SENATE COMMITTEE OF REFERENCE REPORT

	Chairman of Committee Date
	Committee on <u>Health and Human Services</u> .
	After consideration on the merits, the Committee recommends the following:
	SB09-239 be amended as follows:
1 2 3	Amend printed bill, page 18, line 20, strike "(3) (c), and (4) (d)," and substitute "and (3) (c), the introductory portion to 12-38-111.6 (4), and 12-38-111.6 (6),";
4 5 6	line 21, strike "amended" and substitute "amended, and the said 12-38-111.6 (4) is further amended BY THE ADDITION OF A NEW PARAGRAPH,";
7	line 23, strike "rules." and substitute "rules - repeal.";
8	Page 19, strike lines 9 through 27.
9	Strike pages 20 through 22.
10	Page 23, strike lines 1 through 10 and substitute the following:
11 12 13	"(4) An advanced practice nurse applying for prescriptive authority BEFORE JULY 1, 2010, shall provide evidence to the board of the following:
14	(e) This subsection (4) is repealed, effective July 1, 2010.
15 16 17 18	(6) (a) Advanced practice nurses from other states applying for prescriptive authority BEFORE JULY 1, 2010, shall comply with all requirements set forth in this section or any rule adopted by the board pursuant to this section.



1	(b) This subsection (6) is repealed, effective July 1, 2010.
2	SECTION 21. 12-38-111.6, Colorado Revised Statutes, is
3	amended BY THE ADDITION OF A NEW SUBSECTION to read:
4	12-38-111.6. Prescriptive authority - advance practice nurses.
5	(4.5) (a) On or after July 1, 2010, or, if the director of the
6	DIVISION OF REGISTRATIONS ADOPTS RULES PURSUANT TO SUBPARAGRAPH
7	(II) OF PARAGRAPH (f) OF THIS SUBSECTION (4.5), ON OR AFTER JULY 2,
8	2010, AN ADVANCED PRACTICE NURSE APPLYING FOR PRESCRIPTIVE
9	AUTHORITY SHALL PROVIDE EVIDENCE TO THE BOARD OF THE FOLLOWING:
10	(I) A GRADUATE DEGREE IN A NURSING SPECIALTY;
11	(II) SATISFACTORY COMPLETION OF SPECIFIC EDUCATIONAL
12	REQUIREMENTS IN THE USE OF CONTROLLED SUBSTANCES AND
13	PRESCRIPTION DRUGS, AS ESTABLISHED BY THE BOARD, EITHER AS PART OF
14	A DEGREE PROGRAM OR IN ADDITION TO A DEGREE PROGRAM;
15	(III) NATIONAL CERTIFICATION FROM A NATIONALLY RECOGNIZED
16	ACCREDITING AGENCY, AS DEFINED BY THE BOARD BY RULE PURSUANT TO
17	SECTION 12-38-111.5 (4) (d), IN THE SPECIALTY OF THE ADVANCED
18	PRACTICE NURSE, UNLESS THE BOARD GRANTS AN EXCEPTION;
19	(IV) Professional liability insurance as required by
20	SECTION 12-38-111.8; AND
21	(V) (A) COMPLETION OF A STRUCTURED, POST-GRADUATE
22	PRECEPTORSHIP, AS DEFINED BY THE BOARD BY RULE, CONSISTING OF NOT
23	LESS THAN ONE THOUSAND EIGHT HUNDRED HOURS, TO BE COMPLETED
24	WITHIN THE IMMEDIATELY PRECEDING FIVE-YEAR PERIOD. THE
25	PRECEPTORSHIP SHALL BE CONDUCTED EITHER WITH A PHYSICIAN OR A
26	PHYSICIAN AND AN ADVANCED PRACTICE NURSE WHO HAS PRESCRIPTIVE
27	AUTHORITY AND EXPERIENCE IN PRESCRIBING MEDICATIONS. THE
28	PHYSICIAN OR ADVANCED PRACTICE NURSE SERVING AS A PRECEPTOR TO
29	THE APPLICANT SHALL BE PRACTICING IN THIS STATE AND SHALL HAVE
30	EDUCATION, TRAINING, EXPERIENCE, AND ACTIVE PRACTICE THAT
31	CORRESPONDS WITH THE SPECIALTY AREA OF THE APPLICANT.
32	(B) THE PHYSICIAN OR ADVANCED PRACTICE NURSE SERVING AS
33	A PRECEPTOR SHALL NOT REQUIRE PAYMENT FROM OR EMPLOYMENT BY AN
34	ADVANCED PRACTICE NURSE AS A CONDITION OF ENTERING INTO THE
35	PRECEPTORSHIP RELATIONSHIP BUT THE PRECEPTOR MAY REQUEST

- 1 REIMBURSEMENT OF REASONABLE EXPENSES AND TIME SPENT AS A RESULT 2 OF THE PRECEPTORSHIP RELATIONSHIP.
- 3 (b) Upon satisfaction of the requirements set forth in 4 PARAGRAPH (a) OF THIS SUBSECTION (4.5), THE BOARD MAY GRANT 5 PROVISIONAL PRESCRIPTIVE AUTHORITY TO AN ADVANCED PRACTICE 6 NURSE. THE PROVISIONAL PRESCRIPTIVE AUTHORITY SHALL BE LIMITED TO 7 THOSE PATIENTS OR MEDICATIONS APPROPRIATE TO THE ADVANCED 8 PRACTICE NURSE'S SPECIALTY AREA. IN ORDER TO RETAIN PROVISIONAL 9 PRESCRIPTIVE AUTHORITY AND OBTAIN AND RETAIN FULL PRESCRIPTIVE 10 AUTHORITY PURSUANT TO THIS SUBSECTION (4.5) FOR PATIENTS OR 11 MEDICATIONS APPROPRIATE FOR THE ADVANCED PRACTICE NURSE'S 12 SPECIALTY AREA, AN ADVANCED PRACTICE NURSE SHALL SATISFY THE 13 FOLLOWING REQUIREMENTS:
- 14 (I)(A) WITHIN FIVE YEARS AFTER THE PROVISIONAL PRESCRIPTIVE 15 AUTHORITY IS GRANTED, THE ADVANCED PRACTICE NURSE SHALL OBTAIN 16 AN ADDITIONAL ONE THOUSAND EIGHT HUNDRED HOURS OF DOCUMENTED 17 EXPERIENCE IN A MUTUALLY STRUCTURED MENTORSHIP EITHER WITH A 18 PHYSICIAN OR WITH A PHYSICIAN AND ADVANCED PRACTICE NURSE WHO 19 HAS PRESCRIPTIVE AUTHORITY AND EXPERIENCE IN PRESCRIBING 20 MEDICATIONS. THE MENTORSHIP NEED NOT BE WITH THE SAME MENTOR 21 WHO PROVIDED THE PRECEPTORSHIP SPECIFIED IN SUBPARAGRAPH (V) OF 22 PARAGRAPH (a) OF THIS SUBSECTION (4.5), BUT THE MENTOR SHALL BE 23 PRACTICING IN COLORADO AND HAVE EDUCATION, TRAINING, EXPERIENCE, 24 AND ACTIVE PRACTICE THAT CORRESPONDS WITH THE SPECIALTY AREA OF 25 THE ADVANCED PRACTICE NURSE.
- 26 (B) THE PHYSICIAN OR ADVANCED PRACTICE NURSE SERVING AS 27 A MENTOR SHALL NOT REQUIRE PAYMENT FROM OR EMPLOYMENT BY AN 28 ADVANCED PRACTICE NURSE AS A CONDITION OF ENTERING INTO THE 29 MENTORSHIP RELATIONSHIP, BUT THE MENTOR MAY REQUEST 30 REIMBURSEMENT OF REASONABLE EXPENSES AND TIME SPENT AS A RESULT OF THE MENTORSHIP RELATIONSHIP.
- 32 (C) UPON SUCCESSFUL COMPLETION OF THE MENTORSHIP PERIOD, 33 THE MENTOR SHALL PROVIDE HIS OR HER SIGNATURE TO VERIFY THAT THE 34 ADVANCED PRACTICE NURSE HAS SUCCESSFULLY COMPLETED THE 35 SPECIFIED HOURS OF MENTORSHIP WITHIN THE REQUIRED PERIOD AFTER 36 THE PROVISIONAL PRESCRIPTIVE AUTHORITY WAS GRANTED.

37 IF AN ADVANCED PRACTICE NURSE WITH PROVISIONAL (D) 38 PRESCRIPTIVE AUTHORITY FAILS TO COMPLETE THE MENTORSHIP REQUIRED 39 BY THIS SUBPARAGRAPH (I) WITHIN THE SPECIFIED PERIOD, THE ADVANCED

-3-

1 2	PRACTICE NURSE'S PROVISIONAL PRESCRIPTIVE AUTHORITY EXPIRES FOR FAILURE TO COMPLY WITH THE STATUTORY REQUIREMENTS.
2	
3	(II) WITHIN ONE YEAR AFTER OBTAINING PROVISIONAL
4	PRESCRIPTIVE AUTHORITY, THE ADVANCED PRACTICE NURSE SHALL
5	DEVELOP AN ARTICULATED PLAN FOR SAFE PRESCRIBING THAT
6	DOCUMENTS HOW THE ADVANCED PRACTICE NURSE INTENDS TO MAINTAIN
7	ONGOING COLLABORATION WITH PHYSICIANS AND OTHER HEALTH CARE
8	PROFESSIONALS IN CONNECTION WITH THE ADVANCED PRACTICE NURSE'S
9	PRACTICE OF PRESCRIBING MEDICATION WITHIN HIS OR HER SPECIALTY
10 11	AREA. THE ARTICULATED PLAN SHALL GUIDE THE ADVANCED PRACTICE
12	NURSE'S PRESCRIPTIVE PRACTICE FOLLOWING THE MENTORSHIP DESCRIBED
13	IN SUBPARAGRAPH (I) OF THIS PARAGRAPH (b). THE PHYSICIAN OR PHYSICIAN AND ADVANCED PRACTICE NURSE THAT MENTORED THE
13	ADVANCED PRACTICE NURSE AS DESCRIBED IN SUBPARAGRAPH (I) OF THIS
15	PARAGRAPH (b) SHALL PROVIDE HIS OR HER SIGNATURE TO VERIFY THAT
16	THE ADVANCED PRACTICE NURSE HAS DEVELOPED AN ARTICULATED PLAN.
17	THE ADVANCED PRACTICE NURSE SHALL RETAIN THE ARTICULATED PLAN
18	ON FILE, SHALL REVIEW THE PLAN ANNUALLY, AND SHALL UPDATE THE
19	PLAN AS NECESSARY. THE ARTICULATED PLAN IS SUBJECT TO REVIEW BY
20	THE BOARD, AND THE ADVANCED PRACTICE NURSE SHALL PROVIDE THE
21	PLAN TO THE BOARD UPON REQUEST. IF AN ADVANCED PRACTICE NURSE
22	WITH PROVISIONAL PRESCRIPTIVE AUTHORITY FAILS TO DEVELOP THE
23	REQUIRED ARTICULATED PLAN WITHIN THE SPECIFIED PERIOD, THE
24	ADVANCED PRACTICE NURSE'S PROVISIONAL PRESCRIPTIVE AUTHORITY
25	EXPIRES FOR FAILURE TO COMPLY WITH THE STATUTORY REQUIREMENTS.
26	AN ARTICULATED PLAN DEVELOPED PURSUANT TO THIS SUBPARAGRAPH
27	(II) SHALL INCLUDE AT LEAST THE FOLLOWING CRITERIA:
28	(A) A MECHANISM FOR CONSULTATION AND REFERRAL FOR ISSUES
29	REGARDING PRESCRIPTIVE AUTHORITY;
30	(B) A QUALITY ASSURANCE PLAN;
31	(C) DECISION SUPPORT TOOLS; AND
32 33	(D) DOCUMENTATION OF ONGOING CONTINUING EDUCATION IN PHARMACOLOGY AND SAFE PRESCRIBING.
34	(III) THE ADVANCED PRACTICE NURSE SHALL MAINTAIN

(IV) THE ADVANCED PRACTICE NURSE SHALL MAINTAIN NATIONAL

PROFESSIONAL LIABILITY INSURANCE AS REQUIRED BY SECTION

35

36

37

12-38-111.8.

- 1 CERTIFICATION, AS SPECIFIED IN SUBPARAGRAPH (III) OF PARAGRAPH (a) OF THIS SUBSECTION (4.5), UNLESS THE BOARD GRANTS AN EXCEPTION.
- 3 (c) An advanced practice nurse who was granted 4 prescriptive authority prior to July 1, 2010, shall satisfy the 5 following requirements in order to retain prescriptive 6 authority:
- 7 (I) WITHIN ONE YEAR AFTER THE EFFECTIVE DATE OF THE RULES 8 ADOPTED TO IMPLEMENT THIS SUBSECTION (4.5), THE ADVANCED 9 PRACTICE NURSE SHALL DEVELOP AN ARTICULATED PLAN AS SPECIFIED IN SUBPARAGRAPH (II) OF PARAGRAPH (b) OF THIS SUBSECTION (4.5); EXCEPT 10 11 THAT TO VERIFY DEVELOPMENT OF AN ARTICULATED PLAN, THE 12 ADVANCED PRACTICE NURSE SHALL OBTAIN THE SIGNATURE OF EITHER A 13 PHYSICIAN OR A PHYSICIAN AND ADVANCED PRACTICE NURSE WHO HAS 14 PRESCRIPTIVE AUTHORITY AND EXPERIENCE IN PRESCRIBING MEDICATIONS, 15 AND THE SIGNING PHYSICIAN OR ADVANCED PRACTICE NURSE SHALL BE 16 PRACTICING IN COLORADO AND HAVE EDUCATION, TRAINING, EXPERIENCE, 17 AND ACTIVE PRACTICE THAT CORRESPONDS WITH THE SPECIALTY AREA OF 18 THE ADVANCED PRACTICE NURSE DEVELOPING THE PLAN. IF AN 19 ADVANCED PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY GRANTED 20 PRIOR TO JULY 1, 2010, FAILS TO DEVELOP THE REQUIRED ARTICULATED 21 PLAN WITHIN THE SPECIFIED PERIOD, THE ADVANCED PRACTICE NURSE'S 22 PRESCRIPTIVE AUTHORITY EXPIRES FOR FAILURE TO COMPLY WITH THE 23 STATUTORY REQUIREMENTS.
- 24 (II) THE ADVANCED PRACTICE NURSE SHALL MAINTAIN 25 PROFESSIONAL LIABILITY INSURANCE AS REQUIRED BY SECTION 26 12-38-111.8.
- 27 (III) THE ADVANCED PRACTICE NURSE SHALL MAINTAIN NATIONAL 28 CERTIFICATION, AS SPECIFIED IN SUBPARAGRAPH (III) OF PARAGRAPH (a) 29 OF THIS SUBSECTION (4.5), UNLESS:
- 30 (A) THE ADVANCED PRACTICE NURSE WAS INCLUDED ON THE 31 ADVANCED PRACTICE REGISTRY PRIOR TO JULY 1, 2010, AND HAS NOT 32 OBTAINED NATIONAL CERTIFICATION;
- 33 (B) THE ADVANCED PRACTICE NURSE WAS INCLUDED ON THE ADVANCED PRACTICE REGISTRY PRIOR TO JULY 1, 2008, AND HAS NOT COMPLETED A GRADUATE DEGREE AS SPECIFIED IN SECTION 12-38-111.5 (4) (c); OR
 - (C) THE BOARD GRANTS AN EXCEPTION.

- 1 (d) (I) ON OR AFTER JULY 1, 2010, OR, IF THE DIRECTOR OF THE 2 DIVISION OF REGISTRATIONS ADOPTS RULES PURSUANT TO SUBPARAGRAPH (II) OF PARAGRAPH (f) OF THIS SUBSECTION (4.5), ON OR AFTER JULY 2, 3 4 2010, AN ADVANCED PRACTICE NURSE WHO HAS OBTAINED PRESCRIPTIVE 5 AUTHORITY FROM ANOTHER STATE MAY OBTAIN PROVISIONAL 6 PRESCRIPTIVE AUTHORITY IN THIS STATE IF THE ADVANCED PRACTICE 7 NURSE SATISFIES THE FOLLOWING REQUIREMENTS: 8 (A) THE ADVANCED PRACTICE NURSE SATISFIES THE 9 REQUIREMENTS OF SUBPARAGRAPHS (I), (II), (III), AND (IV) OF 10 PARAGRAPH (a) OF THIS SUBSECTION (4.5); AND 11 (B) THE ADVANCED PRACTICE NURSE HAS THREE THOUSAND SIX 12 HUNDRED HOURS OF DOCUMENTED EXPERIENCE PRESCRIBING 13 MEDICATIONS WITHOUT SIGNIFICANT ADVERSE PRESCRIBING ISSUES, AS 14 DETERMINED BY THE BOARD. 15 (II) ONCE AN ADVANCED PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY FROM ANOTHER STATE OBTAINS PROVISIONAL PRESCRIPTIVE 16 17 AUTHORITY IN THIS STATE, THE ADVANCED PRACTICE NURSE SHALL 18 SATISFY THE FOLLOWING REQUIREMENTS IN ORDER TO OBTAIN AND 19 MAINTAIN FULL PRESCRIPTIVE AUTHORITY IN THIS STATE: (A) WITHIN ONE YEAR AFTER OBTAINING PROVISIONAL PRESCRIPTIVE AUTHORITY IN THIS STATE, THE ADVANCED PRACTICE NURSE
- 20 21 22 SHALL DEVELOP AN ARTICULATED PLAN, AS DESCRIBED IN SUBPARAGRAPH 23 (I) OF PARAGRAPH (c) OF THIS SUBSECTION (4.5); EXCEPT THAT, IF THE 24 ADVANCED PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY FROM 25 ANOTHER STATE FAILS TO DEVELOP THE REQUIRED ARTICULATED PLAN 26 WITHIN THE SPECIFIED PERIOD, THE ADVANCED PRACTICE NURSE'S 27 PROVISIONAL PRESCRIPTIVE AUTHORITY EXPIRES FOR FAILURE TO COMPLY 28 WITH THE STATUTORY REQUIREMENTS; AND
- 29 (B) THE ADVANCED PRACTICE NURSE SHALL MAINTAIN NATIONAL 30 CERTIFICATION, AS SPECIFIED IN SUBPARAGRAPH (III) OF PARAGRAPH (a) 31 OF THIS SUBSECTION (4.5), UNLESS THE BOARD GRANTS AN EXCEPTION.
- (e) DURING THE SECOND YEAR OF IMPLEMENTATION OF THIS SUBSECTION (4.5) AND RULES ADOPTED PURSUANT TO PARAGRAPH (f) OF THIS SUBSECTION (4.5), THE BOARD SHALL CONDUCT RANDOM AUDITS OF ARTICULATED PLANS TO ENSURE THE PLANS SATISFY THE REQUIREMENTS OF THIS SUBSECTION (4.5) AND RULES ADOPTED PURSUANT TO PARAGRAPH (f) OF THIS SUBSECTION (4.5).

- (f) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH (f), THE BOARD SHALL ADOPT RULES TO IMPLEMENT THIS SUBSECTION (4.5), WHICH RULES SHALL TAKE EFFECT ON JULY 1, 2010. THE BOARD SHALL CONSIDER THE RECOMMENDATIONS OF THE NURSE-PHYSICIAN ADVISORY TASK FORCE FOR COLORADO HEALTH CARE SUBMITTED IN ACCORDANCE WITH SECTION 24-34-109, C.R.S., CONCERNING PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES. THE RULES SHALL BE COMPLEMENTARY TO RULES ADOPTED BY THE STATE BOARD OF MEDICAL EXAMINERS PURSUANT TO SECTION 12-36-106.4.
- (II) THE DIRECTOR OF THE DIVISION OF REGISTRATIONS IN THE DEPARTMENT OF REGULATORY AGENCIES SHALL REVIEW THE RULES ADOPTED BY THE BOARD PURSUANT TO THIS PARAGRAPH (f) PRIOR TO THE EFFECTIVE DATE OF THE RULES TO DETERMINE IF THE RULES COMPLEMENT THE RULES OF THE STATE BOARD OF MEDICAL EXAMINERS. IF THE DIRECTOR DETERMINES THAT THE RULES OF THE TWO BOARDS ARE NOT COMPLEMENTARY, THE DIRECTOR SHALL ADOPT RULES THAT SUPERCEDE AND REPLACE THE RULES OF THE TWO BOARDS REGARDING PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, AND SUCH RULES SHALL TAKE EFFECT ON JULY 2, 2010.
- **SECTION 22.** 12-38-108 (1) (b) (I), Colorado Revised Statutes, 22 is amended to read:
- **12-38-108. Powers and duties of the board rules.** (1) The board has the following powers and duties:

(b) (I) To examine, license, reactivate, and renew licenses of qualified applicants and to grant to such applicants temporary licenses and permits to engage in the practice of practical nursing and professional nursing in this state within the limitations imposed by this article. Licenses shall be renewed, reactivated, or reinstated pursuant to a schedule established by the director of the division of registrations within the department of regulatory agencies and shall be renewed, reactivated, or reinstated pursuant to section 24-34-102 (8), C.R.S. The director of the division of registrations within the department of regulatory agencies may establish renewal fees, reactivation fees, and delinquency fees for reinstatement pursuant to section 24-34-105, C.R.S., AND MAY INCREASE FEES TO OBTAIN OR RENEW A PROFESSIONAL NURSE LICENSE OR ADVANCED PRACTICE NURSE AUTHORITY CONSISTENT WITH SECTION 24-34-109 (4), C.R.S., TO FUND THE DIVISION'S COSTS IN ADMINISTERING AND STAFFING THE NURSE-PHYSICIAN ADVISORY TASK FORCE FOR COLORADO HEALTH

-7-

CARE CREATED IN SECTION 24-34-109 (1), C.R.S. If a person fails to 1 renew his or her license pursuant to the schedule established by the 2 3 director of the division of registrations, such license shall expire. Any person whose license has expired shall be subject to the penalties 4 5 provided in this article or section 24-34-102 (8), C.R.S. **SECTION 23.** 12-36-106.3 (1), Colorado Revised Statutes, is 6 amended, and the said 12-36-106.3 is further amended BY THE 7 ADDITION OF A NEW SUBSECTION, to read: 8 9 12-36-106.3. Collaborative agreements with advanced practice nurses - repeal. (1) PRIOR TO JULY 1, 2010, a physician licensed 10 pursuant to the "Colorado Medical Practice Act" may enter into a 11 collaborative agreement for the purposes of prescriptive authority by 12 advanced practice nurses pursuant to section 12-38-111.6 (4) (d) (II). 13 14 (4) This section is repealed, effective July 1, 2010. SECTION 24. Part 1 of article 36 of title 12, Colorado Revised 15 Statutes, is amended BY THE ADDITION OF A NEW SECTION to 16 17 read: 12-36-106.4. Collaboration with advanced practice nurses 18 with prescriptive authority - preceptorships - mentorships - board 19 rules. (1) (a) A PHYSICIAN LICENSED PURSUANT TO THIS ARTICLE MAY, 20 AND IS ENCOURAGED TO, SERVE AS A PRECEPTOR OR MENTOR TO AN 21 ADVANCED PRACTICE NURSE WHO IS APPLYING FOR PRESCRIPTIVE 22 AUTHORITY PURSUANT TO SECTION 12-38-111.6 (4.5). A PHYSICIAN WHO 23 SERVES AS A PRECEPTOR OR MENTOR TO AN ADVANCED PRACTICE NURSE 24 SEEKING PRESCRIPTIVE AUTHORITY SHALL: 25 26 (I) BE PRACTICING IN COLORADO AND SHALL HAVE EDUCATION, 27 TRAINING, EXPERIENCE, AND ACTIVE PRACTICE THAT CORRESPONDS WITH 28 THE SPECIALTY AREA OF THE ADVANCED PRACTICE NURSE; AND 29 (II) HAVE A LICENSE IN GOOD STANDING WITHOUT DISCIPLINARY SANCTIONS TO PRACTICE MEDICINE IN COLORADO AND AN UNRESTRICTED 30 31 REGISTRATION BY THE DRUG ENFORCEMENT ADMINISTRATION FOR THE 32 SAME SCHEDULES AS THE ADVANCED PRACTICE NURSE. (b) A PHYSICIAN SERVING AS A PRECEPTOR OR MENTOR TO AN 33 34 ADVANCED PRACTICE NURSE PURSUANT TO SECTION 12-38-111.6 (4.5)

SHALL NOT REQUIRE PAYMENT FROM OR EMPLOYMENT BY THE ADVANCED

35

- 1 PRACTICE NURSE AS A CONDITION OF ENTERING INTO THE PRECEPTORSHIP
- 2 OR MENTORSHIP RELATIONSHIP, BUT THE PHYSICIAN MAY REQUEST
- 3 REIMBURSEMENT OF REASONABLE EXPENSES AND TIME SPENT AS A RESULT
- 4 OF THE PRECEPTORSHIP OR MENTORSHIP RELATIONSHIP.
- 5 (c) Upon successful completion of a mentorship as described in section 12-38-111.6 (4.5) (b) (I), the physician shall verify by his or her signature that the advanced practice nurse has successfully completed the specified hours of mentorship
- 9 WITHIN THE REQUIRED PERIOD.
- (2) WHILE SERVING AS A MENTOR PURSUANT TO SECTION 12-38-111.6 (4.5) (b) (I), A PHYSICIAN SHALL ASSIST THE ADVANCED PRACTICE NURSE IN DEVELOPING AN ARTICULATED PLAN FOR SAFE PRESCRIBING, AS DESCRIBED IN SECTION 12-38-111.6 (4.5) (b) (II) AND SHALL VERIFY THROUGH HIS OR HER SIGNATURE THAT THE ADVANCED PRACTICE NURSE HAS DEVELOPED AN ARTICULATED PLAN IN COMPLIANCE WITH SAID SECTION.
- 17 (3) FOR PURPOSES OF AN ADVANCED PRACTICE NURSE WHO OBTAINED PRESCRIPTIVE AUTHORITY PRIOR TO JULY 1, 2010, AS 18 19 DESCRIBED IN SECTION 12-38-111.6 (4.5) (c), OR WHO HAS PRESCRIPTIVE 20 AUTHORITY FROM ANOTHER STATE AND OBTAINS PRESCRIPTIVE 21 AUTHORITY IN THIS STATE, AS DESCRIBED IN SECTION 12-38-111.6 (4.5) 22 (d), PHYSICIANS MAY, AND ARE ENCOURAGED TO, ASSIST THOSE 23 ADVANCED PRACTICE NURSES IN DEVELOPING THE ARTICULATED PLANS 24 REQUIRED BY THOSE SECTIONS AND VERIFYING, THROUGH THE PHYSICIAN'S 25 SIGNATURE, THE DEVELOPMENT OF THE REQUIRED PLANS. THE PHYSICIAN 26 VERIFYING AN ADVANCED PRACTICE NURSE'S ARTICULATED PLAN SHALL 27 BE PRACTICING IN COLORADO AND HAVE EDUCATION, TRAINING, 28 EXPERIENCE AND ACTIVE PRACTICE THAT CORRESPONDS WITH THE 29 SPECIALTY AREA OF THE ADVANCED PRACTICE NURSE.
- 30 EXCEPT AS PROVIDED IN PARAGRAPH (b) OF THIS (4) (a) 31 SUBSECTION (4), THE BOARD SHALL ADOPT RULES TO IMPLEMENT THIS SECTION, WHICH RULES SHALL TAKE EFFECT ON JULY 1, 2010. THE BOARD 32 33 SHALL CONSIDER THE RECOMMENDATIONS OF THE NURSE-PHYSICIAN 34 ADVISORY TASK FORCE FOR COLORADO HEALTH CARE SUBMITTED IN 35 ACCORDANCE WITH SECTION 24-34-109, C.R.S., CONCERNING THE ROLE OF PHYSICIANS IN COLLABORATING WITH ADVANCED PRACTICE NURSES 36 WITH PRESCRIPTIVE AUTHORITY. THE RULES SHALL BE COMPLEMENTARY 37 TO RULES ADOPTED BY THE STATE BOARD OF NURSING PURSUANT TO 38 39 SECTION 12-38-111.6 (4.5) (f) (I).

-9-

- 1 (b) THE DIRECTOR OF THE DIVISION OF REGISTRATIONS IN THE 2 DEPARTMENT OF REGULATORY AGENCIES SHALL REVIEW THE RULES 3 ADOPTED BY THE BOARD PURSUANT TO THIS SUBSECTION (4) TO 4 DETERMINE IF THE RULES COMPLEMENT THE RULES OF THE STATE BOARD 5 OF NURSING. IF THE DIRECTOR DETERMINES THAT THE RULES OF THE TWO 6 BOARDS ARE NOT COMPLEMENTARY, THE DIRECTOR SHALL ADOPT RULES 7 THAT SUPERCEDE AND REPLACE THE RULES OF THE TWO BOARDS 8 REGARDING PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES 9 AND COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND 10 PHYSICIANS, AND SUCH RULES SHALL TAKE EFFECT ON JULY 2, 2010.
- SECTION 25. 12-36-106 (3) (t) (II) and (3) (t) (III), Colorado Revised Statutes, are amended, and the said 12-36-106 (3) (t) is further amended BY THE ADDITION OF THE FOLLOWING NEW SUBPARAGRAPHS, to read:

16

17

18 19

20

21

22

23

24 25

26

34

35

36

37

38

- 12-36-106. Practice of medicine defined exemptions from licensing requirements unauthorized practice by physician assistant penalties repeal. (3) Nothing in this section shall be construed to prohibit, or to require a license or a physician training license under this article with respect to, any of the following acts:
 - (t) (II) A physician who signs a collaborative agreement with an advanced practice nurse pursuant to the requirements of section 12-38-111.6 (4) (d) PRIOR TO JULY 1, 2010, shall have a license in good standing without disciplinary sanctions to practice medicine in Colorado and an unrestricted registration by the drug enforcement administration for the same schedules as the collaborating advanced practice nurse. This Subparagraph (II) is repealed, effective July 1, 2010.
- 27 (II.5) ON OR AFTER JULY 1, 2010, A PHYSICIAN WHO SERVES AS A
 28 PRECEPTOR OR MENTOR TO AN ADVANCED PRACTICE NURSE PURSUANT TO
 29 SECTION 12-36-106.4 AND 12-38-111.6 (4.5) SHALL HAVE A LICENSE IN
 30 GOOD STANDING WITHOUT DISCIPLINARY SANCTIONS TO PRACTICE
 31 MEDICINE IN COLORADO AND AN UNRESTRICTED REGISTRATION BY THE
 32 DRUG ENFORCEMENT ADMINISTRATION FOR THE SAME SCHEDULES AS THE
 33 COLLABORATING ADVANCED PRACTICE NURSE.
 - (III) (A) Except as provided in sub-subparagraph (C) of this subparagraph (III), a physician may not enter into more than five collaborative agreements in accordance with section 12-38-111.6.
 - (B) It is unlawful and a violation of this article for any person, corporation, or other entity to require as a condition of contract,

DRAFT

1 2	employment, or compensation to exceed the limitation set pursuant to sub-subparagraph (A) of this subparagraph (III).
3 4 5 6	(C) The board may waive the maximum number of advanced practice nurses with whom a physician may sign a collaborative agreement for a specific physician upon a finding that quality patient care can be maintained.
7 8	(D) This subparagraph (III) is repealed, effective July 1, 2010.
9 10 11 12 13	(IV) On or after July 1, 2010, a physician shall not serve as a mentor to more than five advanced practice nurses pursuant to sections 12-36-106.4 and 12-38-111.6 (4.5); except that, the board may waive this limitation for a specific physician upon a finding that quality patient care can be maintained.
14 15 16 17 18 19 20 21	(V) It is unlawful and a violation of this article for any person, corporation, or other entity to require payment from or employment by an advanced practice nurse as a condition of entering into a mentorship relationship with the advanced practice nurse pursuant to sections 12-36-106.4 and 12-38-111.6 (4.5), but the mentor may request reimbursement of reasonable expenses and time spent as a result of the mentorship relationship.
22 23 24	SECTION 26. 12-36-117 (1) (ii), Colorado Revised Statutes, is amended, and the said 12-36-117 (1) is further amended BY THE ADDITION OF THE FOLLOWING NEW PARAGRAPHS, to read:
25 26 27	12-36-117. Unprofessional conduct. (1) "Unprofessional conduct" as used in this article means:
28	(ii) (I) Entering into or continuing a collaborative agreement
29	pursuant to sections 12-38-111.6 (4) (d) (IV) and 12-36-106.3 that fails
30	to meet generally acceptable standards of medical practice;
31	(II) This paragraph (ii) is repealed, effective July 1, 2010.
32	(kk) Entering into or continuing in a mentorship
33	RELATIONSHIP WITH AN ADVANCED PRACTICE NURSE PURSUANT TO
34	SECTIONS 12-36-106.4 AND 12-38-111.6 (4.5) THAT FAILS TO MEET
35	GENERALLY ACCEPTABLE STANDARDS OF MEDICAL PRACTICE;

1	(II) VERIFYING BY SIGNATURE THE ARTICULATED PLAN DEVELOPED
2	BY AN ADVANCED PRACTICE NURSE PURSUANT TO SECTIONS 12-36-106.4
3	AND $12-38-111.6$ (4.5) if the articulated plan fails to comply with
4	THE REQUIREMENTS OF SECTION $12-38-111.6$ (4.5) (b) (II) .
5	SECTION 27. 12-36-123 (1) (a), Colorado Revised Statutes, is
6	amended to read:
7	12-36-123. Procedure - registration - fees. (1) (a) All licenses
8	shall be renewed or reinstated pursuant to a schedule established by the
9	director of the division of registrations within the department of
10	regulatory agencies and shall be renewed or reinstated pursuant to section
11	24-34-102 (8), C.R.S. The director of the division may establish renewal
12	fees and delinquency fees for reinstatement pursuant to section
13	24-34-105, C.R.S., AND SHALL INCREASE RENEWAL FEES CONSISTENT
14	WITH SECTION 24-34-109 (4), C.R.S., TO FUND THE DIVISION'S COSTS IN
15	ADMINISTERING AND STAFFING THE NURSE-PHYSICIAN ADVISORY TASK
16	FORCE FOR COLORADO HEALTH CARE CREATED IN SECTION 24-34-109(1),
17	C.R.S. If a person fails to renew his or her license pursuant to the
18	schedule established by the director of the division of registrations, such
19	license shall expire. A person whose license has expired shall be subject
20	to the penalties provided in this article or section 24-34-102 (8), C.R.S.
21	SECTION 28. Part 1 of article 34 of title 24, Colorado Revised
22	Statutes, is amended BY THE ADDITION OF A NEW SECTION to
23	read:
24	24-34-109. Nurse-physician advisory task force for Colorado
25	health care - creation - duties - repeal. (1) THERE IS HEREBY CREATED,
26	WITHIN THE DIVISION OF REGISTRATIONS IN THE DEPARTMENT OF
27	REGULATORY AGENCIES, THE NURSE-PHYSICIAN ADVISORY TASK FORCE
28	FOR COLORADO HEALTH CARE, REFERRED TO IN THIS SECTION AS
29	"NPATCH". THE PURPOSE OF NPATCH IS TO PROMOTE PUBLIC SAFETY
30	AND IMPROVE HEALTH CARE IN COLORADO BY SUPPORTING
31	COLLABORATION AND COMMUNICATION BETWEEN THE PRACTICES OF
32	NURSING AND MEDICINE. THE NPATCH SHALL:
33	(a) PROMOTE PATIENT SAFETY AND QUALITY CARE;
34	(b) ADDRESS ISSUES OF MUTUAL CONCERN AT THE INTERFACE OF
35	THE PRACTICES OF NURSING AND MEDICINE;
36	(c) Inform public policy-making; and

-12- DRAFT

1 2	(d) Make consensus recommendations to policy-making and rule-making entities, including:
3 4 5 6 7 8	(I) RECOMMENDATIONS TO THE STATE BOARD OF NURSING CREATED IN SECTION 12-38-104, C.R.S., AND THE STATE BOARD OR MEDICAL EXAMINERS CREATED IN SECTION 12-36-103, C.R.S., REGARDING THE RULES OF THE BOARDS GOVERNING PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS; AND
9 10	(II) RECOMMENDATIONS TO THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF REGULATORY AGENCIES.
11 12	(2) (a) THE NPATCH SHALL CONSIST OF TWELVE MEMBERS APPOINTED AS FOLLOWS:
13 14	(I) ONE MEMBER OF THE STATE BOARD OF NURSING, APPOINTED BY THE PRESIDENT OF THE BOARD;
15 16	(II) ONE MEMBER OF THE STATE BOARD OF MEDICAL EXAMINERS, APPOINTED BY THE PRESIDENT OF THE BOARD;
17	(III) TEN MEMBERS APPOINTED BY THE GOVERNOR AS FOLLOWS:
18 19	(A) THREE MEMBERS RECOMMENDED BY AND REPRESENTING A STATEWIDE PROFESSIONAL NURSING ORGANIZATION;
20 21	(B) THREE MEMBERS RECOMMENDED BY AND REPRESENTING A STATEWIDE PHYSICIANS' ORGANIZATION;
22 23 24	(C) ONE MEMBER REPRESENTING THE NURSING COMMUNITY WHO MAY OR MAY NOT BE A MEMBER OF A STATEWIDE PROFESSIONAL NURSING ORGANIZATION;
25 26 27	(D) One member representing the physician community who may or may not be a member of a statewide physicians' organization; and
28	(E) TWO MEMBERS REPRESENTING CONSUMERS.
29 30 31 32	(b) THE MEMBERS OF THE NPATCH SHALL SERVE ON A VOLUNTARY BASIS WITHOUT COMPENSATION AND SHALL SERVE THREE-YEAR TERMS; EXCEPT THAT, IN ORDER TO ENSURE STAGGERED TERMS OF OFFICE, FOUR OF THE INITIAL APPOINTEES SHALL SERVE INITIAL

-13-

1 2	ONE-YEAR TERMS AND FOUR OF THE INITIAL APPOINTEES SHALL SERVE INITIAL TWO-YEAR TERMS.
3 4 5	(3) (a) EXCEPT AS PROVIDED IN PARAGRAPH (b) OF THIS SUBSECTION (3), THE NPATCH MAY DEVELOP ITS OWN BYLAWS AND PROCEDURES TO GOVERN ITS OPERATIONS.
6 7 8 9 10	(b) A RECOMMENDATION OF THE NPATCH REQUIRES THE CONSENSUS OF THE MEMBERS OF THE TASK FORCE. FOR PURPOSES OF THIS SECTION, "CONSENSUS" MEANS AN AGREEMENT, DECISION, OR RECOMMENDATION THAT ALL MEMBERS OF THE TASK FORCE CAN ACTIVELY SUPPORT AND THAT NO MEMBER ACTIVELY OPPOSES.
11 12 13 14 15 16 17 18	(4) The division of registrations shall staff the NPATCH. The division's costs for administering and staffing the NPATCH shall be funded by an increase in fees for professional and advanced practice nursing and medical license renewal fees, as authorized in sections 12-38-108 (1) (b) (I) and 12-36-123, C.R.S., with fifty percent of the funding derived from the physician license renewal fees and fifty percent derived from the professional and advanced practice nursing fees.
19 20	(5) THE NPATCH SHALL PRIORITIZE CONSIDERATION OF AND MAKE RECOMMENDATIONS ON THE FOLLOWING TOPICS:
21 22 23 24 25 26 27	(a) FACILITATING A SMOOTH TRANSITION TO THE ARTICULATED PLAN MODEL, AS DESCRIBED IN SECTIONS 12-38-111.6 (4.5) AND 12-36-106.4, C.R.S., FOR ENSURING COLLABORATION BETWEEN ADVANCED PRACTICE NURSES WITH PRESCRIPTIVE AUTHORITY AND PHYSICIANS AND HARMONIZING RULES OF THE STATE BOARD OF NURSING AND THE STATE BOARD OF MEDICAL EXAMINERS REGARDING ARTICULATED PLANS;
28 29	(b) The framework for articulated plans, including creation of sample plans;
30 31	(c) QUALITY ASSURANCE MECHANISMS FOR ALL MEDICATION PRESCRIBERS;
32 33	(d) EVIDENCE-BASED GUIDELINES FOR ADVANCED PRACTICE NURSES WITH PRESCRIPTIVE AUTHORITY;
34	(e) DECISION SUPPORT TOOLS FOR ADVANCED PRACTICE NURSES

35

WITH PRESCRIPTIVE AUTHORITY;

DRAFT

2	(1) SAFE PRESCRIBING METRICS FOR ALL MEDICATION PRESCRIBERS;
3 4	(g) METHODS TO FOSTER EFFECTIVE COMMUNICATION BETWEEN HEALTH PROFESSIONS;
5 6	(h) HEALTH CARE DELIVERY SYSTEM INTEGRATION AND RELATED IMPROVEMENTS;
7 8 9	(i) Physician standards, process, and metrics to ensure appropriate consultation, collaboration, and referral regarding advanced practice nurse prescriptive authority; and
10 11	(j) Prescribing issues regarding providers other than physicians and advanced practice nurses.
12 13 14 15 16 17 18	(6) (a) THE NPATCH SHALL MAKE RECOMMENDATIONS TO THE STATE BOARD OF NURSING AND THE STATE BOARD OF MEDICAL EXAMINERS TO ASSIST THE BOARDS IN THE DEVELOPMENT OF INDEPENDENT RULES, CONSISTENT WITH SECTIONS 12-38-111.6 (4.5) AND 12-36-106.4, C.R.S., REGARDING PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES, ARTICULATED PLANS, AND THE COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS.
19 20 21	(b) THE NPATCH SHALL MAKE RECOMMENDATIONS, OTHER THAN THOSE DESCRIBED IN PARAGRAPH (a) OF THIS SUBSECTION (6), TO THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF REGULATORY AGENCIES.
22 23 24	(7) This section is repealed, effective July 1, 2014. Prior to such repeal, the functions of the NPATCH shall be reviewed as provided in section 2-3-1203, C.R.S.
25 26	SECTION 29. 2-3-1203 (3) (aa), Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBPARAGRAPH to read:
27 28 29	2-3-1203. Sunset review of advisory committees. (3) The following dates are the dates for which the statutory authorization for the designated advisory committees is scheduled for repeal: (aa) July 1, 2014:
31 32	(V) THE NURSE-PHYSICIAN ADVISORY TASK FORCE FOR COLORADO HEALTH CARE, CREATED IN SECTION 24-34-109, C.R.S.;".

1 Renumber succeeding sections accordingly.

** *** ** *** **