Senate



General Assembly

File No. 101

February Session, 2014

Substitute Senate Bill No. 36

Senate, March 25, 2014

The Committee on Public Health reported through SEN. GERRATANA of the 6th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING THE GOVERNOR'S RECOMMENDATIONS TO IMPROVE ACCESS TO HEALTH CARE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Subsection (b) of section 20-87a of the general statutes is
- 2 repealed and the following is substituted in lieu thereof (Effective July
- 3 1, 2014):
- 4 (b) (1) Advanced nursing practice is defined as the performance of
- 5 advanced level nursing practice activities that, by virtue of [postbasic]
- 6 post-basic specialized education and experience, are appropriate to
- 7 and may be performed by an advanced practice registered nurse. The
- 8 advanced practice registered nurse performs acts of diagnosis and
- 9 treatment of alterations in health status, as described in subsection (a)
- of this section. [, and shall]
- 11 (2) An advanced practice registered nurse having been issued a
- 12 license pursuant to section 20-94a shall, for the first three years after
- 13 <u>having been issued such license</u>, collaborate with a physician licensed

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to practice medicine in this state. In all settings, [the] such advanced practice registered nurse may, in collaboration with a physician licensed to practice medicine in this state, prescribe, dispense and administer medical therapeutics and corrective measures and may request, sign for, receive and dispense drugs in the form of professional samples in accordance with sections 20-14c to 20-14e, inclusive, except [that an] such advanced practice registered nurse licensed pursuant to section 20-94a and maintaining current certification from the American Association of Nurse Anesthetists who is prescribing and administrating medical therapeutics during surgery may only do so if the physician who is medically directing the prescriptive activity is physically present in the institution, clinic or other setting where the surgery is being performed. For purposes of this [subsection] subdivision, "collaboration" means a mutually agreed upon relationship between [an] such advanced practice registered nurse and a physician who is educated, trained or has relevant experience that is related to the work of such advanced practice registered nurse. The collaboration shall address a reasonable and appropriate level of consultation and referral, coverage for the patient in the absence of [the] such advanced practice registered nurse, a method to review patient outcomes and a method of disclosure of the relationship to the patient. Relative to the exercise of prescriptive authority, the collaboration between [an] such advanced practice registered nurse and a physician shall be in writing and shall address the level of schedule II and III controlled substances that [the] such advanced practice registered nurse may prescribe and provide a method to review patient outcomes, including, but not limited to, the review of medical therapeutics, corrective measures, laboratory tests and other diagnostic procedures that [the] such advanced practice registered nurse may prescribe, dispense and administer.

43 <u>(3) An advanced practice registered nurse having been issued a</u>
45 <u>license pursuant to section 20-94a and having maintained such license</u>
46 <u>for a period of not less than three years in accordance with the</u>
47 <u>provisions of subdivision (2) of this subsection may thereafter, alone or</u>
48 <u>in collaboration with a physician or another health care provider</u>

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49 licensed to practice in this state: (A) Perform the acts of diagnosis and

- 50 <u>treatment of alterations in health status, as described in subsection (a)</u>
- 51 <u>of this section; and (B) prescribe, dispense and administer medical</u>
 3) An advanced practice registered nurse having (A) been issued a
 - 4 license pursuant to section 20-94a, (B) maintained such license for a
 - 5 period of not less than three years, and (C) engaged in the performance
 - 6 of advanced practice level nursing activities in collaboration with a
 - 7 physician for a period of not less than three years in accordance with
 - 8 the provisions of subdivision (2) of this subsection, may, thereafter,
 - 9 alone or in collaboration with a physician or another health care
- 10 provider licensed to practice in this state: (i) Perform the acts of
- 11 diagnosis and treatment of alterations in health status, as described in
- 12 subsection (a) of this section; and (ii) prescribe, dispense and
- 13 <u>administer medical therapeutics and corrective measures and dispense</u> <u>drugs in the form of professional samples as described in subdivision</u> (2) of this subsection in all settings.
- 55 (4) An advanced practice registered nurse licensed under the
- 56 provisions of this chapter may make the determination and
- 57 pronouncement of death of a patient, provided the advanced practice
- 58 registered nurse attests to such pronouncement on the certificate of
- 59 death and signs the certificate of death [no] <u>not</u> later than twenty-four
- 60 hours after the pronouncement.
- 61 Sec. 2. Subsection (b) of section 20-9 of the 2014 supplement to the
- 62 general statutes, as amended by section 138 of public act 13-234, is
- 63 repealed and the following is substituted in lieu thereof (Effective July
- 64 1, 2014):
- (b) The provisions of this chapter shall not apply to:
- 66 (1) Dentists while practicing dentistry only;
- (2) Any person in the employ of the United States government whileacting in the scope of his employment;
- (3) Any person who furnishes medical or surgical assistance in cases
 of sudden emergency;

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(4) Any person residing out of this state who is employed to come into this state to render temporary assistance to or consult with any physician or surgeon who has been licensed in conformity with the provisions of this chapter;

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- (5) Any physician or surgeon residing out of this state who holds a current license in good standing in another state and who is employed to come into this state to treat, operate or prescribe for any injury, deformity, ailment or disease from which the person who employed such physician, or the person on behalf of whom such physician is employed, is suffering at the time when such nonresident physician or surgeon is so employed, provided such physician or surgeon may practice in this state without a Connecticut license for a period not to exceed thirty consecutive days;
- 6) Any person rendering service as (A) an advanced practice registered nurse if such service is rendered in [collaboration with a licensed physician] accordance with section 20-87a, as amended by this act, or (B) an advanced practice registered nurse maintaining classification from the American Association of Nurse Anesthetists if such service is under the direction of a licensed physician;
 - (7) Any nurse-midwife practicing nurse-midwifery in accordance with the provisions of chapter 377;
- 92 (8) Any podiatrist licensed in accordance with the provisions of chapter 375;
- 94 (9) Any Christian Science practitioner who does not use or prescribe 95 in his practice any drugs, poisons, medicines, chemicals, nostrums or 96 surgery;
- 97 (10) Any person licensed to practice any of the healing arts named 98 in section 20-1, who does not use or prescribe in his practice any drugs, 99 medicines, poisons, chemicals, nostrums or surgery;

(11) Any graduate of any school or institution giving instruction in the healing arts who has been issued a permit in accordance with subsection (a) of section 20-11a and who is serving as an intern, resident or medical officer candidate in a hospital;

- (12) Any student participating in a clinical clerkship program who has the qualifications specified in subsection (b) of section 20-11a;
- 106 (13) Any person, otherwise qualified to practice medicine in this 107 state except that he is a graduate of a medical school located outside of 108 the United States or the Dominion of Canada which school is

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109 recognized by the American Medical Association or the World Health

- 110 Organization, to whom the Connecticut Medical Examining Board,
- subject to such regulations as the Commissioner of Public Health, with
- advice and assistance from the board, prescribes, has issued a permit
- 113 to serve as an intern or resident in a hospital in this state for the
- 114 purpose of extending his education;
- 115 (14) Any person rendering service as a physician assistant licensed
- 116 pursuant to section 20-12b, a registered nurse, a licensed practical
- 117 nurse or a paramedic, as defined in subdivision (15) of section 19a-175,
- acting within the scope of regulations adopted pursuant to section 19a-
- 119 179, if such service is rendered under the supervision, control and
- responsibility of a licensed physician;
- 121 (15) Any student enrolled in an accredited physician assistant
- 122 program or paramedic program approved in accordance with
- regulations adopted pursuant to section 19a-179, who is performing
- such work as is incidental to his course of study;
- 125 (16) Any person who, on June 1, 1993, has worked continuously in
- this state since 1979 performing diagnostic radiology services and who,
- as of October 31, 1997, continued to render such services under the
- supervision, control and responsibility of a licensed physician solely
- within the setting where such person was employed on June 1, 1993;
- 130 (17) Any person practicing athletic training, as defined in section 20-
- 131 65f;
- 132 (18) When deemed by the Connecticut Medical Examining Board to
- be in the public's interest, based on such considerations as academic
- attainments, specialty board certification and years of experience, to a
- foreign physician or surgeon whose professional activities shall be
- 136 confined within the confines of a recognized medical school;
- 137 (19) Any technician engaging in tattooing in accordance with the
- provisions of section 20-2660 or 20-266p and any regulations adopted
- 139 thereunder;

140 (20) Any person practicing perfusion, as defined in section 20-162aa; 141 or

(21) Any foreign physician or surgeon (A) participating in supervised clinical training under the direct supervision and control of a physician or surgeon licensed in accordance with the provisions of this chapter, and (B) whose professional activities are confined to a licensed hospital that has a residency program accredited by the Accreditation Council for Graduate Medical Education or that is a primary affiliated teaching hospital of a medical school accredited by the Liaison Committee on Medical Education. Such hospital shall verify that the foreign physician or surgeon holds a current valid license in another country.

Sec. 3. Section 20-94b of the general statutes is repealed and the following is substituted in lieu thereof (Effective July 1, 2014):

An advanced practice registered nurse licensed pursuant to section 20-94a and maintaining current certification from the American Association of Nurse Anesthetists may prescribe, dispense and administer drugs, including controlled substances in schedule II, III, IV, or V. An advanced practice registered nurse licensed pursuant to section 20-94a who does not maintain current certification from the American Association of Nurse Anesthetists may prescribe, dispense, and administer drugs, including controlled substances in schedule [IV] II, III, IV or V, [except that such an advanced practice registered nurse may also prescribe controlled substances in schedule II or III that are expressly specified in written collaborative agreements pursuant to subsection (b) of in accordance with section 20-87a, as amended by this act.

This act shall take effect as follows and shall amend the following sections:				
Section 1	July 1, 2014	20-87a(b)		
Sec. 2	July 1, 2014	20-9(b)		
Sec. 3	July 1, 2014	20-94b		

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Sec. 501. (NEW) (Effective from passage) As used in this section:

- 17 (1) "Commissioner" means the Commissioner of Public Health;
- 18 (2) "Contact hour" means a minimum of fifty minutes of continuing 19 education and activities;
- 20 (3) "Department" means the Department of Public Health;
- (4) "Licensee" means an advanced practice registered nurse licensed
 pursuant to section 20-94a of the general statutes; and
- 23 (5) "Registration period" means the one-year period for which a 24 license has been renewed in accordance with section 19a-88 of the 25 general statutes and is current and valid.
- 26 (b) Except as provided in this section, for registration periods 27 beginning on and after October 1, 2014, a licensee applying for license 28 renewal shall earn a minimum of fifty contact hours of continuing 29 education within the preceding twenty-four-month period. Such 30 continuing education shall: (1) Be in an area of the advanced practice 31 registered nurse's practice; (2) reflect the professional needs of the 32 licensee in order to meet the health care needs of the public; and (3) 33 include at least five contact hours of training or education in 34 pharmacotherapeutics. For purposes of this section, qualifying 35 continuing education activities include, but are not limited to, courses, 36 including on-line courses, offered or approved by the American 37 Nurses Association, Connecticut Hospital Association, Connecticut 38 Nurses Association, Connecticut League for Nursing, a specialty 39 nursing society or an equivalent organization in another jurisdiction, 40 an educational offering sponsored by a hospital or other health care 41 institution or a course offered by a regionally accredited academic 42 institution or a state or local health department. The commissioner 43 may grant a waiver of not more than ten contact hours of continuing

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education for an advanced practice registered nurse who: (A) Engages in activities related to the advanced practice registered nurse's service as a member of the Connecticut State Board of Examiners for Nursing, established pursuant to section 20-88 of the general statutes; or (B) assists the department with its duties to boards and commissions as described in section 19a-14 of the general statutes.

- (c) Each licensee applying for license renewal pursuant to section 19a-88 of the general statutes shall sign a statement attesting that he or she has satisfied the continuing education requirements of subsection (b) of this section on a form prescribed by the department. Each licensee shall retain records of attendance or certificates of completion that demonstrate compliance with the continuing education requirements of subsection (b) of this section for a minimum of three years following the year in which the continuing education activities were completed and shall submit such records or certificates to the department for inspection not later than forty-five days after a request by the department for such records or certificates.
- (d) A licensee applying for the first time for license renewal pursuant to section 19a-88 of the general statutes is exempt from the continuing education requirements of this section.
- (e) (1) A licensee who is not engaged in active professional practice in any form during a registration period shall be exempt from the continuing education requirements of this section, provided the licensee submits to the department, prior to the expiration of the registration period, a notarized application for exemption on a form prescribed by the department and such other documentation as may be required by the department. The application for exemption pursuant to this subdivision shall contain a statement that the licensee may not engage in professional practice until the licensee has met the requirements of this section.
- (2) Any licensee who is exempt from the provisions of subsection (b) of this section for less than two years shall complete twenty-five

contact hours of continuing education that meets the criteria set forth in subsection (b) of this section within the twelve-month period immediately preceding the licensee's return to active professional practice.

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- (f) In individual cases involving medical disability or illness, the commissioner, or the commissioner's designee, may grant a waiver of the continuing education requirements or an extension of time within which to fulfill the continuing education requirements of this section to any licensee, provided the licensee submits to the department an application for waiver or extension of time on a form prescribed by the department, along with a certification by a licensed physician, physician assistant or advanced practice registered nurse of the disability or illness and such other documentation as may be required by the commissioner. The commissioner or his or her designee may grant a waiver or extension for a period not to exceed one registration period, except that the commissioner or his or her designee may grant additional waivers or extensions if the medical disability or illness upon which a waiver or extension is granted continues beyond the period of the waiver or extension and the licensee applies for an additional waiver or extension.
- (g) Any licensee whose license has become void pursuant to section 19a-88 of the general statutes and who applies to the department for reinstatement of such license pursuant to section 19a-14 of the general statutes shall submit evidence documenting successful completion of twenty-five contact hours of continuing education within the one-year period immediately preceding application for reinstatement.
- Sec. 502. (NEW) (Effective October 1, 2014) (a) For purposes of this section:
- 104 (1) "Advanced practice registered nurse" means a person licensed 105 pursuant to chapter 378 of the general statutes;
- 106 (2) "Applicable manufacturer" means a manufacturer of a covered

107 drug, device, biological, or medical supply that is operating in the

- 108 United States, or in a territory, possession, or commonwealth of the
- 109 United States;
- 110 (3) "Payment or other transfer of value" means a transfer of anything
- of value, except a transfer of anything of value that is made indirectly
- 112 to an advanced practice registered nurse through a third party in
- connection with an activity or service in the case where the applicable
- manufacturer is unaware of the identity of the advanced practice
- 115 registered nurse;
- 116 (4) "Covered drug, device, biological, or medical supply" means any
- drug, biological product, device, or medical supply for which payment
- is available under subchapter XVIII of chapter 7 of Title 42 or the state
- 119 Medicaid plan under subchapter XIX or XXI of said chapter or a
- 120 waiver of such a plan; and
- 121 (5) "Covered device" means any device for which payment is
- available under subchapter XVIII of chapter 7 of Title 42 or the state
- 123 Medicaid plan under subchapter XIX or XXI of said chapter or a
- waiver of such a plan.
- (b) (1) Not later than January 1, 2015, and quarterly thereafter, an
- applicable manufacturer that provides a payment or other transfer of
- value to an advanced practice registered nurse, who is practicing in the
- state, shall submit to the Commissioner of Public Health, in the form
- 129 and manner prescribed by the commissioner, the information
- described in 42 USC 1320a-7h, as amended from time to time.
- 131 (2) The commissioner may publish such information on the
- 132 Department of Public Health's Internet web site.
- (c) An applicable manufacturer that fails to report in accordance
- with this section shall be assessed a civil penalty in an amount not less
- than one thousand dollars or more than four thousand dollars for each
- payment or other transfer of value not reported."

This act shall take effect as follows and shall amend the following	5
sections:	

Sec. 501	from passage	New section
Sec. 502	October 1, 2014	New section

PH Joint Favorable Subst.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

There is no fiscal impact to the Department of Public Health from allowing advanced practice registered nurses (ARPNs) to practice without physician collaboration after having maintained their APRN licenses for at least three years. The bill does not alter licensure or regulatory requirements of the Department. Other technical changes under the bill do not result in a fiscal impact.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis sSB 36

AN ACT CONCERNING THE GOVERNOR'S RECOMMENDATIONS TO IMPROVE ACCESS TO HEALTH CARE.

SUMMARY:

This bill allows advanced practice registered nurses (APRNs) who have been licensed in Connecticut for at least three years to practice independently without needing to collaborate with physicians. Current law requires APRNs to work in collaboration with a physician, including having a written agreement regarding the APRN's prescriptive authority.

The bill also makes technical and conforming changes.

By law, nurse anesthetists (one category of APRNs) must work under a physician's direction. Under current law, certified nurse anesthetists can prescribe and administer medication during surgery only if the physician medically directing the prescriptive activity is physically present in the facility where the surgery is taking place. It is unclear if this restriction continues to apply under the bill to such nurse anesthetists who have been licensed for three years.

EFFECTIVE DATE: July 1, 2014

APRN COLLABORATION WITH PHYSICIANS

Under the bill, the current requirement for an APRN to work in collaboration with a physician applies for the first three years after the APRN becomes licensed in the state. After that, collaboration is optional, and APRNs can practice independently. The bill also specifically permits APRNs licensed at least three years to collaborate with other licensed health care providers.

By law, collaboration is defined as a mutually agreed upon relationship between an APRN and a physician whose education, training, or relevant experience is related to the APRN's work. The collaboration must address (1) a reasonable and appropriate level of consultation and referral, (2) patient coverage in the APRN's absence, (3) methods to review patient outcomes and disclose the relationship to the patient, and (4) what schedule II and III controlled substances the APRN can prescribe. (APRNs can also prescribe schedule IV and V controlled substances.)

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute Yea 22 Nay 4 (03/10/2014)