

1 AN ACT relating to the prescriptive authority of advanced practice registered
2 nurses.

3 ***Be it enacted by the General Assembly of the Commonwealth of Kentucky:***

4 ➔Section 1. KRS 314.011 is amended to read as follows:

5 As used in this chapter, unless the context thereof requires otherwise:

- 6 (1) "Board" means Kentucky Board of Nursing;
- 7 (2) "Delegation" means directing a competent person to perform a selected nursing
8 activity or task in a selected situation under the nurse's supervision and pursuant to
9 administrative regulations promulgated by the board in accordance with the
10 provisions of KRS Chapter 13A;
- 11 (3) "Nurse" means a person who is licensed or holds the privilege to practice under the
12 provisions of this chapter as a registered nurse or as a licensed practical nurse;
- 13 (4) "Nursing process" means the investigative approach to nursing practice utilizing a
14 method of problem-solving by means of:
- 15 (a) Nursing diagnosis, a systematic investigation of a health concern, and an
16 analysis of the data collected in order to arrive at an identifiable problem; and
- 17 (b) Planning, implementation, and evaluation based on nationally accepted
18 standards of nursing practice;
- 19 (5) "Registered nurse" means one who is licensed or holds the privilege under the
20 provisions of this chapter to engage in registered nursing practice;
- 21 (6) "Registered nursing practice" means the performance of acts requiring substantial
22 specialized knowledge, judgment, and nursing skill based upon the principles of
23 psychological, biological, physical, and social sciences in the application of the
24 nursing process in:
- 25 (a) The care, counsel, and health teaching of the ill, injured, or infirm;
- 26 (b) The maintenance of health or prevention of illness of others;
- 27 (c) The administration of medication and treatment as prescribed by a physician,

1 physician assistant, dentist, or advanced practice registered nurse and as
2 further authorized or limited by the board, and which are consistent either
3 with American Nurses' Association Scope and Standards of Practice or with
4 standards of practice established by nationally accepted organizations of
5 registered nurses. Components of medication administration include but are
6 not limited to:

- 7 1. Preparing and giving medications in the prescribed dosage, route, and
8 frequency, including dispensing medications only as defined in
9 subsection (17)(b) of this section;
 - 10 2. Observing, recording, and reporting desired effects, untoward reactions,
11 and side effects of drug therapy;
 - 12 3. Intervening when emergency care is required as a result of drug therapy;
 - 13 4. Recognizing accepted prescribing limits and reporting deviations to the
14 prescribing individual;
 - 15 5. Recognizing drug incompatibilities and reporting interactions or
16 potential interactions to the prescribing individual; and
 - 17 6. Instructing an individual regarding medications;
- 18 (d) The supervision, teaching of, and delegation to other personnel in the
19 performance of activities relating to nursing care; and
- 20 (e) The performance of other nursing acts which are authorized or limited by the
21 board, and which are consistent either with American Nurses' Association
22 Standards of Practice or with Standards of Practice established by nationally
23 accepted organizations of registered nurses;
- 24 (7) "Advanced practice registered nurse" or "APRN" means a certified nurse
25 practitioner, certified registered nurse anesthetist, certified nurse midwife, or
26 clinical nurse specialist, who is licensed to engage in advance practice registered
27 nursing pursuant to KRS 314.042 and certified in at least one (1) population focus;

1 (8) "Advanced practice registered nursing" means the performance of additional acts by
2 registered nurses who have gained advanced clinical knowledge and skills through
3 an accredited education program that prepares the registered nurse for one (1) of the
4 four (4) APRN roles; who are certified by the American Nurses' Association or
5 other nationally established organizations or agencies recognized by the board to
6 certify registered nurses for advanced practice registered nursing as a certified nurse
7 practitioner, certified registered nurse anesthetist, certified nurse midwife, or
8 clinical nurse specialist; and who certified in at least one (1) population focus. The
9 additional acts shall, subject to approval of the board, include but not be limited to
10 prescribing treatment, drugs, devices, and ordering diagnostic tests. Advanced
11 practice registered nurses who engage in these additional acts shall be authorized to
12 issue prescriptions for and dispense nonscheduled legend drugs as defined in KRS
13 217.905 and to issue prescriptions for but not to dispense Schedules II through V
14 controlled substances described in or as classified pursuant to KRS 218A.020,
15 218A.060, 218A.080, 218A.100, and 218A.120 under the conditions set forth in
16 KRS 314.042 and regulations promulgated by the Kentucky Board of Nursing on or
17 before August 15, 2006.

- 18 (a) 1. Prescriptions issued by advanced practice registered nurses for Schedule
19 II controlled substances classified under KRS 218A.060, except
20 hydrocodone combination products as defined in KRS 218A.010, shall
21 be limited to a seventy-two (72) hour supply without any refill.
- 22 2. Prescriptions issued by advanced practice registered nurses for
23 hydrocodone combination products as defined in KRS 218A.010 shall
24 be limited to a thirty (30) day supply without any refill.
- 25 3. Prescriptions issued under this subsection for psychostimulants may be
26 written for a thirty (30) day supply *with up to two (2) sequential*
27 *prescriptions* only by an advanced practice registered nurse certified in

1 psychiatric-mental health nursing who is providing services in a health
2 facility as defined in KRS Chapter 216B or in a regional services
3 program for mental health or individuals with an intellectual disability as
4 defined in KRS Chapter 210.

5 (b) Prescriptions issued by advanced practice registered nurses for Schedule III
6 controlled substances classified under KRS 218A.080 shall be limited to a
7 thirty (30) day supply without any refill. Prescriptions issued by advanced
8 practice registered nurses for Schedules IV and V controlled substances
9 classified under KRS 218A.100 and 218A.120 shall be limited to the original
10 prescription and refills not to exceed a six (6) month supply.

11 Nothing in this chapter shall be construed as requiring an advanced practice
12 registered nurse designated by the board as a certified registered nurse anesthetist to
13 obtain prescriptive authority pursuant to this chapter or any other provision of law
14 in order to deliver anesthesia care. The performance of these additional acts shall be
15 consistent with the certifying organization or agencies' scopes and standards of
16 practice recognized by the board by administrative regulation;

17 (9) "Licensed practical nurse" means one who is licensed or holds the privilege under
18 the provisions of this chapter to engage in licensed practical nursing practice;

19 (10) "Licensed practical nursing practice" means the performance of acts requiring
20 knowledge and skill such as are taught or acquired in approved schools for practical
21 nursing in:

22 (a) The observing and caring for the ill, injured, or infirm under the direction of a
23 registered nurse, advanced practice registered nurse, physician assistant,
24 licensed physician, or dentist;

25 (b) The giving of counsel and applying procedures to safeguard life and health, as
26 defined and authorized by the board;

27 (c) The administration of medication or treatment as authorized by a physician,

- 1 physician assistant, dentist, or advanced practice registered nurse and as
2 further authorized or limited by the board which is consistent with the
3 National Federation of Licensed Practical Nurses or with Standards of
4 Practice established by nationally accepted organizations of licensed practical
5 nurses;
- 6 (d) Teaching, supervising, and delegating except as limited by the board; and
- 7 (e) The performance of other nursing acts which are authorized or limited by the
8 board and which are consistent with the National Federation of Practical
9 Nurses' Standards of Practice or with Standards of Practice established by
10 nationally accepted organizations of licensed practical nurses;
- 11 (11) "School of nursing" means a nursing education program preparing persons for
12 licensure as a registered nurse or a practical nurse;
- 13 (12) "Continuing education" means offerings beyond the basic nursing program that
14 present specific content planned and evaluated to meet competency based
15 behavioral objectives which develop new skills and upgrade knowledge;
- 16 (13) "Nursing assistance" means the performance of delegated nursing acts by unlicensed
17 nursing personnel for compensation under supervision of a nurse;
- 18 (14) "Sexual assault nurse examiner" means a registered nurse who has completed the
19 required education and clinical experience and maintains a current credential from
20 the board as provided under KRS 314.142 to conduct forensic examinations of
21 victims of sexual offenses under the medical protocol issued by the Justice and
22 Public Safety Cabinet in consultation with the Sexual Assault Response Team
23 Advisory Committee pursuant to KRS 216B.400(4);
- 24 (15) "Competency" means the application of knowledge and skills in the utilization of
25 critical thinking, effective communication, interventions, and caring behaviors
26 consistent with the nurse's practice role within the context of the public's health,
27 safety, and welfare;

- 1 (16) "Credential" means a current license, registration, certificate, or other similar
2 authorization that is issued by the board;
- 3 (17) "Dispense" means:
- 4 (a) To receive and distribute nonscheduled legend drug samples from
5 pharmaceutical manufacturers to patients at no charge to the patient or any
6 other party; or
- 7 (b) To distribute nonscheduled legend drugs from a local, district, and
8 independent health department, subject to the direction of the appropriate
9 governing board of the individual health department;
- 10 (18) "Dialysis care" means a process by which dissolved substances are removed from a
11 patient's body by diffusion, osmosis, and convection from one (1) fluid
12 compartment to another across a semipermeable membrane;
- 13 (19) "Dialysis technician" means a person who is not a nurse, a physician assistant, or a
14 physician and who provides dialysis care in a licensed renal dialysis facility under
15 the direct, on-site supervision of a registered nurse or a physician;
- 16 (20) "Population focus" means the section of the population within which the advanced
17 practice registered nurse has targeted to practice. The categories of population foci
18 are:
- 19 (a) Family and individual across the lifespan;
- 20 (b) Adult gerontology;
- 21 (c) Neonatal;
- 22 (d) Pediatrics;
- 23 (e) Women's health and gender-related health; and
- 24 (f) Psychiatric mental health; and
- 25 (21) "Conviction" means but is not limited to:
- 26 (a) An unvacated adjudication of guilt;
- 27 (b) Pleading no contest or nolo contendere or entering an Alford plea; or

1 (c) Entering a guilty plea pursuant to a pretrial diversion order;
2 Regardless of whether the penalty is rebated, suspended, or probated.

3 ➔Section 2. KRS 314.042 is amended to read as follows:

4 (1) An applicant for licensure to practice as an advanced practice registered nurse shall
5 file with the board a written application for licensure and submit evidence, verified
6 by oath, that the applicant:

7 (a) Has completed an education program that prepares the registered nurse for one
8 (1) of four (4) APRN roles that has been accredited by a national nursing
9 accrediting body recognized by the United States Department of Education;

10 (b) Is certified by a nationally established organization or agency recognized by
11 the board to certify registered nurses for advanced practice registered nursing;

12 (c) Is able to understandably speak and write the English language and to read the
13 English language with comprehension; and

14 (d) Has passed the jurisprudence examination approved by the board as provided
15 in subsection (12) of this section.

16 (2) The board may issue a license to practice advanced practice registered nursing to an
17 applicant who holds a current active registered nurse license issued by the board or
18 holds the privilege to practice as a registered nurse in this state and meets the
19 qualifications of subsection (1) of this section. An advanced practice registered
20 nurse shall be:

21 (a) Designated by the board as a certified registered nurse anesthetist, certified
22 nurse midwife, certified nurse practitioner, or clinical nurse specialist; and

23 (b) Certified in at least one (1) population focus.

24 (3) The applicant for licensure or renewal thereof to practice as an advanced practice
25 registered nurse shall pay a fee to the board as set forth in regulation by the board.

26 (4) An advanced practice registered nurse shall maintain a current active registered
27 nurse license issued by the board or hold the privilege to practice as a registered

1 nurse in this state and maintain current certification by the appropriate national
2 organization or agency recognized by the board.

3 (5) Any person who holds a license to practice as an advanced practice registered nurse
4 in this state shall have the right to use the title "advanced practice registered nurse"
5 and the abbreviation "APRN." No other person shall assume the title or use the
6 abbreviation or any other words, letters, signs, or figures to indicate that the person
7 using the same is an advanced practice registered nurse. No person shall practice as
8 an advanced practice registered nurse unless licensed under this section.

9 (6) Any person heretofore licensed as an advanced practice registered nurse under the
10 provisions of this chapter who has allowed the license to lapse may be reinstated on
11 payment of the current fee and by meeting the provisions of this chapter and
12 regulations promulgated by the board pursuant to the provisions of KRS Chapter
13 13A.

14 (7) The board may authorize a person to practice as an advanced practice registered
15 nurse temporarily and pursuant to applicable regulations promulgated by the board
16 pursuant to the provisions of KRS Chapter 13A if the person is awaiting the results
17 of the national certifying examination for the first time or is awaiting licensure by
18 endorsement. A person awaiting the results of the national certifying examination
19 shall use the title "APRN Applicant" or "APRN App."

20 (8) (a) Except as authorized by KRS 314.196 and subsection (9) of this section,
21 before an advanced practice registered nurse engages in the prescribing or
22 dispensing of nonscheduled legend drugs as authorized by KRS 314.011(8),
23 the advanced practice registered nurse shall enter into a written "Collaborative
24 Agreement for the Advanced Practice Registered Nurse's Prescriptive
25 Authority for Nonscheduled Legend Drugs" (CAPA-NS) with a physician
26 licensed in Kentucky that defines the scope of the prescriptive authority for
27 nonscheduled legend drugs.

- 1 (b) The advanced practice registered nurse shall notify the Kentucky Board of
2 Nursing of the existence of the CAPA-NS and the name of the collaborating
3 physician and shall, upon request, furnish to the board or its staff a copy of the
4 completed CAPA-NS. The Kentucky Board of Nursing shall notify the
5 Kentucky Board of Medical Licensure that a CAPA-NS exists and furnish the
6 collaborating physician's name.
- 7 (c) The CAPA-NS shall be in writing and signed by both the advanced practice
8 registered nurse and the collaborating physician. A copy of the completed
9 collaborative agreement shall be available at each site where the advanced
10 practice registered nurse is providing patient care.
- 11 (d) The CAPA-NS shall describe the arrangement for collaboration and
12 communication between the advanced practice registered nurse and the
13 collaborating physician regarding the prescribing of nonscheduled legend
14 drugs by the advanced practice registered nurse.
- 15 (e) The advanced practice registered nurse who is prescribing nonscheduled
16 legend drugs and the collaborating physician shall be qualified in the same or
17 a similar specialty.
- 18 (f) The CAPA-NS is not intended to be a substitute for the exercise of
19 professional judgment by the advanced practice registered nurse or by the
20 collaborating physician.
- 21 (g) The CAPA-NS shall be reviewed and signed by both the advanced practice
22 registered nurse and the collaborating physician and may be rescinded by
23 either party upon written notice via registered mail to the other party, the
24 Kentucky Board of Nursing, and the Kentucky Board of Medical Licensure.
- 25 (9) (a) Before an advanced practice registered nurse may discontinue or be exempt
26 from a CAPA-NS required under subsection (8) of this section, the advanced
27 practice registered nurse shall have completed four (4) years of prescribing as

1 a certified nurse practitioner, clinical nurse specialist, certified nurse midwife,
2 or as a certified registered nurse anesthetist. For certified nurse practitioners
3 and clinical nurse specialists, the four (4) years of prescribing shall be in a
4 population focus as defined in KRS 314.011.

5 (b) After four (4) years of prescribing with a CAPA-NS in collaboration with a
6 physician:

- 7 1. An advanced practice registered nurse whose license is in good standing
8 at that time with the Kentucky Board of Nursing and who will be
9 prescribing nonscheduled legend drugs without a CAPA-NS shall notify
10 that board that the four (4) year requirement has been met and that he or
11 she will be prescribing nonscheduled legend drugs without a CAPA-NS;
- 12 2. The advanced practice registered nurse will no longer be required to
13 maintain a CAPA-NS and shall not be compelled to maintain a CAPA-
14 NS as a condition to prescribe after the four (4) years have expired, but
15 an advanced practice registered nurse may choose to maintain a CAPA-
16 NS indefinitely after the four (4) years have expired; and
- 17 3. If the advanced practice registered nurse's license is not in good
18 standing, the CAPA-NS requirement shall not be removed until the
19 license is restored to good standing.

20 (c) An advanced practice registered nurse wishing to practice in Kentucky
21 through licensure by endorsement is exempt from the CAPA-NS requirement
22 if the advanced practice registered nurse:

- 23 1. Has met the prescribing requirements in a state that grants independent
24 prescribing to advanced practice registered nurses; and
- 25 2. Has been prescribing for at least four (4) years.

26 (d) An advanced practice registered nurse wishing to practice in Kentucky
27 through licensure by endorsement who had a collaborative prescribing

1 agreement with a physician in another state for at least four (4) years is
2 exempt from the CAPA-NS requirement.

- 3 (e) 1. An advanced practice registered nurse whose license is in good standing
4 at that time with the Kentucky Board of Nursing and who will be
5 prescribing nonscheduled legend drugs without a CAPA-NS shall notify
6 that board that the four (4) year requirement has been met and that he or
7 she will be prescribing nonscheduled legend drugs without a CAPA-NS.
- 8 2. An advanced practice registered nurse who has maintained a CAPA-NS
9 for four (4) years or more will no longer be required to maintain a
10 CAPA-NS and shall not be compelled to maintain a CAPA-NS as a
11 condition to prescribe after the four (4) years have expired, but an
12 advanced practice registered nurse may choose to maintain a CAPA-NS
13 indefinitely after the four (4) years have expired.
- 14 3. An advanced practice registered nurse who has maintained a CAPA-NS
15 for less than four (4) years shall be required to continue to maintain a
16 CAPA-NS until the four (4) year period is completed, after which the
17 CAPA-NS will no longer be required.

18 (10) (a) Before an advanced practice registered nurse engages in the prescribing of
19 Schedules II through V controlled substances as authorized by KRS
20 314.011(8), the advanced practice registered nurse shall enter into a written
21 "Collaborative Agreement for the Advanced Practice Registered Nurse's
22 Prescriptive Authority for Controlled Substances" (CAPA-CS) with a
23 physician licensed in Kentucky that defines the scope of the prescriptive
24 authority for controlled substances.

25 (b) The advanced practice registered nurse shall notify the Kentucky Board of
26 Nursing of the existence of the CAPA-CS and the name of the collaborating
27 physician and shall, upon request, furnish to the board or its staff a copy of the

1 completed CAPA-CS. The Kentucky Board of Nursing shall notify the
2 Kentucky Board of Medical Licensure that a CAPA-CS exists and furnish the
3 collaborating physician's name.

4 (c) The CAPA-CS shall be in writing and signed by both the advanced practice
5 registered nurse and the collaborating physician. A copy of the completed
6 collaborative agreement shall be available at each site where the advanced
7 practice registered nurse is providing patient care.

8 (d) The CAPA-CS shall describe the arrangement for collaboration and
9 communication between the advanced practice registered nurse and the
10 collaborating physician regarding the prescribing of controlled substances by
11 the advanced practice registered nurse.

12 (e) The advanced practice registered nurse who is prescribing controlled
13 substances and the collaborating physician shall be qualified in the same or a
14 similar specialty.

15 (f) The CAPA-CS is not intended to be a substitute for the exercise of
16 professional judgment by the advanced practice registered nurse or by the
17 collaborating physician.

18 (g) Before engaging in the prescribing of controlled substances, the advanced
19 practice registered nurse shall:

- 20 1. ~~Be~~~~Have been~~ licensed to practice as an advanced practice registered
21 nurse ~~for one (1) year~~ with the Kentucky Board of Nursing; or
- 22 2. Be nationally certified as an advanced practice registered nurse and be
23 registered, certified, or licensed in good standing as an advanced
24 practice registered nurse in another state ~~for one (1) year~~ prior to
25 applying for licensure by endorsement in Kentucky.

26 (h) Prior to prescribing controlled substances, the advanced practice registered
27 nurse shall obtain a Controlled Substance Registration Certificate through the

1 U.S. Drug Enforcement Agency.

2 (i) The CAPA-CS shall be reviewed and signed by both the advanced practice
3 registered nurse and the collaborating physician and may be rescinded by
4 either party upon written notice to the other party and the Kentucky Board of
5 Nursing.

6 (j) The CAPA-CS shall state the limits on controlled substances which may be
7 prescribed by the advanced practice registered nurse, as agreed to by the
8 advanced practice registered nurse and the collaborating physician. The limits
9 so imposed may be more stringent than either the schedule limits on
10 controlled substances established in KRS 314.011(8) or the limits imposed in
11 regulations promulgated by the Kentucky Board of Nursing thereunder.

12 (11) Nothing in this chapter shall be construed as requiring an advanced practice
13 registered nurse designated by the board as a certified registered nurse anesthetist to
14 enter into a collaborative agreement with a physician, pursuant to this chapter or any
15 other provision of law, in order to deliver anesthesia care.

16 (12) The jurisprudence examination shall be prescribed by the board and be conducted
17 on the licensing requirements under this chapter and board regulations and
18 requirements applicable to advanced practice registered nursing in this
19 Commonwealth. The board shall promulgate administrative regulations in
20 accordance with KRS Chapter 13A, establishing the provisions to meet this
21 requirement.

22 **(13) (a) Before an advanced practice registered nurse may discontinue or be exempt**
23 **from a CAPA-CS required under subsection (10) of this section, the**
24 **advanced practice registered nurse shall have completed four (4) years of**
25 **prescribing authority for controlled substances as a certified nurse**
26 **practitioner, clinical nurse specialist, certified nurse midwife, or as a**
27 **certified registered nurse anesthetist. For certified nurse practitioners and**

1 clinical nurse specialists, the four (4) years of prescribing shall be in a
2 population focus of adult-gerontology, pediatrics, neonatology, family,
3 women's health, or psychiatric-mental health.

4 (b) After four (4) years of prescribing authority with a CAPA-CS in
5 collaboration with a physician:

6 1. An advanced practice registered nurse whose license is in good
7 standing at that time with the Kentucky Board of Nursing and who
8 will be prescribing controlled substances without a CAPA-CS shall
9 notify the board that the four (4) year requirement has been met and
10 that he or she will be prescribing controlled substances without a
11 CAPA-CS;

12 2. The advanced practice registered nurse shall no longer be required to
13 maintain a CAPA-CS and shall not be compelled to maintain a
14 CAPA-CS as a condition to prescribe controlled substances after the
15 four (4) years have expired, but an advanced practice registered nurse
16 may choose to maintain a CAPA-CS indefinitely after the four (4)
17 years have expired; and

18 3. If the advanced practice registered nurse's license is not in good
19 standing, the CAPA-CS requirement shall not be removed until the
20 license is restored to good standing.

21 (c) An advanced practice registered nurse wishing to practice in Kentucky
22 through licensure by endorsement is exempt from the CAPA-CS
23 requirement if the advanced practice registered nurse:

24 1. Has met the prescribing requirements for controlled substances in a
25 state that grants prescribing authority to advanced practice registered
26 nurses; and

27 2. Has had authority to prescribe controlled substances for at least four

1 (4) years.

2 (d) An advanced practice registered nurse wishing to practice in Kentucky
3 through licensure by endorsement who has had the authority to prescribe
4 controlled substances for less than four (4) years, shall enter into a CAPA-
5 CS with a physician licensed in Kentucky until the four (4) year period is
6 completed, after which the CAPA-CS shall no longer be required.

7 (e) On or after the effective date of this Act:

8 1. An advanced practice registered nurse whose license is in good
9 standing at that time with the Kentucky Board of Nursing and who
10 will be prescribing controlled substances without a CAPA-CS shall
11 notify the board that the four (4) year requirement has been met and
12 that he or she will be prescribing controlled substances without a
13 CAPA-CS;

14 2. An advanced practice registered nurse who has maintained a CAPA-
15 CS for four (4) years or more shall no longer be required to maintain
16 a CAPA-CS as a condition for prescribing controlled substances and
17 shall not be compelled to maintain a CAPA-CS after the four (4) years
18 have expired, but an advanced practice registered nurse may choose to
19 maintain a CAPA-CS indefinitely after the four (4) years have
20 expired; and

21 3. An advanced practice registered nurse who has maintained a CAPA-
22 CS for less than four (4) years shall be required to continue to
23 maintain a CAPA-CS until the four (4) year period is completed, after
24 which the CAPA-CS will no longer be required.