

1 AN ACT relating to the prescriptive authority of advanced practice registered
2 nurses.

3 ***Be it enacted by the General Assembly of the Commonwealth of Kentucky:***

4 ➔Section 1. KRS 314.011 is amended to read as follows:

5 As used in this chapter, unless the context thereof requires otherwise:

- 6 (1) "Board" means Kentucky Board of Nursing;
- 7 (2) "Delegation" means directing a competent person to perform a selected nursing
8 activity or task in a selected situation under the nurse's supervision and pursuant to
9 administrative regulations promulgated by the board in accordance with the
10 provisions of KRS Chapter 13A;
- 11 (3) "Nurse" means a person who is licensed or holds the privilege to practice under the
12 provisions of this chapter as a registered nurse or as a licensed practical nurse;
- 13 (4) "Nursing process" means the investigative approach to nursing practice utilizing a
14 method of problem-solving by means of:
- 15 (a) Nursing diagnosis, a systematic investigation of a health concern, and an
16 analysis of the data collected in order to arrive at an identifiable problem; and
- 17 (b) Planning, implementation, and evaluation based on nationally accepted
18 standards of nursing practice;
- 19 (5) "Registered nurse" means one who is licensed or holds the privilege under the
20 provisions of this chapter to engage in registered nursing practice;
- 21 (6) "Registered nursing practice" means the performance of acts requiring substantial
22 specialized knowledge, judgment, and nursing skill based upon the principles of
23 psychological, biological, physical, and social sciences in the application of the
24 nursing process in:
- 25 (a) The care, counsel, and health teaching of the ill, injured, or infirm;
- 26 (b) The maintenance of health or prevention of illness of others;
- 27 (c) The administration of medication and treatment as prescribed by a physician,

1 physician assistant, dentist, or advanced practice registered nurse and as
2 further authorized or limited by the board, and which are consistent either
3 with American Nurses' Association Scope and Standards of Practice or with
4 standards of practice established by nationally accepted organizations of
5 registered nurses. Components of medication administration include but are
6 not limited to:

- 7 1. Preparing and giving medications in the prescribed dosage, route, and
8 frequency, including dispensing medications only as defined in
9 subsection (17)(b) of this section;
 - 10 2. Observing, recording, and reporting desired effects, untoward reactions,
11 and side effects of drug therapy;
 - 12 3. Intervening when emergency care is required as a result of drug therapy;
 - 13 4. Recognizing accepted prescribing limits and reporting deviations to the
14 prescribing individual;
 - 15 5. Recognizing drug incompatibilities and reporting interactions or
16 potential interactions to the prescribing individual; and
 - 17 6. Instructing an individual regarding medications;
- 18 (d) The supervision, teaching of, and delegation to other personnel in the
19 performance of activities relating to nursing care; and
- 20 (e) The performance of other nursing acts which are authorized or limited by the
21 board, and which are consistent either with American Nurses' Association
22 Standards of Practice or with Standards of Practice established by nationally
23 accepted organizations of registered nurses;
- 24 (7) "Advanced practice registered nurse" or "APRN" means a certified nurse
25 practitioner, certified registered nurse anesthetist, certified nurse midwife, or
26 clinical nurse specialist, who is licensed to engage in advance practice registered
27 nursing pursuant to KRS 314.042 and certified in at least one (1) population focus;

1 (8) "Advanced practice registered nursing" means the performance of additional acts by
2 registered nurses who have gained advanced clinical knowledge and skills through
3 an accredited education program that prepares the registered nurse for one (1) of the
4 four (4) APRN roles; who are certified by the American Nurses' Association or
5 other nationally established organizations or agencies recognized by the board to
6 certify registered nurses for advanced practice registered nursing as a certified nurse
7 practitioner, certified registered nurse anesthetist, certified nurse midwife, or
8 clinical nurse specialist; and who certified in at least one (1) population focus. The
9 additional acts shall, subject to approval of the board, include but not be limited to
10 prescribing treatment, drugs, devices, and ordering diagnostic tests. Advanced
11 practice registered nurses who engage in these additional acts shall be authorized to
12 issue prescriptions for and dispense nonscheduled legend drugs as defined in KRS
13 217.905 and to issue prescriptions for but not to dispense Schedules II through V
14 controlled substances as classified in KRS 218A.060, 218A.070, 218A.080,
15 218A.090, 218A.100, 218A.110, 218A.120, and 218A.130, under the conditions set
16 forth in KRS 314.042 and regulations promulgated by the Kentucky Board of
17 Nursing on or before August 15, 2006.

- 18 (a) 1. Prescriptions issued by advanced practice registered nurses for Schedule
19 II controlled substances classified under KRS 218A.060, except
20 hydrocodone combination products as defined in KRS 218A.010, shall
21 be limited to a seventy-two (72) hour supply without any refill.
- 22 2. Prescriptions issued by advanced practice registered nurses for
23 hydrocodone combination products as defined in KRS 218A.010 shall
24 be limited to a thirty (30) day supply without any refill.
- 25 3. Prescriptions issued under this subsection for psychostimulants may be
26 written for a thirty (30) day supply only by an advanced practice
27 registered nurse certified in psychiatric-mental health nursing who is

1 providing services in a health facility as defined in KRS Chapter 216B
2 or in a regional services program for mental health or individuals with
3 an intellectual disability as defined in KRS Chapter 210.

4 (b) Prescriptions issued by advanced practice registered nurses for Schedule III
5 controlled substances classified under KRS 218A.080 shall be limited to a
6 thirty (30) day supply without any refill. Prescriptions issued by advanced
7 practice registered nurses for Schedules IV and V controlled substances
8 classified under KRS 218A.100 and 218A.120 shall be limited to the original
9 prescription and refills not to exceed a six (6) month supply.

10 ~~[(c) Limitations for specific controlled substances which are identified as having
11 the greatest potential for abuse or diversion, based on the best available
12 scientific and law enforcement evidence, shall be established in an
13 administrative regulation promulgated by the Kentucky Board of Nursing. The
14 regulation shall be based on recommendations from the Controlled Substances
15 Formulary Development Committee, which is hereby created. The committee
16 shall be composed of two (2) advanced practice registered nurses appointed by
17 the Kentucky Board of Nursing, one (1) of whom shall be designated as a
18 committee co-chair; two (2) physicians appointed by the Kentucky Board of
19 Medical Licensure, one (1) of whom shall be designated as a committee co-
20 chair; and one (1) pharmacist appointed by the Kentucky Board of Pharmacy.
21 The initial regulation shall be promulgated on or before August 15, 2006, and
22 shall be reviewed at least annually thereafter by the committee.]~~

23 Nothing in this chapter shall be construed as requiring an advanced practice
24 registered nurse designated by the board as a certified registered nurse anesthetist to
25 obtain prescriptive authority pursuant to this chapter or any other provision of law
26 in order to deliver anesthesia care. The performance of these additional acts shall be
27 consistent with the certifying organization or agencies' scopes and standards of

- 1 practice recognized by the board by administrative regulation;
- 2 (9) "Licensed practical nurse" means one who is licensed or holds the privilege under
3 the provisions of this chapter to engage in licensed practical nursing practice;
- 4 (10) "Licensed practical nursing practice" means the performance of acts requiring
5 knowledge and skill such as are taught or acquired in approved schools for practical
6 nursing in:
- 7 (a) The observing and caring for the ill, injured, or infirm under the direction of a
8 registered nurse, advanced practice registered nurse, physician assistant,
9 licensed physician, or dentist;
- 10 (b) The giving of counsel and applying procedures to safeguard life and health, as
11 defined and authorized by the board;
- 12 (c) The administration of medication or treatment as authorized by a physician,
13 physician assistant, dentist, or advanced practice registered nurse and as
14 further authorized or limited by the board which is consistent with the
15 National Federation of Licensed Practical Nurses or with Standards of
16 Practice established by nationally accepted organizations of licensed practical
17 nurses;
- 18 (d) Teaching, supervising, and delegating except as limited by the board; and
- 19 (e) The performance of other nursing acts which are authorized or limited by the
20 board and which are consistent with the National Federation of Practical
21 Nurses' Standards of Practice or with Standards of Practice established by
22 nationally accepted organizations of licensed practical nurses;
- 23 (11) "School of nursing" means a nursing education program preparing persons for
24 licensure as a registered nurse or a practical nurse;
- 25 (12) "Continuing education" means offerings beyond the basic nursing program that
26 present specific content planned and evaluated to meet competency based
27 behavioral objectives which develop new skills and upgrade knowledge;

- 1 (13) "Nursing assistance" means the performance of delegated nursing acts by unlicensed
2 nursing personnel for compensation under supervision of a nurse;
- 3 (14) "Sexual assault nurse examiner" means a registered nurse who has completed the
4 required education and clinical experience and maintains a current credential from
5 the board as provided under KRS 314.142 to conduct forensic examinations of
6 victims of sexual offenses under the medical protocol issued by the Justice and
7 Public Safety Cabinet in consultation with the Sexual Assault Response Team
8 Advisory Committee pursuant to KRS 216B.400(4);
- 9 (15) "Competency" means the application of knowledge and skills in the utilization of
10 critical thinking, effective communication, interventions, and caring behaviors
11 consistent with the nurse's practice role within the context of the public's health,
12 safety, and welfare;
- 13 (16) "Credential" means a current license, registration, certificate, or other similar
14 authorization that is issued by the board;
- 15 (17) "Dispense" means:
- 16 (a) To receive and distribute noncontrolled legend drug samples from
17 pharmaceutical manufacturers to patients at no charge to the patient or any
18 other party; or
- 19 (b) To distribute noncontrolled legend drugs from a local, district, and
20 independent health department, subject to the direction of the appropriate
21 governing board of the individual health department;
- 22 (18) "Dialysis care" means a process by which dissolved substances are removed from a
23 patient's body by diffusion, osmosis, and convection from one (1) fluid
24 compartment to another across a semipermeable membrane;
- 25 (19) "Dialysis technician" means a person who is not a nurse, a physician assistant, or a
26 physician and who provides dialysis care in a licensed renal dialysis facility under
27 the direct, on-site supervision of a registered nurse or a physician;

- 1 (20) "Population focus" means the section of the population within which the advanced
2 practice registered nurse has targeted to practice. The categories of population foci
3 are:
- 4 (a) Family and individual across the lifespan;
 - 5 (b) Adult gerontology;
 - 6 (c) Neonatal;
 - 7 (d) Pediatrics;
 - 8 (e) Women's health and gender-related health; and
 - 9 (f) Psychiatric mental health; and
- 10 (21) "Conviction" means but is not limited to:
- 11 (a) An unvacated adjudication of guilt;
 - 12 (b) Pleading no contest or nolo contendere or entering an Alford plea; or
 - 13 (c) Entering a guilty plea pursuant to a pretrial diversion order;
- 14 Regardless of whether the penalty is rebated, suspended, or probated.
- 15 ➔Section 2. KRS 314.042 is amended to read as follows:
- 16 (1) An applicant for licensure to practice as an advanced practice registered nurse shall
17 file with the board a written application for licensure and submit evidence, verified
18 by oath, that the applicant has completed an approved organized postbasic program
19 of study and clinical experience; is certified by a nationally established organization
20 or agency recognized by the board to certify registered nurses for advanced practice
21 registered nursing; and is able to understandably speak and write the English
22 language and to read the English language with comprehension.
 - 23 (2) The board may issue a license to practice advanced practice registered nursing to an
24 applicant who holds a current active registered nurse license issued by the board or
25 holds the privilege to practice as a registered nurse in this state and meets the
26 qualifications of subsection (1) of this section. An advanced practice registered
27 nurse shall be:

- 1 (a) Designated by the board as a certified registered nurse anesthetist, certified
2 nurse midwife, certified nurse practitioner, or clinical nurse specialist; and
- 3 (b) Certified in at least one (1) population focus.
- 4 (3) The applicant for licensure or renewal thereof to practice as an advanced practice
5 registered nurse shall pay a fee to the board as set forth in regulation by the board.
- 6 (4) An advanced practice registered nurse shall maintain a current active registered
7 nurse license issued by the board or hold the privilege to practice as a registered
8 nurse in this state and maintain current certification by the appropriate national
9 organization or agency recognized by the board.
- 10 (5) Any person who holds a license to practice as an advanced practice registered nurse
11 in this state shall have the right to use the title "advanced practice registered nurse"
12 and the abbreviation "APRN." No other person shall assume the title or use the
13 abbreviation or any other words, letters, signs, or figures to indicate that the person
14 using the same is an advanced practice registered nurse. No person shall practice as
15 an advanced practice registered nurse unless licensed under this section.
- 16 (6) Any person heretofore licensed as an advanced practice registered nurse under the
17 provisions of this chapter who has allowed the license to lapse may be reinstated on
18 payment of the current fee and by meeting the provisions of this chapter and
19 regulations promulgated by the board pursuant to the provisions of KRS Chapter
20 13A.
- 21 (7) The board may authorize a person to practice as an advanced practice registered
22 nurse temporarily and pursuant to applicable regulations promulgated by the board
23 pursuant to the provisions of KRS Chapter 13A if the person is awaiting the results
24 of the national certifying examination for the first time or is awaiting licensure by
25 endorsement. A person awaiting the results of the national certifying examination
26 shall use the title "APRN Applicant" or "APRN App."
- 27 (8) (a) Except as authorized by KRS 314.196 and subsection (9) of this section,

- 1 before an advanced practice registered nurse engages in the prescribing or
2 dispensing of nonscheduled legend drugs as authorized by KRS 314.011(8),
3 the advanced practice registered nurse shall enter into a written "Collaborative
4 Agreement for the Advanced Practice Registered Nurse's Prescriptive
5 Authority for Nonscheduled Legend Drugs" (CAPA-NS) with a physician
6 licensed in Kentucky that defines the scope of the prescriptive authority for
7 nonscheduled legend drugs.
- 8 (b) The advanced practice registered nurse shall notify the Kentucky Board of
9 Nursing of the existence of the CAPA-NS and the name of the collaborating
10 physician and shall, upon request, furnish to the board or its staff a copy of the
11 completed CAPA-NS. The Kentucky Board of Nursing shall notify the
12 Kentucky Board of Medical Licensure that a CAPA-NS exists and furnish the
13 collaborating physician's name.
- 14 (c) The CAPA-NS shall be in writing and signed by both the advanced practice
15 registered nurse and the collaborating physician. A copy of the completed
16 collaborative agreement shall be available at each site where the advanced
17 practice registered nurse is providing patient care.
- 18 (d) The CAPA-NS shall describe the arrangement for collaboration and
19 communication between the advanced practice registered nurse and the
20 collaborating physician regarding the prescribing of nonscheduled legend
21 drugs by the advanced practice registered nurse.
- 22 (e) The advanced practice registered nurse who is prescribing nonscheduled
23 legend drugs and the collaborating physician shall be qualified in the same or
24 a similar specialty.
- 25 (f) The CAPA-NS is not intended to be a substitute for the exercise of
26 professional judgment by the advanced practice registered nurse or by the
27 collaborating physician.

- 1 (g) The CAPA-NS shall be reviewed and signed by both the advanced practice
2 registered nurse and the collaborating physician and may be rescinded by
3 either party upon written notice via registered mail to the other party, the
4 Kentucky Board of Nursing, and the Kentucky Board of Medical Licensure.
- 5 (9) (a) Before an advanced practice registered nurse may discontinue or be exempt
6 from a CAPA-NS required under subsection (8) of this section, the advanced
7 practice registered nurse shall have completed four (4) years of prescribing as
8 a nurse practitioner, clinical nurse specialist, nurse midwife, or as a nurse
9 anesthetist. For nurse practitioners and clinical nurse specialists, the four (4)
10 years of prescribing shall be in a population focus of adult-gerontology,
11 pediatrics, neonatal, family, women's health, acute care, or psychiatric-mental
12 health.
- 13 (b) After four (4) years of prescribing with a CAPA-NS in collaboration with a
14 physician:
- 15 1. An advanced practice registered nurse whose license is in good standing
16 at that time with the Kentucky Board of Nursing and who will be
17 prescribing nonscheduled legend drugs without a CAPA-NS shall notify
18 that board that the four (4) year requirement has been met and that he or
19 she will be prescribing nonscheduled legend drugs without a CAPA-NS;
 - 20 2. The advanced practice registered nurse will no longer be required to
21 maintain a CAPA-NS and shall not be compelled to maintain a CAPA-
22 NS as a condition to prescribe after the four (4) years have expired, but
23 an advanced practice registered nurse may choose to maintain a CAPA-
24 NS indefinitely after the four (4) years have expired; and
 - 25 3. If the advanced practice registered nurse's license is not in good
26 standing, the CAPA-NS requirement shall not be removed until the
27 license is restored to good standing.

- 1 (c) An advanced practice registered nurse wishing to practice in Kentucky
2 through licensure by endorsement is exempt from the CAPA-NS requirement
3 if the advanced practice registered nurse:
- 4 1. Has met the prescribing requirements in a state that grants independent
5 prescribing to advanced practice registered nurses; and
 - 6 2. Has been prescribing for at least four (4) years.
- 7 (d) An advanced practice registered nurse wishing to practice in Kentucky
8 through licensure by endorsement who had a collaborative prescribing
9 agreement with a physician in another state for at least four (4) years is
10 exempt from the CAPA-NS requirement.
- 11 (e) After July 15, 2014:
- 12 1. An advanced practice registered nurse whose license is in good standing
13 at that time with the Kentucky Board of Nursing and who will be
14 prescribing nonscheduled legend drugs without a CAPA-NS shall notify
15 that board that the four (4) year requirement has been met and that he or
16 she will be prescribing nonscheduled legend drugs without a CAPA-NS;
 - 17 2. An advanced practice registered nurse who has maintained a CAPA-NS
18 for four (4) years or more will no longer be required to maintain a
19 CAPA-NS and shall not be compelled to maintain a CAPA-NS as a
20 condition to prescribe after the four (4) years have expired, but an
21 advanced practice registered nurse may choose to maintain a CAPA-NS
22 indefinitely after the four (4) years have expired; and
 - 23 3. An advanced practice registered nurse who has maintained a CAPA-NS
24 for less than four (4) years shall be required to continue to maintain a
25 CAPA-NS until the four (4) year period is completed, after which the
26 CAPA-NS will no longer be required.
- 27 (10) ~~(a)~~ Before an advanced practice registered nurse engages in the prescribing of

1 Schedules II through V controlled substances as authorized by KRS 314.011(8), the
2 advanced practice registered nurse shall obtain a Controlled Substance
3 Registration Certificate through the United States Drug Enforcement
4 Agency ~~enter into a written "Collaborative Agreement for the Advanced Practice~~
5 ~~Registered Nurse's Prescriptive Authority for Controlled Substances" (CAPA-CS)~~
6 ~~with a physician licensed in Kentucky that defines the scope of the prescriptive~~
7 ~~authority for controlled substances.~~

8 ~~(b) The advanced practice registered nurse shall notify the Kentucky Board of~~
9 ~~Nursing of the existence of the CAPA-CS and the name of the collaborating~~
10 ~~physician and shall, upon request, furnish to the board or its staff a copy of the~~
11 ~~completed CAPA-CS. The Kentucky Board of Nursing shall notify the~~
12 ~~Kentucky Board of Medical Licensure that a CAPA-CS exists and furnish the~~
13 ~~collaborating physician's name.~~

14 ~~(c) The CAPA-CS shall be in writing and signed by both the advanced practice~~
15 ~~registered nurse and the collaborating physician. A copy of the completed~~
16 ~~collaborative agreement shall be available at each site where the advanced~~
17 ~~practice registered nurse is providing patient care.~~

18 ~~(d) The CAPA-CS shall describe the arrangement for collaboration and~~
19 ~~communication between the advanced practice registered nurse and the~~
20 ~~collaborating physician regarding the prescribing of controlled substances by~~
21 ~~the advanced practice registered nurse.~~

22 ~~(e) The advanced practice registered nurse who is prescribing controlled~~
23 ~~substances and the collaborating physician shall be qualified in the same or a~~
24 ~~similar specialty.~~

25 ~~(f) The CAPA-CS is not intended to be a substitute for the exercise of~~
26 ~~professional judgment by the advanced practice registered nurse or by the~~
27 ~~collaborating physician.~~

1 ~~(g) Before engaging in the prescribing of controlled substances, the advanced~~
2 ~~practice registered nurse shall:~~

3 ~~1. Have been licensed to practice as an advanced practice registered nurse~~
4 ~~for one (1) year with the Kentucky Board of Nursing; or~~

5 ~~2. Be nationally certified as an advanced practice registered nurse and be~~
6 ~~registered, certified, or licensed in good standing as an advanced~~
7 ~~practice registered nurse in another state for one (1) year prior to~~
8 ~~applying for licensure by endorsement in Kentucky.~~

9 ~~(h) Prior to prescribing controlled substances, the advanced practice registered~~
10 ~~nurse shall obtain a Controlled Substance Registration Certificate through the~~
11 ~~U.S. Drug Enforcement Agency.~~

12 ~~(i) The CAPA CS shall be reviewed and signed by both the advanced practice~~
13 ~~registered nurse and the collaborating physician and may be rescinded by~~
14 ~~either party upon written notice via registered mail to the other party, the~~
15 ~~Kentucky Board of Nursing, and the Kentucky Board of Medical Licensure.~~

16 ~~(j) The CAPA CS shall state the limits on controlled substances which may be~~
17 ~~prescribed by the advanced practice registered nurse, as agreed to by the~~
18 ~~advanced practice registered nurse and the collaborating physician. The limits~~
19 ~~so imposed may be more stringent than either the schedule limits on~~
20 ~~controlled substances established in KRS 314.011(8) or the limits imposed in~~
21 ~~regulations promulgated by the Kentucky Board of Nursing thereunder}.~~

22 (11) Nothing in this chapter shall be construed as requiring an advanced practice
23 registered nurse designated by the board as a certified nurse anesthetist to enter into
24 a collaborative agreement with a physician, pursuant to this chapter or any other
25 provision of law, in order to deliver anesthesia care.