

Advanced Practice Nurses and Schedule II Prescribing

Overview of Certain Provisions of Sub. SB 83

According to the Ohio Legislative Service Commission (LSC) Analysis of Sub. SB 83:

“The bill provides that an advanced practice nurse (APN) who holds a certificate to prescribe is not subject to three existing restrictions governing an APN's authority to prescribe schedule II controlled substances, but only when the APN issues a prescription to a patient from specified locations. A schedule II controlled substance is a drug or other substance that (1) has a high potential for abuse, (2) has a currently accepted medical use in treatment in the United States or a currently accepted medical use with severe restrictions, and (3) may lead to severe psychological or physical dependence if abused....

When prescribing from a location that is not one of those specified in the bill, the APN remains subject to the three existing restrictions. These restrictions are that (1) the patient must have a terminal condition, (2) the APN's collaborating physician must have initially prescribed the drug for the patient, and (3) the prescription must be for an amount that does not exceed the amount necessary for the patient's use in a single 24-hour period.

APNs are specifically prohibited from prescribing schedule II controlled substances from convenience care clinics. The locations from which the bill authorizes an APN to prescribe a schedule II controlled substance without being subject to the three restrictions are the following:

- (1) A hospital registered with the Department of Health;
- (2) An entity owned or controlled, in whole or in part, by a hospital or by an entity that owns or controls, in whole or in part, one or more hospitals;
- (3) A health care facility operated by the Department of Mental Health or the Department of Developmental Disabilities;
- (4) A nursing home licensed by the Department of Health or a political subdivision;
- (5) A county home or district home that is certified under the Medicare or Medicaid program;
- (6) A hospice care program;
- (7) A community mental health facility;
- (8) An ambulatory surgical facility;
- (9) A freestanding birthing center;
- (10) A federally qualified health center;
- (11) A federally qualified health center look-alike;
- (12) A health care office or facility operated by a board of health or an authority having the duties of a board of health;
- (13) A site where a medical practice is operated, but only if the practice is comprised of one or more physicians who are also owners of the practice, the practice is organized to provide direct patient care, and the APN providing services at the site has a standard care arrangement and collaborates with at least one of the physician owners who practices primarily at that site. (Entering into a standard care arrangement and practicing in collaboration are requirements of current law governing the practice of APNs.)”

Formulary Revisions and Prescribing Rules

The LSC Analysis further states, “the bill requires the Board of Nursing to adopt rules as necessary to implement the bill's provisions pertaining to an APN's authority to prescribe schedule II controlled substances. The rules must conform to the recommendations submitted by the Committee on Prescriptive Governance (CPG). With respect to the Board's rules establishing criteria for APN standard care arrangements with physicians and podiatrists, the bill requires the rules to include components that apply to the authority to prescribe schedule II controlled substances.”

Anticipating passage of the bill, the CPG began a series of meetings starting in January 2012 to discuss (1) needed revisions to the current Formulary prior to the effective date of the law and (2) recommendations on rules associated with this bill.

The CPG expects to complete the additions/revisions to the Formulary by June 8, 2012, the effective date of the bill. The Board expects to receive recommendations for rules associated with this bill in the coming months and consider the rules for adoption later this year with an anticipated effective date of November 1, 2012.

Continuing Education Requirement and Rule

The LSC Analysis states that Sub. SB 83 “specifies that an APN's authority to prescribe schedule II controlled substances, as established by the act, begins on the (new law's) effective date. The act requires, however, that an APN complete at least six contact hours of instruction specific to schedule II controlled substances if the APN's certificate to prescribe (CTP) was issued either (1) before the act's effective date or (2) before the Board of Nursing implements the act's provisions pertaining to instruction in schedule II controlled substances. Satisfactory evidence of completing the six hours of instruction must be submitted to the Board as a condition of eligibility for renewal of the APN's certificate to prescribe or, in the case of an APN participating in an externship, as a condition of receiving a new certificate.”

The Board of Nursing is working to adopt rules regarding the continuing education requirements specific to CTP holders that would be effective November 1, 2012 to provide ample time for CTP holders to complete the required six hours of continuing education before the renewal cycle ends on August 31, 2013.

To view the complete LSC Analysis and legislative language of Sub. SB 83, please go to the Board web site at www.nursing.ohio.gov and click on Advanced Practice Nursing. Links are included on that page.