three states that forbids physician assistants and nurse
 practitioners from prescribing any Schedule II medications; and

(5) A more streamlined process at the Georgia Composite Medical Board will allowalready licensed and certified practitioners to more quickly begin work.

25

SECTION 2.

Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians, assistants, and others, is amended by revising paragraph (3) of subsection (a), paragraph (10) of subsection (g), and subsections (k) and (m) of Code Section 43-34-25, relating to delegation of certain medical acts to advanced practice registered nurse, construction and limitations of such delegation, definitions, conditions of nurse protocol, and issuance of prescription drug orders, and by adding a new subsection to read as follows:

"(3) 'Controlled substance' means any controlled substance as defined in Code Section
 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
 <u>substances</u> included in Code Section 16-13-26, if authorized pursuant to subsection (d.1)
 of this Code section."

37 "(d.1) An advanced practice registered nurse who has at least one year of post-licensure

38 <u>clinical experience and is in good standing with the board may be authorized under a nurse</u>

39 protocol agreement to issue prescription drug orders for Schedule II controlled substances

40 <u>in emergency situations 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;

23

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 medication to treat attention deficit
47	hyperactivity disorder for an individual under 18 years of age, so long as the delegating
48	physician is a pediatrician, family practice physician, internal medicine physician, or
49	<u>psychiatrist;</u>
50	(5) Any subsequent prescription drug orders after the initial prescription shall be in
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
54	biennially in the appropriate ordering and use of Schedule II controlled substances."
55	"(10) Notwithstanding the provisions of subsection (d.1) of this Code section, in In any
56	emergency medical services system operated by, or on behalf of, any county,
57	municipality, or hospital authority with a full-time physician medical director and who
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
68	except in the case of oral contraceptives, hormone replacement therapy, or prenatal
69	vitamins which may be refilled for a period of 24 months."

"(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.
 (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 <u>alternate delegating physician or a change in the delegating physician within the same</u>
- 82 or similar specialty, such new nurse protocol agreement for the new alternate delegating
- 83 physician or a change in the delegating physician, upon submission, shall be
 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 <u>delegating physician for another advanced practice registered nurse and approved by</u>
- 89 the board, the nurse protocol agreement for the new advanced practice registered nurse,
- 90 <u>upon submission, shall be automatically deemed approved by the board.</u>"
- 91

SECTION 3.

Said chapter is further amended by revising subsections (c) and (e.1) of Code Section
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 submitting98 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
 100 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."
- 109 ''(e.1)(1)(A) In addition to and without limiting the authority granted by Code Section 110 43-34-23, a physician may delegate to a physician assistant, in accordance with a job 111 description, the authority to issue a prescription drug order or orders for any device as 112 defined in Code Section 26-4-5 or to issue any dangerous drug as defined in Code 113 Section 16-13-71, any Schedule II controlled substance in accordance with 114 subparagraph (B) of this paragraph, or any Schedule III, IV, or V controlled substance 115 as defined in Code Section 16-13-21 on a prescription drug order or prescription device 116 order form as specified in paragraph (3) of this subsection. Delegation of such 117 authority shall be contained in the job description required by this Code section. The 118 delegating physician shall remain responsible for the medical acts of the physician 119 assistant performing such delegated acts and shall adequately supervise the physician 120 assistant. If an existing job description for a physician assistant does not contain such

authority to order a prescription drug or device order as provided by this subsection,
that physician assistant may not issue any such prescription drug or device order until
a new job description delegating such authority is submitted to and approved by the
board. Nothing in this Code section shall be construed to authorize the written
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 and is in good standing with the board the authority
- 128 to issue prescription drug orders for Schedule II controlled substances in emergency
- 129 <u>situations pursuant to the following requirements:</u>
- 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
 supply:
- 134 (iv) The prescription drug order is for an individual 18 years of age or older; unless
- 135 <u>authorized by the supervising physician to order medication to treat attention deficit</u>
- 136 hyperactivity disorder for an individual under 18 years of age, so long as the
- 137 <u>supervising physician is a pediatrician, family practice physician, internal medicine</u>
- 138 physician, or psychiatrist; and
- 139 (v) Any subsequent drug orders after the initial prescription shall be in consultation
- 140 with and approved by the primary supervising physician, and such approval shall be
- 141 <u>documented in the patient's chart.</u>

(2) Nothing in this subsection shall be construed to create a presumption of liability,
either civil or criminal, on the part of a pharmacist who is duly licensed under Title 26
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
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.

151 (3) The physician assistant shall only be authorized to exercise the rights granted under 152 this subsection using a prescription drug or device order form which includes the name. 153 address, and telephone number of the prescribing supervising or alternate supervising 154 physician, the patient's name and address, the drug or device prescribed, the number of 155 refills, and directions to the patient with regard to the taking and dosage of the drug. A 156 prescription drug order which is transmitted either electronically or via facsimile shall 157 conform to the requirements set out in paragraphs (1) and (2) of subsection (c) of Code 158 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 159 160 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.

164 (5) A supervising physician or alternate supervising physician shall evaluate or examine,
165 at least every three months, any patient receiving controlled substances.

(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:

(A) The physician assistant carrying out a prescription drug or device order shalldocument such order either in writing or by electronic means; and

(B) The supervising physician shall periodically review patient records. Such review
may be achieved with a sampling of such records as determined by the supervising
physician.

(7) A physician assistant is not permitted to prescribe drugs or devices except as
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 <u>United States</u> 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.

188 (B) A physician assistant delegated the authority by the primary supervising physician

189 to issue a prescription drug or device order for a Schedule II controlled substance shall

190 be required to complete one additional hour of continuing education biennially in the

191 <u>appropriate ordering and use of Schedule II controlled substances.</u>

(11) A managed care system, health plan, hospital, insurance company, or other similarentity shall not require a physician to be a party to a job description as a condition for

- 194 participation in or reimbursement from such entity."
- 195

SECTION 4.

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