

**Senate Bill No. 379**

(By Senators Beach, Kessler (Mr. President), Blair, Boley, D.  
Hall, Miller, Fitzsimmons, Laird and Sypolt)

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[Introduced February 27, 2013; referred to the Committee on  
Health and Human Resources; and then to the Committee on  
Government Organization.]

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A BILL to amend and reenact §30-7-15a, §30-7-15b and §30-7-15c of  
the Code of West Virginia, 1931, as amended; and to amend and  
reenact §30-15-7, §30-15-7a, §30-15-7b and §30-15-7c of said  
code, all relating to expanding prescriptive authority of  
advanced nurse practitioners and certified nurse-midwives;  
and removing the requirement for collaborative relationships  
with physicians.

*Be it enacted by the Legislature of West Virginia:*

That §30-7-15a, §30-7-15b and §30-7-15c of the Code of West  
Virginia, 1931, as amended, be amended and reenacted; and that  
§30-15-7, §30-15-7a, §30-15-7b and §30-15-7c of said code be  
amended and reenacted, all to read as follows:

**ARTICLE 7. REGISTERED PROFESSIONAL NURSES.**

1 **§30-7-15a. Prescriptive authority for prescription drugs;**  
2 **coordination with Board of Pharmacy.**

3 (a) The board may, in its discretion, authorize an advanced  
4 practice registered nurse to prescribe prescription drugs ~~in a~~  
5 ~~collaborative relationship with a physician licensed to practice~~  
6 ~~in West Virginia and~~ in accordance with applicable state and  
7 federal laws. An authorized advanced practice registered nurse  
8 may write or sign prescriptions or transmit prescriptions verbally  
9 or by other means of communication.

10 ~~(b) For purposes of this section an agreement to a~~  
11 ~~collaborative relationship for prescriptive practice between a~~  
12 ~~physician and an advanced practice registered nurse shall be set~~  
13 ~~forth in writing. Verification of the agreement shall be filed~~  
14 ~~with the board by the advanced practice registered nurse. The~~  
15 ~~board shall forward a copy of the verification to the Board of~~  
16 ~~Medicine and the Board of Osteopathic Medicine. Collaborative~~  
17 ~~agreements shall include, but are not limited to, the following:~~

18 ~~(1) Mutually agreed upon written guidelines or protocols for~~  
19 ~~prescriptive authority as it applies to the advanced practice~~  
20 ~~registered nurse's clinical practice;~~

21 ~~(2) Statements describing the individual and shared~~  
22 ~~responsibilities of the advanced practice registered nurse and the~~  
23 ~~physician pursuant to the collaborative agreement between them;~~

1       ~~(3) Periodic and joint evaluation of prescriptive practice;~~  
2 and

3       ~~(4) Periodic and joint review and updating of the written~~  
4 ~~guidelines or protocols.~~

5       ~~(c) (b)~~ The board shall promulgate legislative rules in  
6 accordance with the provisions of chapter twenty-nine-a of this  
7 code governing the eligibility and extent to which an advanced  
8 practice registered nurse may prescribe drugs. Such rules shall  
9 provide, ~~at a minimum, a state formulary classifying those~~  
10 ~~categories of drugs which shall not be prescribed by advanced~~  
11 ~~practice registered nurse including, but not limited to, Schedules~~  
12 ~~I and II of the Uniform Controlled Substances Act,~~  
13 ~~antineoplastics, radiopharmaceuticals and general anesthetics.~~  
14 ~~Drugs listed under Schedule III shall be limited to a seventy-two~~  
15 ~~hour supply without refill. In addition to the above referenced~~  
16 ~~provisions and restrictions and pursuant to a collaborative~~  
17 ~~agreement as set forth in subsections (a) and (b) of this section,~~  
18 ~~the rules and shall permit the prescribing of an annual supply of~~  
19 any drug, with the exception of controlled substances, which is  
20 prescribed for the treatment of a chronic condition, other than  
21 chronic pain management. For the purposes of this section, a  
22 "chronic condition" is a condition which lasts three months or  
23 more, generally cannot be prevented by vaccines, can be controlled

1 but not cured by medication and does not generally disappear.  
2 These conditions, with the exception of chronic pain, include, but  
3 are not limited to, arthritis, asthma, cardiovascular disease,  
4 cancer, diabetes, epilepsy and seizures, and obesity. The  
5 prescriber authorized in this section shall note on the  
6 prescription the chronic disease being treated.

7 ~~(d) The board shall consult with other appropriate boards for~~  
8 ~~the development of the formulary.~~

9 ~~(e)~~ (c) The board shall transmit to the Board of Pharmacy a  
10 list of all advanced practice registered nurse with prescriptive  
11 authority. The list shall include:

12 (1) The name of the authorized advanced practice registered  
13 nurse;

14 (2) The prescriber's identification number assigned by the  
15 board; and

16 (3) The effective date of prescriptive authority.

17 **§30-7-15b. Eligibility for prescriptive authority; application;**  
18 **fee.**

19 An advanced practice registered nurse who applies for  
20 authorization to prescribe drugs shall:

21 (a) Be licensed and certified in West Virginia as an advanced  
22 practice registered nurse;

23 (b) ~~Not be less than~~ Be at least eighteen years of age;

1 (c) Provide the board with evidence of successful completion  
2 of forty-five contact hours of education in pharmacology and  
3 clinical management of drug therapy under a program approved by  
4 the board, fifteen hours of which shall be completed within the  
5 two-year period immediately before the date of application;

6 (d) Provide the board with evidence that he or she is a  
7 person of good moral character and not addicted to alcohol or the  
8 use of controlled substances; and

9 (e) Submit a completed, notarized application to the board,  
10 accompanied by a fee as established by the board by rule.

11 **§30-7-15c. Form of prescriptions; termination of authority;**  
12 **renewal; notification of termination of authority.**

13 (a) Prescriptions authorized by an advanced practice  
14 registered nurse must comply with all applicable state and federal  
15 laws; must be signed by the prescriber with the initials  
16 "A.P.R.N." or the designated certification title of the  
17 prescriber; and must include the prescriber's identification  
18 number assigned by the board or the prescriber's national provider  
19 identifier assigned by the National Provider System pursuant to 45  
20 C. F. R. §162.408.

21 (b) Prescriptive authorization shall be terminated if the  
22 advanced practice registered nurse has:

1 (1) Not maintained current authorization as an advanced  
2 practice registered nurse; or

3 (2) Prescribed outside the advanced practice registered  
4 nurse's scope of practice or has prescribed drugs for other than  
5 therapeutic purposes. ~~or~~

6 ~~(3) Has not filed verification of a collaborative agreement~~  
7 ~~with the board.~~

8 (c) Prescriptive authority for an advanced practice  
9 registered nurse must be renewed biennially. Documentation of  
10 eight contact hours of pharmacology during the previous two years  
11 must be submitted at the time of renewal.

12 (d) The board shall notify the Board of Pharmacy ~~the Board of~~  
13 ~~Medicine and the Board of Osteopathic Medicine~~ within twenty-four  
14 hours after termination of, or change in, an advanced practice  
15 registered nurse's prescriptive authority.

16 **ARTICLE 15. NURSE-MIDWIVES.**

17 **§30-15-7. Standards of practice.**

18 The license to practice nurse-midwifery ~~shall entitle~~  
19 entitles the holder to practice ~~such the~~ profession according to  
20 the statement of standards of the American College of Nurse-  
21 Midwives. ~~and such holder shall be required to practice in a~~  
22 ~~collaborative relationship with a licensed physician engaged in~~  
23 ~~family practice or the specialized field of gynecology or~~

~~1 obstetrics, or as a member of the staff of any maternity, newborn  
2 or family planning service approved by the West Virginia  
3 Department of Health and Human Resources, who, as such, shall  
4 practice nurse-midwifery in a collaborative relationship with a  
5 board-certified or board-eligible obstetrician, gynecologist or  
6 the primary-care physician normally directly responsible for  
7 obstetrical and gynecological care in said area of practice.~~

8 **§30-15-7a. Prescriptive authority for prescription drugs;  
9 promulgation of rules; classification of drugs to  
10 be prescribed; coordination with Board of  
11 Pharmacy.**

12 (a) The board shall, in its discretion, authorize a nurse-  
13 midwife to prescribe prescription drugs ~~in a collaborative  
14 relationship with a physician licensed to practice in West  
15 Virginia and~~ in accordance with applicable state and federal laws.  
16 An authorized nurse-midwife may write or sign prescriptions or  
17 transmit prescriptions verbally or by other means of  
18 communication.

19 ~~(b) For purposes of this section an agreement to a  
20 collaborative relationship for practice between a physician and a  
21 nurse-midwife shall be set forth in writing. Verification of such  
22 agreement shall be filed with the board by the nurse-midwife. The  
23 board shall forward a copy of such verification to the Board of~~

1 ~~Medicine. Collaborative agreements shall include, but not be~~  
2 ~~limited to, the following:~~

3 ~~(1) Mutually agreed upon written guidelines or protocols for~~  
4 ~~prescriptive practice as it applies to the nurse-midwife's~~  
5 ~~clinical practice;~~

6 ~~(2) Statements describing the individual and shared~~  
7 ~~responsibilities of the nurse-midwife and the physician pursuant~~  
8 ~~to the collaborative agreement between them;~~

9 ~~(3) Periodic and joint evaluation of prescriptive practice;~~  
10 ~~and~~

11 ~~(4) Periodic and joint review and updating of the written~~  
12 ~~guidelines or protocols.~~

13 ~~(c) (b) The board shall promulgate legislative rules in~~  
14 ~~accordance with the provisions of chapter twenty-nine-a of this~~  
15 ~~code governing the eligibility and extent to which a nurse-midwife~~  
16 ~~may prescribe drugs. Such rules shall provide, at a minimum, a~~  
17 ~~state formulary classifying those categories of drugs which shall~~  
18 ~~not be prescribed by nurse-midwives, including, but not limited~~  
19 ~~to, Schedules I and II of the Uniform Controlled Substances~~  
20 ~~Act, anticoagulants, antineoplastics, radio-pharmaceuticals and~~  
21 ~~general anesthetics. Drugs listed under schedule III shall be~~  
22 ~~limited to a seventy-two hour supply without refill.~~



1       ~~(d) The board shall consult with other appropriate boards for~~  
2 ~~development of the formulary.~~

3       ~~(e)~~ (c) The board shall transmit to the Board of Pharmacy a  
4 list of all nurse-midwives with prescriptive authority. The list  
5 shall include:

6           (1) The name of the authorized nurse-midwife;

7           (2) The prescriber's identification number assigned by the  
8 board; and

9           (3) The effective date of prescriptive authority.

10 **§30-15-7b. Eligibility for prescriptive authority; application;**  
11 **fee.**

12       A nurse-midwife who applies for authorization to prescribe  
13 drugs shall:

14           (a) Be licensed and certified as a nurse-midwife in the State  
15 of West Virginia;

16           (b) ~~Not be less than~~ Be at least eighteen years of age;

17           (c) Provide the board with evidence of successful completion  
18 of forty-five contact hours of education in pharmacology and  
19 clinical management of drug therapy under a program approved by  
20 the board, fifteen of which shall be completed within the two-year  
21 period immediately before the date of application;

1 (d) Provide the board with evidence that he or she is a  
2 person of good moral character and not addicted to alcohol or the  
3 use of controlled substances; and

4 (e) Submit a completed, notarized application to the board,  
5 accompanied by a fee of ~~\$125~~ as established by the board by rule.

6 **§30-15-7c. Form of prescription; termination of authority;  
7 renewal; notification of termination of authority.**

8 (a) Prescriptions authorized by a nurse-midwife must comply  
9 with all applicable state and federal laws; must be signed by the  
10 prescriber with the initials "C.N.M."; and must include the  
11 prescriber's identification number assigned by the board.

12 (b) Prescriptive authorization shall be terminated if the  
13 nurse-midwife has:

14 (1) Not maintained current authorization as a nurse-midwife;  
15 or

16 (2) Prescribed outside the nurse-midwife's scope of practice  
17 or has prescribed drugs for other than therapeutic purposes. ~~or~~

18 ~~(3) Has not filed verification of a collaborative agreement  
19 with the board.~~

20 (c) Prescriptive authority for a nurse-midwife must be  
21 renewed biennially. Documentation of eight contact hours of  
22 pharmacology during the previous two years must be submitted at  
23 the time of renewal.

1           (d) The board shall notify the Board of Pharmacy ~~and the~~  
2 ~~Board of Medicine~~ within twenty-four hours after termination of,  
3 or change in, a nurse-midwife's prescriptive authority.

NOTE: The purpose of this bill is to allow advanced practice registered nurses and certified nurse-midwives to practice independently.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.