

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1253 Session of  
2007

INTRODUCED BY SOLOBAY, SEIP, BELFANTI, CAPPELLI, CREIGHTON,  
DALEY, EACHUS, FREEMAN, GEIST, GRUCELA, JOSEPHS, KIRKLAND,  
MURT, PETRONE, SAYLOR AND SIPTROTH, MAY 10, 2007

REFERRED TO COMMITTEE ON PROFESSIONAL LICENSURE, MAY 10, 2007

AN ACT

1 Amending the act of May 22, 1951 (P.L.317, No.69), entitled, as  
2 amended, "An act relating to the practice of professional  
3 nursing; providing for the licensing of nurses and for the  
4 revocation and suspension of such licenses, subject to  
5 appeal, and for their reinstatement; providing for the  
6 renewal of such licenses; regulating nursing in general;  
7 prescribing penalties and repealing certain laws," further  
8 providing for scope of practice for certified registered  
9 nurse practitioners and for prescriptive authority for  
10 certified registered nurse practitioners; repealing  
11 provisions relating to drug review committee; and providing  
12 for collaborative and written agreements.

13 The General Assembly of the Commonwealth of Pennsylvania  
14 hereby enacts as follows:

15 Section 1. Sections 8.2 and 8.3 of the act of May 22, 1951  
16 (P.L.317, No.69), known as The Professional Nursing Law, amended  
17 December 9, 2002 (P.L.1567, No.206), are amended to read:

18 Section 8.2. Scope of Practice for Certified Registered  
19 Nurse Practitioners.--(a) A certified registered nurse  
20 practitioner while functioning in the expanded role as a  
21 professional nurse shall practice within the scope of practice  
22 of the particular clinical specialty area in which the nurse is

1 certified by the board.

2 (b) A certified registered nurse practitioner may perform  
3 acts of medical diagnosis in collaboration with a physician and  
4 in accordance with regulations promulgated by the board.

5 (c) [A] Except as provided in subsection (c.1), a certified  
6 registered nurse practitioner may prescribe medical therapeutic  
7 or corrective measures if the nurse is acting in accordance with  
8 the provisions of section [8.3] 8.3(a).

9 (c.1) Except as limited by the scope of an individual's  
10 specialty certification or in a collaborative or written  
11 agreement, and in addition to existing authority, a certified  
12 registered nurse practitioner shall have authority to do all of  
13 the following:

14 (1) Order home health and hospice care.

15 (2) Order durable medical equipment.

16 (3) Issue oral orders under the same conditions and in the  
17 same facilities as physicians are permitted to do.

18 (4) Perform and sign workers compensation physicals.

19 (5) Perform physical therapy and dietitian referrals.

20 (6) Order respiratory or occupational therapy.

21 (7) Perform disability assessments for the program providing  
22 Temporary Assistance to Needy Families (TANF).

23 (8) Perform and sign methadone treatment evaluations.

24 (9) Perform and sign cosmetology license physicals.

25 (10) Issue home schooling certifications.

26 (11) Take medical histories.

27 (12) Perform and sign physical or psychiatric examinations.

28 (13) Provide acute illness, minor injury or chronic disease  
29 management care.

30 (14) Perform other similar activities.

1     (15) Make commitments under the act of July 9, 1976  
2     (P.L.817, No.143), known as the "Mental Health Procedures Act."

3     (d) Nothing in this section shall be construed to limit or  
4     prohibit a certified registered nurse practitioner from engaging  
5     in those activities which normally constitute the practice of  
6     nursing as defined in section 2.

7     Section 8.3. Prescriptive Authority for Certified Registered  
8     Nurse Practitioners.--(a) A certified registered nurse  
9     practitioner may prescribe medical therapeutic or corrective  
10    measures if the nurse:

11    (1) has successfully completed at least forty-five (45)  
12    hours of coursework specific to advanced pharmacology at a level  
13    above that required by a professional nursing education program;

14    (2) is acting in collaboration with a physician as set forth  
15    in a written agreement which shall, at a minimum, identify the  
16    following:

17    (i) the area of practice in which the nurse is certified;

18    (ii) the categories of drugs from which the nurse may  
19    prescribe or dispense; and

20    (iii) the circumstances and how often the collaborating  
21    physician will personally see the patient; and

22    (3) is acting in accordance with regulations promulgated by  
23    the board.

24    [(b) A certified registered nurse practitioner who satisfies  
25    the requirements of subsection (a) may prescribe and dispense  
26    those categories of drugs that certified registered nurse  
27    practitioners were authorized to prescribe and dispense by board  
28    regulations in effect on the effective date of this section,  
29    subject to the restrictions on certain drug categories imposed  
30    by those regulations. The board shall add to or delete from the

1 categories of authorized drugs in accordance with the provisions  
2 of section 8.4.]

3 (b.1) A certified registered nurse practitioner shall be  
4 limited by the scope of his specialty certification or in a  
5 collaborative or written agreement when prescribing any drug and  
6 shall comply with the requirements set forth in subsection (a).

7 (c) Except as provided in subsection (b), a certified  
8 registered nurse practitioner shall not be limited in  
9 prescribing any drug, including a controlled substance on  
10 Schedules II through V, nor shall there be any limit on the  
11 number of refills or dosages except as may be provided under  
12 Federal law, except that the certified registered nurse  
13 practitioner shall use his own Drug Enforcement Administration  
14 number and not that of any collaborating physician in writing  
15 the prescription.

16 Section 2. Section 8.4 of the act, added December 9, 2002  
17 (P.L.1567, No.206), is repealed:

18 [Section 8.4. Drug Review Committee.--(a) The Drug Review  
19 Committee is hereby established and shall consist of seven  
20 members as follows:

21 (1) The Secretary of Health or, at the discretion of the  
22 Secretary of Health, the Physician General as his or her  
23 designee, who shall act as chairman.

24 (2) Two certified registered nurse practitioners who are  
25 actively engaged in clinical practice, appointed to three-year  
26 terms by the Secretary of Health.

27 (3) Two licensed physicians who are actively engaged in  
28 clinical practice, appointed to three-year terms by the  
29 Secretary of Health, at least one of whom shall, at the time of  
30 appointment, be collaborating with one or more certified

1 registered nurse practitioners in accordance with section  
2 8.3(a)(2).

3 (4) Two licensed pharmacists who are actively engaged in the  
4 practice of pharmacy, appointed to three-year terms by the  
5 Secretary of Health.

6 (b) (1) The board shall submit to the Drug Review Committee  
7 any proposed change to the categories of drugs that certified  
8 registered nurse practitioners were authorized to prescribe  
9 pursuant to board regulations in effect on the effective date of  
10 this section. The board shall not change, by addition or  
11 deletion, the categories of authorized drugs without prior  
12 approval of the Drug Review Committee.

13 (2) Within sixty (60) days of a submission by the board  
14 under paragraph (1), a majority of the Drug Review Committee  
15 shall vote to approve or disapprove the proposed change.

16 (3) If a majority of the Drug Review Committee fails to vote  
17 to approve or disapprove the proposed change within sixty (60)  
18 days of receipt of a submission by the board under paragraph  
19 (1), the Drug Review Committee shall be deemed to have approved  
20 the proposed change.]

21 Section 3. The act is amended by adding sections to read:

22 Section 8.5. Collaborative and Written Agreements.--(a)  
23 There shall be no limit to the number of certified registered  
24 nurse practitioners with prescriptive authority for whom a  
25 physician has responsibility or supervises under a collaborative  
26 or written agreement at any time.

27 (b) Collaborative and written agreements shall not  
28 unreasonably restrict any certified registered nurse  
29 practitioner's ability to practice to the fullest extent  
30 permitted by his scope of practice, clinical education and

1 experience.

2     Section 8.6. Professional Liability.--A certified registered  
3 nurse practitioner practicing in this Commonwealth whose  
4 employer does not provide professional liability coverage shall  
5 maintain a level of professional liability coverage required by  
6 law of a physician providing similar health care services in  
7 this Commonwealth, but shall not be eligible to participate in  
8 the Medical Care Availability and Reduction of Error (Mcare)  
9 Fund.

10     Section 4. The State Board of Nursing shall promulgate  
11 regulations to implement the amendment, addition or repeal of  
12 sections 8.2, 8.3, 8.4, 8.5 and 8.6 of the act within 18 months  
13 of the effective date of this section.

14     Section 5. This act shall take effect in 60 days.