14 CSR 2

Senate Bill No. 296

(By Senators Minard, Snyder, Prezioso,

Unger, Boley and K. Facemyer)

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[Introduced January 27, 2011; referred to the Committee on Health and Human Resources; and then to the Committee on the Judiciary.]

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A BILL to amend and reenact article 9, chapter 64 of the Code of West Virginia, 1931, as amended, relating to authorizing the Board of Optometry to promulgate a legislative rule relating to oral pharmaceutical prescriptive authority.

Be it enacted by the Legislature of West Virginia:

That article 9, chapter 64 of the Code of West Virginia, 1931, as amended, be amended and reenacted to read as follows:

ARTICLE 9. AUTHORIZATION FOR MISCELLANEOUS AGENCIES AND BOARDS TO PROMULGATE LEGISLATIVE RULES.

§64-9-1. Board of Optometry.

The legislative rule filed in the state register on the thirtieth day of July, two thousand ten, authorized under the authority of section six, article eight, chapter thirty, of this

code, modified by the Board of Optometry to meet the objections of the Legislative Rule-Making Review Committee and refiled in the state register on the third day of January, two thousand eleven, relating to the Board of Optometry (oral pharmaceutical prescriptive authority, 14 CSR 2), is authorized with the following amendments:

On page three, subsection 9.2, by striking the period inserting a comma and adding the following, "and include hands-on supervised clinical training.";

On page four, subsection 10.2, after the words "standards of" by inserting the words, "education and";

On page four, by adding a new subsection 10.3 to read as follows. "10.3 A new oral drug used for a new indication may not be started on a patient until discussed with the patient's osteopathic or allopathic physician, and documented in the patient's record, in order to identify and minimize potential adverse reactions and drug interactions.";

And,

On page four, by adding a new subsection 10.4 to read as follows. "10.4 If the patient does not have a primary care provider or refuses to provide written permission to report the oral drug(s) to his or her primary care provider the certificate

holder may provide a written statement to the patient regarding the oral drug(s) administered with instruction to the patient to give the listed information to his or her current primary care provider or any primary care provider they would choose to see in the future.”.

NOTE: The purpose of this bill is to authorize the Board of Optometry to promulgate a legislative rule relating to Oral Pharmaceutical Prescriptive Authority.

This section is new; therefore, strike-throughs and underscoring have been omitted.