

An Act

ENROLLED HOUSE
BILL NO. 2298

By: Hilbert, Fetgatter,
Cornwell, Turner, Cantrell,
Munson, and Kelley of the
House

and

Paxton, Murdock, Coleman,
Mann, and Green of the
Senate

An Act relating to the practice of nursing; providing for independent prescriptive authority of Advanced Practice Registered Nurses who meet certain requirements; stating application criteria; specifying duration of authority; providing for disciplinary action; authorizing certain fee; prescribing certain malpractice insurance requirements; directing promulgation of certain advertising rules; requiring certain disclosure; providing penalties; defining terms; providing eligibility requirements for supervising physicians; requiring specified supervision agreement; authorizing supervision fees subject to certain conditions; requiring certain notices; prohibiting certain fees; directing promulgation of certain rules; providing for disciplinary action; requiring certain reporting; directing online publication of certain list; amending 59 O.S. 2021, Section 353.1, as amended by Section 6, Chapter 288, O.S.L. 2022 (59 O.S. Supp. 2024, Section 353.1), which relates to definitions used in the Oklahoma Pharmacy Act; modifying and adding definitions; amending 59 O.S. 2021, Section 353.1a, which relates to prescriptive authority of Advanced Practice Registered Nurses; modifying prescriptive authority of certain Advanced Practice Registered Nurses; updating statutory language; amending 59 O.S. 2021, Section 567.3a, which relates to definitions used in the Oklahoma

Nursing Practice Act; modifying and adding definitions; amending 59 O.S. 2021, Section 567.4a, which relates to prescriptive authority; specifying authority of the Oklahoma Board of Nursing to grant prescriptive authority; directing the Board to promulgate certain rules; clarifying certain educational requirement; requiring the Formulary Advisory Council to develop, update, and publish certain guidelines; modifying references; conforming language; amending 59 O.S. 2021, Section 567.5a, as amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, Section 567.5a), which relates to Advanced Practice Registered Nurse license; providing for independent prescriptive authority by endorsement; amending 63 O.S. 2021, Section 2-312, as amended by Section 2, Chapter 184, O.S.L. 2022 (63 O.S. Supp. 2024, Section 2-312), which relates to controlled dangerous substances; conforming language; limiting effect of certain authority; updating statutory references and language; providing for codification; and providing an effective date.

SUBJECT: Practice of nursing

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 567.4c of Title 59, unless there is created a duplication in numbering, reads as follows:

A. An Advanced Practice Registered Nurse recognized by the Oklahoma Board of Nursing as a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife who has completed a minimum of six thousand two hundred forty (6,240) clinical practice hours with prescriptive authority supervised by a physician may apply to the Oklahoma Board of Nursing for authority to prescribe and order independent of supervision.

B. The application for independent prescriptive authority shall include proof that the Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife:

1. Holds a valid, current license in the appropriate Advanced Practice Registered Nurse role issued by the Board and is in good standing with the Board; and

2. Has completed a minimum of six thousand two hundred forty (6,240) clinical practice hours with prescriptive authority supervised by a physician. This paragraph shall not be construed to exclude practice hours with supervised prescriptive authority obtained prior to the effective date of this act from being counted toward the hours required in this paragraph.

C. Independent prescriptive authority granted under this section shall be valid until the expiration of the current license to practice and may be renewed upon application to the Board at the same time and for the same period as the renewal of the license to practice.

D. The Board may suspend or revoke independent prescriptive authority granted under this section in accordance with the Administrative Procedures Act for violation of the provisions of, or the rules promulgated under, the Oklahoma Nursing Practice Act.

E. The Board may assess a reasonable fee for the review of initial and renewal applications under the provisions of this section.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 567.5b of Title 59, unless there is created a duplication in numbering, reads as follows:

A. An Advanced Practice Registered Nurse, or the employer of the Advanced Practice Registered Nurse on his or her behalf, shall carry malpractice insurance or demonstrate proof of financial responsibility in a minimum amount of One Million Dollars (\$1,000,000.00) per occurrence and Three Million Dollars (\$3,000,000.00) in the aggregate per year. This requirement shall apply only to the Advanced Practice Registered Nurse and shall not be construed as to require the Advanced Practice Registered Nurse to provide malpractice insurance coverage to any supervising physician.

B. An Advanced Practice Registered Nurse who is employed by or under contract with a federal agency that carries malpractice insurance in any amount on behalf of the Advanced Practice Registered Nurse shall be deemed in compliance with subsection A of this section when practicing under such federal employment or

contract. However, to the extent the Advanced Practice Registered Nurse practices outside of such federal employment or contract, the Advanced Practice Registered Nurse, or his or her employer, shall comply with subsection A of this section.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 567.5c of Title 59, unless there is created a duplication in numbering, reads as follows:

A. The Oklahoma Board of Nursing shall promulgate rules governing the advertising of health care services by Advanced Practice Registered Nurses to include, but not be limited to, the specialty areas or types of health care services Advanced Practice Registered Nurses may advertise based on their training or experience.

B. Any such advertisement shall clearly state that the person providing such services is an Advanced Practice Registered Nurse and shall not imply that the Advanced Practice Registered Nurse is a physician or that he or she may perform any medical service or prescribe any medication beyond those authorized under state law or in a manner otherwise inconsistent with state law.

C. An Advanced Practice Registered Nurse who violates the provisions of this section shall be subject to disciplinary action by the Oklahoma Board of Nursing which may include, but not be limited to, revocation of licensure.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 479.1 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. As used in this section:

1. "Advanced Practice Registered Nurse" has the same meaning as defined in Section 567.3a of Title 59 of the Oklahoma Statutes, except that such term does not include a Certified Registered Nurse Anesthetist;

2. "Board" means the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, or both, as the context indicates; and

3. The terms "supervising physician" and "supervision" have the same meaning as defined in Section 567.3a of Title 59 of the Oklahoma Statutes.

B. To be eligible to serve as a supervising physician for an Advanced Practice Registered Nurse who has not obtained independent prescriptive authority under Section 1 of this act, the physician shall meet the following criteria:

1. Have possession of a full and unrestricted license to practice allopathic or osteopathic medicine issued by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners;

2. Have possession of a valid registration to prescribe controlled substances issued by the Drug Enforcement Administration and the Oklahoma State Bureau of Narcotics and Dangerous Drugs Control; and

3. Be trained and fully qualified in the field of the Advanced Practice Registered Nurse's specialty as determined by the physician's respective Board; provided, however, a supervising physician for a Certified Nurse-Midwife may be a family practice physician, obstetrician, or gynecologist.

C. A supervising physician shall enter into a written supervision agreement with each Advanced Practice Registered Nurse he or she supervises. The supervising physician shall file the supervision agreement with his or her respective Board in the manner prescribed by such Board. The supervision agreement shall specify:

1. Any fees charged to the Advanced Practice Registered Nurse for supervision services in accordance with subsection D of this section;

2. The scope of the Advanced Practice Registered Nurse's prescriptive authority, subject to any limits on scope of prescriptive authority provided by the rules of the Oklahoma Board of Nursing;

3. A description of the extent of the supervision required;

4. The duties and responsibilities of the supervising physician;

5. Procedures for notice to be provided by the supervising physician to Advanced Practice Registered Nurses for periods of absence in accordance with subsection E of this section; and

6. One or more alternate physicians designated to supervise the Advanced Practice Registered Nurse in such periods of absence in accordance with the rules promulgated under subsection H of this section.

D. 1. A supervising physician may charge a reasonable fee to the Advanced Practice Registered Nurse for his or her supervision services. Any such fees shall be:

- a. disclosed in the supervision agreement required under subsection C of this section,
- b. appropriate based on the actual duties and responsibilities of the supervising physician as outlined in the supervision agreement, and
- c. a fair market value hourly rate in accordance with the rules promulgated under subsection H of this section, or by mutual agreement between the Advanced Practice Registered Nurse and supervising physician.

2. The provisions of this subsection shall apply only to compensation received by the supervising physician directly from the Advanced Practice Registered Nurse. This subsection shall not be construed to:

- a. preclude a supervising physician from entering into a payment arrangement for supervision fees to be paid by his or her employer or health care entity in lieu of the Advanced Practice Registered Nurse,
- b. preclude an employer or health care entity of a supervising physician from prohibiting, limiting, or otherwise addressing such supervision fees through policies, contracts, or bylaws, or
- c. apply to or impact any compensation a supervising physician receives from his or her employer or health care entity for supervision services.

E. A supervising physician shall notify all Advanced Practice Registered Nurses under his or her supervision of reasonably anticipated periods of unavailability or incapacity on the part of the supervising physician. Notice shall be given by the method

agreed to by the supervising physician and the Advanced Practice Registered Nurse within the written supervision agreement.

F. The supervising physician shall report to his or her respective Board, and shall notify all Advanced Practice Registered Nurses under his or her supervision of, any changes to the supervising relationship within thirty (30) calendar days including, but not limited to, the addition or removal of an Advanced Practice Registered Nurse under the physician's supervision or a change to the physician's practice address or contact information. The physician's supervision agreements shall be amended as necessary to reflect any such changes.

G. The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners shall not charge any fees to supervising physicians or Advanced Practice Registered Nurses for the maintenance or oversight of supervision agreements or other administrative functions related to the implementation or enforcement of this section.

H. The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners shall promulgate a uniform set of rules establishing standards for proper supervision of Advanced Practice Registered Nurses who have not obtained independent prescriptive authority under Section 1 of this act, including:

1. The charging of reasonable fees to provide supervision services. The rules shall establish a fair market value hourly rate for such fees, which shall be redetermined biennially;

2. Continuous availability of direct communications either in person or by electronic communications between the Advanced Practice Registered Nurse and supervising physician;

3. Oversight and acceptance of responsibility for the ordering and transmission of written, telephonic, electronic, or oral prescriptions for drugs and other medical supplies, subject to the formulary established by the Oklahoma Board of Nursing;

4. Review of prescribing patterns of the Advanced Practice Registered Nurse;

5. The delineation of a plan for emergencies; and

6. The designation of one or more alternate physicians in the absence of the supervising physician.

I. A supervising physician may be subject to disciplinary action by his or her respective Board for failure to comply with the provisions of, or the rules promulgated under, this section including, but not limited to, failure to provide proper supervision.

J. If either Board imposes limits through rule on the number of Advanced Practice Registered Nurses that a supervising physician may supervise, such limits shall not apply when an Advanced Practice Registered Nurse is practicing in a hospital licensed by the State Department of Health.

K. The Executive Director of each Board shall report annually to the respective Board the number of complaints received in relation to this section.

L. The State Board of Medical Licensure and Supervision and the State Board of Osteopathic Examiners shall each create and maintain on the respective Board's website a list of physicians who are available to supervise Advanced Practice Registered Nurses.

SECTION 5. AMENDATORY 59 O.S. 2021, Section 353.1, as amended by Section 6, Chapter 288, O.S.L. 2022 (59 O.S. Supp. 2024, Section 353.1), is amended to read as follows:

Section 353.1. For the purposes of the Oklahoma Pharmacy Act:

1. "Accredited program" means those seminars, classes, meetings, work projects, and other educational courses approved by the ~~Board~~ State Board of Pharmacy for purposes of continuing professional education;

2. "Act" means the Oklahoma Pharmacy Act;

3. "Administer" means the direct application of a drug, whether by injection, inhalation, ingestion, or any other means, to the body of a patient;

4. "Assistant pharmacist" means any person presently licensed as an assistant pharmacist in ~~the State of Oklahoma~~ this state by the Board pursuant to Section 353.10 of this title and for the

purposes of the Oklahoma Pharmacy Act shall be considered the same as a pharmacist, except where otherwise specified;

5. "Board" or "State Board" means the State Board of Pharmacy;

6. "Certify" or "certification of a prescription" means the review of a filled prescription by a licensed pharmacist or a licensed practitioner with dispensing authority to confirm that the medication, labeling, and packaging of the filled prescription are accurate and meet all requirements prescribed by state and federal law. For the purposes of this paragraph, "licensed practitioner" shall not include optometrists with dispensing authority;

7. "Chemical" means any medicinal substance, whether simple or compound or obtained through the process of the science and art of chemistry, whether of organic or inorganic origin;

8. "Compounding" means the combining, admixing, mixing, diluting, pooling, reconstituting, or otherwise altering of a drug or bulk drug substance to create a drug. Compounding includes the preparation of drugs or devices in anticipation of prescription drug orders based on routine, regularly observed prescribing patterns;

9. "Continuing professional education" means professional, pharmaceutical education in the general areas of the socioeconomic and legal aspects of health care; the properties and actions of drugs and dosage forms; and the etiology, characteristics, and therapeutics of the diseased state;

10. "Dangerous drug", "legend drug", "prescription drug", or "Rx Only" means a drug:

- a. for human use subject to 21 U.S.C., Section 353(b)(1), or
- b. is labeled "Prescription Only", or labeled with the following statement: "Caution: Federal law restricts this drug ~~except for~~ to use by or on the order of a licensed veterinarian.";

11. "Director" means the Executive Director of the State Board of Pharmacy unless context clearly indicates otherwise;

12. "Dispense" or "dispensing" means the interpretation, evaluation, and implementation of a prescription drug order

including the preparation and delivery of a drug or device to a patient or a patient's agent in a suitable container appropriately labeled for subsequent administration to, or use by, a patient. Dispense includes sell, distribute, leave with, give away, dispose of, deliver, or supply;

13. "Dispenser" means a retail pharmacy, hospital pharmacy, a group of chain pharmacies under common ownership and control that do not act as a wholesale distributor, or any other person authorized by law to dispense or administer prescription drugs, and the affiliated warehouses or distributions of such entities under common ownership and control that do not act as a wholesale distributor. For the purposes of this paragraph, ~~"dispenser"~~ dispenser does not mean a person who dispenses only products to be used in animals in accordance with 21 U.S.C., Section 360b(a) (5);

14. "Distribute" or "distribution" means the sale, purchase, trade, delivery, handling, storage, or receipt of a product, and does not include the dispensing of a product pursuant to a prescription executed in accordance with 21 U.S.C., Section 353(b) (1) or the dispensing of a product approved under 21 U.S.C., Section 360b(b); provided, taking actual physical possession of a product or title shall not be required;

15. "Doctor of Pharmacy" means a person licensed by the Board to engage in the practice of pharmacy. The terms "pharmacist", "D.Ph.", and "Doctor of Pharmacy" shall be interchangeable and shall have the same meaning wherever they appear in the Oklahoma Statutes and the rules promulgated by the Board;

16. "Drug outlet" means all manufacturers, repackagers, outsourcing facilities, wholesale distributors, third-party logistics providers, pharmacies, and all other facilities which are engaged in dispensing, delivery, distribution, or storage of dangerous drugs;

17. "Drugs" means all medicinal substances and preparations recognized by the United States ~~Pharmacopoeia~~ Pharmacopeia and National Formulary, or any revision thereof, and all substances and preparations intended for external and/or internal use in the cure, diagnosis, mitigation, treatment, or prevention of disease in humans or animals and all substances and preparations, other than food, intended to affect the structure or any function of the body of a human or animals;

18. "Drug sample" means a unit of a prescription drug packaged under the authority and responsibility of the manufacturer that is not intended to be sold and is intended to promote the sale of the drug;

19. "Durable medical equipment" has the same meaning as provided by ~~Section 2 of this act~~ Section 375.2 of this title;

20. "Filled prescription" means a packaged prescription medication to which a label has been affixed which contains such information as is required by the Oklahoma Pharmacy Act;

21. "Hospital" means any institution licensed as a hospital by this state for the care and treatment of patients, or a pharmacy operated by the Oklahoma Department of Veterans Affairs;

22. "Licensed practitioner" means:

- a. an allopathic physician,
- b. an osteopathic physician,
- c. a podiatric physician,
- d. a dentist,
- e. a veterinarian ~~or~~,
- f. an optometrist, or
- g. an Advanced Practice Registered Nurse,

licensed to practice and authorized to prescribe dangerous drugs within the scope of practice of such practitioner;

23. "Manufacturer" or "virtual manufacturer" means with respect to a product:

- a. a person that holds an application approved under 21 U.S.C., Section 355 or a license issued under 42 U.S.C., Section 262 for such product, or if such product is not the subject of an approved application or license, the person who manufactured the product,
- b. a co-licensed partner of the person described in subparagraph a of this paragraph that obtains the

product directly from a person described in this subparagraph or subparagraph a of this paragraph,

- c. an affiliate of a person described in subparagraph a or b of this paragraph who receives the product directly from a person described in this subparagraph or in subparagraph a or b of this paragraph, or
- d. a person who contracts with another to manufacture a product;

24. "Manufacturing" means the production, preparation, propagation, compounding, conversion, or processing of a device or a drug, either directly or indirectly by extraction from substances of natural origin or independently by means of chemical or biological synthesis and includes any packaging or repackaging of the substances or labeling or relabeling of its container, and the promotion and marketing of such drugs or devices. The term ~~"manufacturing"~~ manufacturing also includes the preparation and promotion of commercially available products from bulk compounds for resale by licensed pharmacies, licensed practitioners, or other persons;

25. "Medical gas" means those gases including those in liquid state upon which the manufacturer or distributor has placed one of several cautions, such as "Rx Only", in compliance with federal law;

26. "Medical gas order" means an order for medical gas issued by a licensed prescriber;

27. "Medical gas distributor" means a person licensed to distribute, transfer, wholesale, deliver, or sell medical gases on drug orders to suppliers or other entities licensed to use, administer, or distribute medical gas and may also include a patient or ultimate user;

28. "Medical gas supplier" means a person who dispenses medical gases on drug orders only to a patient or ultimate user;

29. "Medicine" means any drug or combination of drugs which has the property of curing, preventing, treating, diagnosing, or mitigating diseases, or which is used for that purpose;

30. "Nonprescription drugs" means medicines or drugs which are sold without a prescription and which are prepackaged for use by the

consumer and labeled in accordance with the requirements of the statutes and regulations of this state and the federal government. Such items shall also include medical and dental supplies and bottled or nonbulk chemicals which are sold or offered for sale to the general public if such articles or preparations meet the requirements of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C.A., Section 321 et seq.;

31. "Outsourcing facility" including "virtual outsourcing facility" means a facility at one geographic location or address that:

- a. is engaged in the compounding of sterile drugs,
- b. has elected to register as an outsourcing facility, and
- c. complies with all requirements of 21 U.S.C., Section 353b;

32. "Package" means the smallest individual saleable unit of product for distribution by a manufacturer or repackager that is intended by the manufacturer for ultimate sale to the dispenser of such product. For the purposes of this paragraph, "individual saleable unit" means the smallest container of a product introduced into commerce by the manufacturer or repackager that is intended by the manufacturer or repackager for individual sale to a dispenser;

33. "Person" means an individual, partnership, limited liability company, corporation, or association, unless the context otherwise requires;

34. "Pharmacist-in-charge" or "PIC" means the pharmacist licensed in this state responsible for the management control of a pharmacy and all other aspects of the practice of pharmacy in a licensed pharmacy as ~~defined~~ provided by Section 353.18 of this title;

35. "Pharmacy" means a place regularly licensed by the State Board of Pharmacy in which prescriptions, drugs, medicines, chemicals, and poisons are compounded or dispensed or such place where pharmacists practice the profession of pharmacy, or a pharmacy operated by the Oklahoma Department of Veterans Affairs;

36. "Pharmacy technician", "technician", "Rx tech", or "tech" means a person issued a ~~Technician~~ technician permit by the State Board of Pharmacy to assist the pharmacist and perform nonjudgmental, technical, manipulative, non-discretionary functions in the prescription department under the immediate and direct supervision of a pharmacist;

37. "Poison" means any substance which when introduced into the body, either directly or by absorption, produces violent, morbid, or fatal changes, or which destroys living tissue with which such substance comes into contact;

38. "Practice of pharmacy" means:

- a. the interpretation and evaluation of prescription orders,
- b. the compounding, dispensing, administering, and labeling of drugs and devices, except labeling by a manufacturer, repackager, or distributor of nonprescription drugs and commercially packaged legend drugs and devices,
- c. the participation in drug selection and drug utilization reviews,
- d. the proper and safe storage of drugs and devices and the maintenance of proper records thereof,
- e. the responsibility for advising by counseling and providing information, where professionally necessary or where regulated, of therapeutic values, content, hazards, and use of drugs and devices,
- f. the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management, and control of a pharmacy, or
- g. the provision of those acts or services that are necessary to provide pharmaceutical care;

39. "Preparation" means an article which may or may not contain sterile products compounded in a licensed pharmacy pursuant to the order of a licensed prescriber;

40. "Prescriber" means a person licensed in this state who is authorized to prescribe dangerous drugs within the scope of practice of the person's profession;

41. "Prescription" means and includes any order for drug or medical supplies written or signed, or transmitted by word of mouth, telephone, or other means of communication:

- a. by a licensed prescriber,
- b. ~~under the supervision of an Oklahoma licensed practitioner, an Oklahoma licensed advanced practice registered nurse or an Oklahoma licensed by a~~ physician assistant pursuant to a practice agreement,
~~or~~
- c. (1) under the supervision of a supervising physician, by a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife licensed in this state who has not obtained independent prescriptive authority under Section 1 of this act, or
(2) by a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife licensed in this state who has obtained independent prescriptive authority under Section 1 of this act, or
- d. by an Oklahoma licensed wholesaler or distributor as authorized in Section 353.29.1 of this title;

42. "Product" means a prescription drug in a finished dosage form for administration to a patient without substantial further manufacturing, such as capsules, tablets, and lyophilized products before reconstitution. ~~"Product"~~ Product does not include blood components intended for transfusion, radioactive drugs or biologics and medical gas;

43. "Repackager", including "virtual repackager", means a person who owns or operates an establishment that repacks and relabels a product or package for further sale or distribution without further transaction;

44. "Sterile drug" means a drug that is intended for parenteral administration, an ophthalmic or oral inhalation drug in aqueous format, or a drug that is required to be sterile under state and federal law;

45. "Supervising physician" means an individual holding a current license to practice as a physician from the State Board of Medical Licensure and Supervision, pursuant to the provisions of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, or the State Board of Osteopathic Examiners, pursuant to the provisions of the Oklahoma Osteopathic Medicine Act, who supervises ~~an advanced practice registered nurse~~ a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife as defined in Section 567.3a of this title who has not obtained independent prescriptive authority under Section 1 of this act, and who is not in training as an intern, resident, or fellow. ~~To be eligible to supervise an advanced practice registered nurse, such~~ The supervising physician shall remain in compliance with the rules promulgated by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners;

46. "Supportive personnel" means technicians and auxiliary supportive persons who are regularly paid employees of a pharmacy who work and perform tasks in the pharmacy as authorized by Section 353.18A of this title;

47. "Third-party logistics provider" including "virtual third-party logistics provider" means an entity that provides or coordinates warehousing, or other logistics services of a product in interstate commerce on behalf of a manufacturer, wholesale distributor, or dispenser of a product but does not take ownership of the product, nor have responsibility to direct the sale or disposition of the product. For the purposes of this paragraph, ~~"third party logistics provider"~~ third-party logistics provider does not include shippers and the United States Postal Service;

48. "Wholesale distributor" including "virtual wholesale distributor" means a person other than a manufacturer, a manufacturer's co-licensed partner, a third-party logistics provider, or repackager engaged in wholesale distribution as defined by 21 U.S.C., Section 353(e)(4) as amended by the Drug Supply Chain Security Act;

49. "County jail" means a facility operated by a county for the physical detention and correction of persons charged with, or

convicted of, criminal offenses or ordinance violations or persons found guilty of civil or criminal contempt;

50. "State correctional facility" means a facility or institution that houses a prisoner population under the jurisdiction of the Department of Corrections;

51. "Unit dose package" means a package that contains a single dose drug with the name, strength, control number, and expiration date of that drug on the label; and

52. "Unit of issue package" means a package that provides multiple doses of the same drug, but each drug is individually separated and includes the name, lot number, and expiration date.

SECTION 6. AMENDATORY 59 O.S. 2021, Section 353.1a, is amended to read as follows:

Section 353.1a. A. ~~Prescribing~~ 1. Prescriptive authority shall be allowed, under the medical direction of a current supervision agreement with a supervising physician, for an advanced practice nurse a licensed Advanced Practice Registered Nurse recognized by the Oklahoma Board of Nursing in one of the following categories: advanced registered nurse practitioners, clinical nurse specialists, or certified nurse midwives as a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife who has not obtained independent prescriptive authority under Section 1 of this act.

2. Prescriptive authority shall be allowed, independent of a current supervision agreement with a supervising physician, for a licensed Advanced Practice Registered Nurse recognized by the Oklahoma Board of Nursing as a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife who has obtained independent prescriptive authority under Section 1 of this act.

B. ~~The advanced practice nurse~~ Advanced Practice Registered Nurse may write or sign, or transmit by word of mouth, telephone, or other means of communication an order for drugs or medical supplies that is intended to be filled, compounded, or dispensed by a pharmacist. The supervising physician, if applicable, and the ~~advanced practice nurse~~ prescribing Advanced Practice Registered Nurse shall be identified at the time of origination of the prescription and the name of the ~~advanced practice nurse~~ prescribing

Advanced Practice Registered Nurse shall be printed on the prescription label.

~~B. C.~~ Pharmacists may dispense prescriptions for non-controlled prescription drugs authorized by an ~~advanced practice nurse~~ Advanced Practice Registered Nurse or physician assistant, not located in ~~Oklahoma~~ this state, provided that they are licensed in the state in which they are actively prescribing.

~~C. D. 1.~~ Pharmacists may only dispense prescriptions for controlled dangerous substances prescribed by an ~~advanced practice nurse or physician assistant~~ Advanced Practice Registered Nurse licensed in the ~~State of Oklahoma and supervised by an Oklahoma-licensed practitioner~~ this state who meets the criteria in paragraph 1 or 2 of subsection A of this section.

2. Pharmacists may only dispense prescriptions for controlled dangerous substances prescribed by a physician assistant licensed in this state pursuant to a practice agreement.

SECTION 7. AMENDATORY 59 O.S. 2021, Section 567.3a, is amended to read as follows:

Section 567.3a. As used in the Oklahoma Nursing Practice Act:

1. "Board" means the Oklahoma Board of Nursing;

2. "The practice of nursing" means the performance of services provided for purposes of nursing diagnosis and treatment of human responses to actual or potential health problems consistent with educational preparation. Knowledge and skill are the basis for assessment, analysis, planning, intervention, and evaluation used in the promotion and maintenance of health and nursing management of illness, injury, infirmity, restoration ~~or~~ of optimal function, or death with dignity. Practice is based on understanding the human condition across the human lifespan and understanding the relationship of the individual within the environment. This practice includes execution of the medical regime including the administration of medications and treatments prescribed by any person authorized by state law to so prescribe;

3. "Registered nursing" means the practice of the full scope of nursing which includes, but is not limited to:

- a. assessing the health status of individuals, families, and groups,
- b. analyzing assessment data to determine nursing care needs,
- c. establishing goals to meet identified health care needs,
- d. planning a strategy of care,
- e. establishing priorities of nursing intervention to implement the strategy of care,
- f. implementing the strategy of care,
- g. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Oklahoma Nursing Practice Act,
- h. providing safe and effective nursing care rendered directly or indirectly,
- i. evaluating responses to interventions,
- j. teaching the principles and practice of nursing,
- k. managing and supervising the practice of nursing,
- l. collaborating with other health professionals in the management of health care,
- m. performing additional nursing functions in accordance with knowledge and skills acquired beyond basic nursing preparation, and
- n. delegating those nursing tasks as defined in the rules of the Board that may be performed by an ~~advanced unlicensed assistive person~~ Advanced Unlicensed Assistant;

4. "Licensed practical nursing" means the practice of nursing under the supervision or direction of a ~~registered nurse~~ Registered

Nurse, licensed physician, or dentist. This directed scope of nursing practice includes, but is not limited to:

- a. contributing to the assessment of the health status of individuals and groups,
- b. participating in the development and modification of the plan of care,
- c. implementing the appropriate aspects of the plan of care,
- d. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the Oklahoma Nursing Practice Act,
- e. providing safe and effective nursing care rendered directly or indirectly,
- f. participating in the evaluation of responses to interventions,
- g. teaching basic nursing skills and related principles,
- h. performing additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and
- i. delegating those nursing tasks as defined in the rules of the Board that may be performed by an ~~advanced unlicensed assistive person~~ Advanced Unlicensed Assistant;

5. "Advanced Practice Registered Nurse" means a licensed Registered Nurse:

- a. who has completed an advanced practice registered nursing education program in preparation for one of four recognized ~~advanced practice registered nurse~~ Advanced Practice Registered Nurse roles,
- b. who has passed a national certification examination recognized by the Board that measures the ~~advanced practice registered nurse~~ Advanced Practice Registered

Nurse role and specialty competencies and who maintains recertification in the role and specialty through a national certification program,

- c. who has acquired advanced clinical knowledge and skills in preparation for providing both direct and indirect care to patients; however, the defining factor for all Advanced Practice Registered Nurses is that ~~a significant component of~~ the education and practice focuses on direct care of individuals,
- d. whose practice builds on the competencies of Registered Nurses by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, and increased complexity of skills and interventions, and
- e. who has obtained a license as an Advanced Practice Registered Nurse in one of the following roles: Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, Clinical Nurse Specialist, or Certified Nurse Practitioner.

Only those persons who hold a license to practice advanced practice registered nursing in this state shall have the right to use the title ~~"Advanced Practice Registered Nurse"~~ Advanced Practice Registered Nurse and to use the abbreviation "APRN". Only those persons who have obtained a license in the following disciplines shall have the right to fulfill the roles and use the applicable titles: Certified Registered Nurse Anesthetist and the abbreviation "CRNA", Certified Nurse-Midwife and the abbreviation "CNM", Clinical Nurse Specialist and the abbreviation "CNS", and Certified Nurse Practitioner and the abbreviation "CNP".

It shall be unlawful for any person to assume the role or use the title Advanced Practice Registered Nurse or use the abbreviation ~~"APRN"~~ APRN or use the respective specialty role titles and abbreviations or to use any other titles or abbreviations that would reasonably lead a person to believe the user is an Advanced Practice Registered Nurse, unless permitted by the Oklahoma Nursing Practice Act. Any individual doing so shall be guilty of a misdemeanor, which shall be punishable, upon conviction, by imprisonment in the county jail for not more than one (1) year or by a fine ~~of~~ not less than One Hundred Dollars (\$100.00) nor more than One Thousand Dollars (\$1,000.00), or by both such imprisonment and fine for each offense;

6. "Certified Nurse Practitioner" ~~is~~ means an Advanced Practice Registered Nurse who performs in an expanded role in the delivery of health care:

- a. consistent with advanced educational preparation as a Certified Nurse Practitioner in an area of specialty,
- b. functions within the Certified Nurse Practitioner scope of practice for the selected area of specialization, and
- c. ~~is~~ in accord with the standards for Certified Nurse Practitioners as identified by the certifying body and approved by the Board.

A Certified Nurse Practitioner shall be eligible, in accordance with the scope of practice of the Certified Nurse Practitioner, to obtain recognition as authorized by the Board to prescribe, as defined by the rules promulgated by the Board pursuant to ~~this section and subject to the medical direction of a supervising physician~~ Section 567.4a of this title and Section 1 of this act. This authorization shall not include dispensing drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, or the dispensing of professional samples to patients.

The Certified Nurse Practitioner accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice registered nursing standards and functions as defined by the scope of practice/role definition statements for the Certified Nurse Practitioner;

7. a. "Clinical Nurse Specialist" ~~is~~ means an Advanced Practice Registered Nurse who holds:
 - (1) a master's degree or higher in nursing with clinical specialization preparation to function in an expanded role,
 - (2) specialty certification from a national certifying organization recognized by the Board, and
 - (3) an Advanced Practice Registered Nurse license from the Board, ~~and~~

~~(4) any.~~

Any nurse holding a specialty certification as a Clinical Nurse Specialist valid on January 1, 1994, granted by a national certifying organization recognized by the Board, shall be deemed to be a Clinical Nurse Specialist under the provisions of the Oklahoma Nursing Practice Act.

- b. In the expanded role, the Clinical Nurse Specialist performs at an advanced practice level which shall include, but not be limited to:
 - (1) practicing as an expert clinician in the provision of direct nursing care to a selected population of patients or clients in any setting, including private practice,
 - (2) managing the care of patients or clients with complex nursing problems,
 - (3) enhancing patient or client care by integrating the competencies of clinical practice, education, consultation, and research, and
 - (4) referring patients or clients to other services.
- c. A Clinical Nurse Specialist in accordance with the scope of practice of such Clinical Nurse Specialist shall be eligible to obtain recognition as authorized by the Board to prescribe, as defined by the rules promulgated by the Board pursuant to ~~this section, and subject to the medical direction of a supervising physician~~ Section 567.4a of this title and Section 1 of this act. This authorization shall not include dispensing drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, or the dispensing of professional samples to patients.
- d. The Clinical Nurse Specialist accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the

scope of practice/role definition statements for the Clinical Nurse Specialist;

8. ~~"Nurse-Midwife" is~~ "Certified Nurse-Midwife" means a nurse who has received an Advanced Practice Registered Nurse license from the Oklahoma Board of Nursing who possesses evidence of certification according to the requirements of the American College of Nurse-Midwives.

A Certified Nurse-Midwife in accordance with the scope of practice of such Certified Nurse-Midwife shall be eligible to obtain recognition as authorized by the Board to prescribe, as defined by the rules promulgated by the Board pursuant to ~~this section and subject to the medical direction of a supervising physician~~ Section 567.4a of this title and Section 1 of this act. This authorization shall not include the dispensing of drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, or the dispensing of professional samples to patients.

The Certified Nurse-Midwife accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice registered nursing standards and functions as defined by the scope of practice/role definition statements for the Certified Nurse-Midwife;

9. "Nurse-midwifery practice" means providing management of care of normal newborns and women, antepartally, intrapartally, postpartally, and gynecologically, occurring within a health care system which provides for medical consultation, medical management, or referral, and is in accord with the standards for nurse-midwifery practice as defined by the American College of Nurse-Midwives;

10. a. "Certified Registered Nurse Anesthetist" ~~is~~ means an Advanced Practice Registered Nurse who:

- (1) is certified by the National Board of Certification and Recertification for Nurse Anesthetists as a Certified Registered Nurse Anesthetist within one (1) year following completion of an approved ~~certified registered nurse-anesthetist~~ Certified Registered Nurse Anesthetist education program, and continues to maintain such recertification by the National Board of Certification and Recertification for Nurse Anesthetists, and

- (2) administers anesthesia in collaboration with a medical doctor, an osteopathic physician, a podiatric physician, or a dentist licensed in this state and under conditions in which timely ~~onsite~~ on-site consultation by such doctor, osteopath, podiatric physician, or dentist is available.
- b. A Certified Registered Nurse Anesthetist, in collaboration with a medical doctor, osteopathic physician, podiatric physician, or dentist licensed in this state, and under conditions in which timely, on-site consultation by such medical doctor, osteopathic physician, podiatric physician, or dentist is available, shall be authorized, pursuant to rules adopted by the Oklahoma Board of Nursing, to order, select, obtain, and administer legend drugs, Schedules II through V controlled substances, devices, and medical gases only when engaged in the preanesthetic preparation and evaluation; anesthesia induction, maintenance, and emergence; and postanesthesia care. A Certified Registered Nurse Anesthetist may order, select, obtain, and administer drugs only during the perioperative or periobstetrical period.
- c. A Certified Registered Nurse Anesthetist who applies for authorization to order, select, obtain, and administer drugs shall:
 - (1) be currently recognized as a Certified Registered Nurse Anesthetist in this state,
 - (2) provide evidence of completion, within the two-year period immediately preceding the date of application, of a minimum of fifteen (15) units of continuing education in advanced pharmacology related to the administration of anesthesia as recognized by the National Board of Certification and Recertification for Nurse Anesthetists, and
 - (3) complete and submit a notarized application, on a form prescribed by the Board, accompanied by the application fee established pursuant to this section.

- d. The authority to order, select, obtain, and administer drugs shall be terminated if a Certified Registered Nurse Anesthetist has:
 - (1) ordered, selected, obtained, or administered drugs outside of the Certified Registered Nurse Anesthetist scope of practice or ordered, selected, obtained, or administered drugs for other than therapeutic purposes, or
 - (2) violated any provision of state laws or rules or federal laws or regulations pertaining to the practice of nursing or the authority to order, select, obtain, and administer drugs.
- e. The Oklahoma Board of Nursing shall notify the State Board of Pharmacy after termination of or a change in the authority to order, select, obtain, and administer drugs for a Certified Registered Nurse Anesthetist.
- f. The Board shall provide by rule for biennial application renewal and reauthorization of authority to order, select, obtain, and administer drugs for Certified Registered Nurse Anesthetists. At the time of application renewal, a Certified Registered Nurse Anesthetist shall submit documentation of a minimum of eight (8) units of continuing education, completed during the previous two (2) years, in advanced pharmacology relating to the administration of anesthesia, as recognized by the ~~Council on Recertification of Nurse Anesthetists~~ or the ~~Council on Certification of Nurse Anesthetists~~ National Board of Certification and Recertification for Nurse Anesthetists.
- g. This paragraph shall not prohibit the administration of local or topical anesthetics as now permitted by law. Provided further, nothing in this paragraph shall limit the authority of the Board of Dentistry to establish the qualifications for dentists who direct the administration of anesthesia.
- h. As used in this paragraph, "collaboration" means an agreement between a medical doctor, osteopathic

physician, podiatric physician, or dentist performing the procedure or directly involved with the procedure and the Certified Registered Nurse Anesthetist working jointly toward a common goal providing services for the same patient. This collaboration involves the joint formulation, discussion, and agreement of the anesthesia plan by both parties, and the collaborating medical doctor, osteopathic physician, podiatric physician, or dentist performing the procedure or directly involved with the procedure and that collaborating physician shall remain available for timely ~~onsite~~ on-site consultation during the delivery of anesthesia for diagnosis, consultation, and treatment of medical conditions;

11. "Supervising physician" means an individual holding a current license to practice as a physician from the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, who supervises a Certified Nurse Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-Midwife who has not obtained independent prescriptive authority under Section 1 of this act, and who is not in training as an intern, resident, or fellow. ~~To be eligible to supervise such Advanced Practice Registered Nurse, such~~ The supervising physician shall remain in compliance with the rules promulgated by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners;

12. ~~"Supervision of an Advanced Practice Registered Nurse with prescriptive authority"~~ "Supervision" means ~~overseeing and accepting responsibility for the ordering and transmission by assuring availability of the supervising physician to a Certified Nurse Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-Midwife of~~ who has not obtained independent prescriptive authority under Section 1 of this act through direct contact, telecommunications, or other appropriate electronic means for consultation, assistance with medical emergencies, or patient referral with respect to written, telephonic, electronic, or oral prescriptions for drugs and other medical supplies, subject to a defined formulary; and

13. "Advanced Unlicensed Assistant" means any person who has successfully completed a certified training program approved by the Board that trains the Advanced Unlicensed Assistant to perform specified technical skills identified by the Board in acute care

settings under the direction and supervision of the Registered Nurse ~~or, Licensed Practical Nurse, or Advanced Practice Registered Nurse.~~

SECTION 8. AMENDATORY 59 O.S. 2021, Section 567.4a, is amended to read as follows:

Section 567.4a. The Oklahoma Board of Nursing may grant prescriptive authority through the Advanced Practice Registered Nurse license to Certified Nurse Practitioners, Clinical Nurse Specialists, and Certified Nurse-Midwives who meet the requirements for prescriptive authority identified by law and in the Board's rules. The rules regarding prescriptive authority recognition promulgated by the Oklahoma Board of Nursing pursuant to paragraphs 6 through 9, 11 and 12 of this section, Section 567.3a of this title, and Sections 1 and 4 of this act shall:

1. Define the procedure for documenting supervision by a supervising physician licensed in Oklahoma to practice by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, as defined in Section 567.3a of this title, of a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife who has not obtained independent prescriptive authority under Section 1 of this act. Such procedure shall include a written statement supervision agreement that defines appropriate referral, consultation, and collaboration between the Advanced Practice Registered Nurse, recognized to prescribe as defined in paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title, and the supervising physician. The written statement shall include a method of assuring availability of the supervising physician through direct contact, telecommunications or other appropriate electronic means for consultation, assistance with medical emergencies, or patient referral meets the requirements of Section 4 of this act. The written statement supervision agreement shall be part of the initial application and the renewal application submitted to the Board for recognition for prescriptive authority for the Advanced Practice Registered Nurse. Changes to the written statement supervision agreement shall be filed with the Board within thirty (30) days of the change and shall be effective on filing;

2. Define procedures for assessing the qualifications of applicants for independent prescriptive authority as provided by Section 1 of this act;

3. Define minimal requirements for initial application for prescriptive authority which shall include, but not be limited to, evidence of completion of a minimum of forty-five (45) contact hours

or three (3) academic credit hours of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, approved by the Board. Such contact hours or academic credits shall be obtained within a time period of three (3) years immediately preceding the date of application for prescriptive authority;

~~3.~~ 4. Define minimal requirements for application for renewal of prescriptive authority which shall include, but not be limited to, documentation of a minimum of:

- a. fifteen (15) contact hours or one (1) academic credit hour of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, and
- b. two (2) hours of education in pain management or two (2) hours of education in opioid use or addiction, unless the Advanced Practice Registered Nurse has demonstrated to the satisfaction of the Board that the Advanced Practice Registered Nurse does not currently hold a valid federal Drug Enforcement Administration registration number,

approved by the Board, within the two-year period immediately preceding the effective date of application for renewal of prescriptive authority. Such minimal requirements for renewal of prescriptive authority for an Advanced Practice Registered Nurse who has obtained independent prescriptive authority under Section 1 of this act shall include, but not be limited to, documentation that the Advanced Practice Registered Nurse has successfully earned at least forty (40) hours of Category I continuing medical education hours within the two-year period immediately preceding the effective date of application for renewal of independent prescriptive authority, which may include the continuing education described in subparagraphs a and b of this paragraph if such continuing education meets the criteria for Category I continuing medical education;

~~4.~~ 5. Require that ~~beginning July 1, 2002,~~ an Advanced Practice Registered Nurse ~~shall demonstrate~~ demonstrates successful completion of a master's degree or higher in ~~a clinical nurse~~

specialty one of the following Advanced Practice Registered Nurse roles:

- a. Certified Nurse Practitioner,
- b. Clinical Nurse Specialist, or
- c. Certified Nurse-Midwife,

in order to be eligible for initial application for prescriptive authority under the provisions of the Oklahoma Nursing Practice Act;

~~5.~~ 6. Define the method for communicating authority to prescribe or termination of same, and the formulary to the State Board of Pharmacy, all pharmacies, and all registered pharmacists;

~~6.~~ 7. Define terminology used in such rules;

~~7.~~ 8. Define the parameters for the prescribing practices of the Advanced Practice Registered Nurse;

~~8.~~ 9. Define the methods for termination of prescriptive authority for the Advanced Practice Registered Nurse; and

~~9.~~

10. a. Establish a Formulary Advisory Council that shall develop and submit to the Board recommendations for an exclusionary formulary that shall list drugs or categories of drugs that shall not be prescribed by an Advanced Practice Registered Nurse recognized to prescribe by the Oklahoma Board of Nursing. The Formulary Advisory Council shall also develop and submit to the Board recommendations for practice-specific prescriptive standards for each category of Advanced Practice Registered Nurse recognized to prescribe by the Oklahoma Board of Nursing pursuant to the provisions of the Oklahoma Nursing Practice Act. The Board shall either accept or reject the recommendations made by the Council. No amendments to the recommended exclusionary formulary may be made by the Board without the approval of the Formulary Advisory Council.

- b. The Formulary Advisory Council shall be composed of twelve (12) members as follows:
- (1) four members, to include a pediatrician, an obstetrician-gynecological physician, a general internist, and a family practice physician; provided, that three of such members shall be appointed by the Oklahoma State Medical Association, and one shall be appointed by the Oklahoma Osteopathic Association,
 - (2) four members who are registered pharmacists, appointed by the Oklahoma ~~Pharmaceutical~~ Pharmacists Association, and
 - (3) four members, one of whom shall be a Certified Nurse Practitioner, one of whom shall be a Clinical Nurse Specialist, one of whom shall be a Certified Nurse-Midwife, and one of whom shall be a current member of the Oklahoma Board of Nursing, all of whom shall be appointed by the Oklahoma Board of Nursing.
- c. All professional members of the Formulary Advisory Council shall be in active clinical practice, at least fifty percent (50%) of the time, within their defined area of specialty. The members of the Formulary Advisory Council shall serve at the pleasure of the appointing authority for a term of three (3) years. The terms of the members shall be staggered. Members of the Council may serve beyond the expiration of their term of office until a successor is appointed by the original appointing authority. A vacancy on the Council shall be filled for the balance of the unexpired term by the original appointing authority.
- d. Members of the Council shall elect a chair and a ~~vice-chair~~ vice chair from among the membership of the Council. For the transaction of business, at least seven members, with a minimum of two members present from each of the identified categories of physicians, pharmacists, and ~~advanced practice registered nurses~~ Advanced Practice Registered Nurses, shall constitute a quorum. The Council shall recommend and the Board shall approve and implement an initial exclusionary

formulary on or before January 1, 1997. The Council and the Board shall annually review the approved exclusionary formulary and shall make any necessary revisions utilizing the same procedures used to develop the initial exclusionary formulary.

SECTION 9. AMENDATORY 59 O.S. 2021, Section 567.5a, as amended by Section 1, Chapter 94, O.S.L. 2024 (59 O.S. Supp. 2024, Section 567.5a), is amended to read as follows:

Section 567.5a. A. All applicants for a license to practice as an Advanced Practice Registered Nurse shall be subject to Section 567.8 of this title.

B. An applicant for an initial license to practice as an Advanced Practice Registered Nurse shall:

1. Submit a completed written application and appropriate fees as established by the Oklahoma Board of Nursing;

2. Submit a criminal history records check that complies with Section 567.18 of this title;

3. Hold a current Registered Nurse license in this state;

4. Have completed an advanced practice registered nursing education program in one of the four ~~advanced practice registered nurse~~ Advanced Practice Registered Nurse roles and a specialty area recognized by the Board. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related, or psychiatric/mental health;

5. Be currently certified in an advanced practice specialty certification consistent with educational preparation and by a national certifying body recognized by the Board; and

6. Provide any and all other evidence as required by the Board in its rules.

C. The Board may issue a license by endorsement to an Advanced Practice Registered Nurse licensed under the laws of another state

if the applicant meets the qualifications for licensure in this state. An applicant by endorsement shall:

1. Submit a completed written application and appropriate fees as established by the Board;

2. Submit a criminal history records check that complies with Section 567.18 of this title;

3. Hold a current Registered Nurse license in this state;

4. Hold recognition as an Advanced Practice Registered Nurse in a state or territory;

5. Have completed an advanced practice registered nursing education program in one of the four roles and a specialty area recognized by the Board. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related, or psychiatric/mental health;

6. Be currently certified in an advanced practice specialty certification consistent with educational preparation and by a national certifying body recognized by the Board;

7. Meet continued competency requirements as set forth in Board rules; and

8. Provide any and all other evidence as required by the Board in its rules.

D. The Board may issue prescriptive authority recognition by endorsement to an Advanced Practice Registered Nurse licensed as an ~~APRN-CNP~~ Advanced Practice Registered Nurse-Certified Nurse Practitioner (APRN-CNP), ~~APRN-CNS~~ Advanced Practice Registered Nurse-Clinical Nurse Specialist (APRN-CNS), or ~~APRN-CNM~~ Advanced Practice Registered Nurse-Certified Nurse-Midwife (APRN-CNM) under the laws of another state if the applicant meets the requirements set forth in this section. An applicant for prescriptive authority recognition by endorsement shall:

1. Submit a completed written application and appropriate fees as established by the Board;

2. Hold current Registered Nurse and Advanced Practice Registered Nurse licenses (APRN-CNP, APRN-CNS, or APRN-CNM) in the state;

3. Hold current licensure or recognition as an Advanced Practice Registered Nurse in the same role and specialty with prescribing privileges in another state or territory;

4. Submit documentation verifying successful completion of a ~~graduate-level~~ graduate-level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management, and didactic and clinical preparation for prescribing incorporated throughout the program;

5. Submit ~~a written statement from an Oklahoma licensed physician supervising prescriptive authority~~ all supervision agreements entered into with supervising physicians as required by the Board in its rules Section 4 of this act, or submit documentation that the applicant meets the requirements for independent prescriptive authority under Section 1 of this act;

6. Meet continued competency requirements as set forth in Board rules; and

7. Provide any and all other evidence as required by the Board in its rules.

E. An Advanced Practice Registered Nurse license issued under this section shall be renewed concurrently with the ~~registered nurse~~ Registered Nurse license, provided that qualifying criteria continue to be met.

F. The Board may reinstate a license as set forth in Board rules.

SECTION 10. AMENDATORY 63 O.S. 2021, Section 2-312, as amended by Section 2, Chapter 184, O.S.L. 2022 (63 O.S. Supp. 2024, Section 2-312), is amended to read as follows:

Section 2-312. A. A physician, podiatrist, optometrist, or a dentist who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of such person's professional practice only, may prescribe and administer controlled dangerous substances, or may

cause the same to be administered by medical or paramedical personnel acting under the direction and supervision of the physician, podiatrist, optometrist, or dentist, and only may dispense controlled dangerous substances pursuant to the provisions of Sections 355.1 and 355.2 of Title 59 of the Oklahoma Statutes.

B. A veterinarian who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of the professional practice of the veterinarian only, and not for use by a human being, may prescribe, administer, and dispense controlled dangerous substances and may cause them to be administered by an assistant or orderly under the direction and supervision of the veterinarian.

C. ~~An advanced practice nurse~~ Advanced Practice Registered Nurse who is recognized to prescribe by the Oklahoma Board of Nursing as ~~an advanced registered nurse practitioner, clinical nurse specialist or certified nurse-midwife, who is subject to medical direction by a supervising physician, pursuant to Section 567.3a of Title 59 of the Oklahoma Statutes,~~ a Certified Nurse Practitioner, Clinical Nurse Specialist, or Certified Nurse-Midwife and who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of professional practice only, may prescribe and administer Schedule III, IV, and V controlled dangerous substances. If the Advanced Practice Registered Nurse has not obtained independent prescriptive authority under Section 1 of this act, he or she may only prescribe and administer such controlled dangerous substances under the supervision of a supervising physician in accordance with the Oklahoma Nursing Practice Act and Section 4 of this act and shall not prescribe or administer any controlled dangerous substance in a schedule that the supervising physician is not registered to prescribe and administer.

D. ~~An advanced practice nurse~~ Advanced Practice Registered Nurse who is recognized to order, select, obtain, and administer drugs by the Oklahoma Board of Nursing as a ~~certified registered nurse anesthetist~~ Certified Registered Nurse Anesthetist pursuant to Section 353.1b of Title 59 of the Oklahoma Statutes and who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of such practitioner's professional practice only, may order, select, obtain, and administer Schedules II through V controlled dangerous substances in a preanesthetic preparation or evaluation; anesthesia induction, maintenance, or emergence; or postanesthesia

care setting only. A ~~certified registered nurse anesthetist~~
Certified Registered Nurse Anesthetist may order, select, obtain,
and administer such drugs only during the perioperative or
periobstetrical period.

E. A physician assistant who is recognized to prescribe by the
State Board of Medical Licensure and Supervision under the medical
direction of a supervising physician, pursuant to Section 519.6 of
Title 59 of the Oklahoma Statutes, and who has complied with the
registration requirements of the Uniform Controlled Dangerous
Substances Act, in good faith and in the course of professional
practice only, may prescribe and administer Schedule II through V
controlled dangerous substances.

SECTION 11. This act shall become effective November 1, 2025.

Passed the House of Representatives the 21st day of May, 2025.

Presiding Officer of the House
of Representatives

Passed the Senate the 8th day of May, 2025.

Presiding Officer of the Senate

OFFICE OF THE GOVERNOR

Received by the Office of the Governor this _____
day of _____, 20_____, at _____ o'clock _____ M.
By: _____

Approved by the Governor of the State of Oklahoma this _____
day of _____, 20_____, at _____ o'clock _____ M.

Governor of the State of Oklahoma

OFFICE OF THE SECRETARY OF STATE

Received by the Office of the Secretary of State this _____
day of _____, 20_____, at _____ o'clock _____ M.
By: _____