



Senate Bill 279 (as introduced 4-20-23)

Sponsor: Senator Jeff Irwin

Committee: Health Policy

Date Completed: 3-19-24

CONTENT

The bill would amend Part 172 (Nursing) and Part 73 (Manufacture, Distribution, and Dispensing) of the Public Health Code to do the following:

- **Allow the Michigan Board of Pharmacy to issue a controlled substances license to a registered professional nurse who held a specialty certification as a nurse practitioner.**
- **Allow a registered professional nurse with a specialty certification as a nurse practitioner to prescribe Schedule 2 to 5 controlled substances (see **BACKGROUND**) without delegation from a physician.**
- **Prescribe requirements that a registered professional nurse would have to meet to be granted a specialty certification as a nurse practitioner.**
- **Specify that individuals with a specialty certification as a nurse practitioner could supervise registered professional nurses, licensed practical nurses, and other health professionals, as appropriate.**

Specialty Certifications for Nurse Practitioners

Currently, Section 17210 of the Code allows the Michigan Board of Nursing to grant a specialty certification to a registered professional nurse who has advanced training beyond that required for initial licensure, who has demonstrated competency through examination or other evaluative processes, and who practices in one of the following health profession specialty fields: 1) nurse midwifery; 2) nurse anesthetist; 3) nurse practitioner; or 4) clinical nurse specialist. If a registered professional nurse has been granted a specialty certification in any of the fields above, except a nurse anesthetist, the registered nurse is referred to as an "advanced practice registered nurse". The bill would subject a specialty certification for a nurse practitioner to the provisions described below.

Under the bill, the Board could grant a specialty certification as a nurse practitioner under Section 17210 to a registered professional nurse who met all the following requirements:

- Had completed a graduate, postgraduate, or doctoral level nursing education program that the Board determined prepared the registered professional nurse for the health profession specialty field of nurse practitioner.
- Had completed a graduate level course in pharmacology, pathophysiology, and physical assessment, or their equivalent as determined by the Board, and had completed a clinical practicum applicable to the health profession specialty field of nurse practitioner.
- Held a certification from a nationally accredited certification body approved by the Board.
- Met any other requirement established by the Board by rule.

All the following would be within the scope of practice of a registered professional nurse who held a specialty certification as a nurse practitioner:

- Performing duties within the practice of nursing.
- Performing comprehensive assessments, providing physical examinations and other health assessments, and providing screening activities.
- Diagnosing, treating, and managing patients with acute and chronic illnesses and diseases.
- Ordering, performing, supervising, and interpreting laboratory and imaging studies.
- Prescribing pharmacological and nonpharmacological interventions and treatments that were within the registered professional nurse's specialty role.
- Engaging in health promotion and disease prevention.
- Providing health education.
- Counseling patients and families with potential, acute, and chronic health disorders.

Additionally, a registered professional nurse holding a specialty certification would have to do all the following:

- Provide only the functions common to the population for which a registered professional nurse who held a specialty certification as a nurse practitioner was educationally and experientially prepared.
- Comply with the standards established by the Board and with the national accreditation standards of the national professional nursing associations applicable to the individual's specialty certification.
- Consult with other health professionals and refer a patient to other health professionals, as appropriate.

The bill would specify that a registered professional nurse holding a specialty certification could supervise registered professional nurses, licensed practical nurses, and other health professionals, as appropriate.

Controlled Substances Licenses for Specialty Nurse Practitioners

Under the bill, the Michigan Board of Pharmacy could issue a controlled substances license to an individual licensed as a registered professional nurse under Part 172 if the individual had been granted a specialty certification as a nurse practitioner by the Michigan Board of Nursing.

An advanced practice registered nurse who held a specialty certification in the specialty field of nurse practitioner could prescribe a controlled substance included in Schedules 2 to 5 of Part 72 (Standards and Schedules) without delegation from a physician if the advanced practice registered nurse prescribed the controlled substance while practicing in the health profession specialty field of nurse practitioner. If a controlled substance were prescribed in this way, only the name of the advanced practice registered nurse could be used, recorded, or otherwise indicated in connection with the prescription and only the advanced practice registered nurse's Drug Enforcement Agency (DEA) registration number could be used, recorded, or otherwise indicated in connection with the prescription.

Additionally, the bill would allow an advanced practice registered nurse who held a specialty certification in the specialty field of nurse practitioner to order, receive, and dispense complimentary starter doses of controlled substances included in Schedules 2 to 5 of Part 72 without delegation from a physician. If an advanced practice registered nurse ordered, received, or dispensed a complimentary starter dose drug, only the advanced practice registered nurse's name could be used, recorded, or otherwise indicated in connection with each order, receipt, or dispensing and only the advanced practice registered nurse's DEA registration number could be used, recorded, or otherwise indicated in connection with each order, receipt, or dispensing. The bill also would allow a supervising physician to delegate the ordering, receipt, and dispensing of complimentary starter dose drugs described above.

BACKGROUND

Drugs are scheduled within five categories based on their accepted medical use and potential for abuse and dependence. Per Michigan's Public Health Code, Schedule 1 drugs have no currently accepted medical use and have a high potential for abuse and dependence, such as heroin and ecstasy. Schedule 2 to 5 drugs have at least some current medical uses and are differentiated by their potential for abuse and dependence. Schedule 2 drugs have a high potential for abuse, such as the painkiller Oxycodone and the stimulant methamphetamine. Schedule 3 drugs have a moderate to low potential for dependence, such as certain doses of Benzphetamine, a stimulant that can help with weight loss. Schedule 4 drugs have a low potential for abuse and dependence, such as sedatives like Xanax. Schedule 5 drugs have the lowest potential for abuse and include drugs like Robitussin, which contains ephedrine and is used to relieve coughs.

Legislative Analyst: Alex Krabill

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Fiscal Analyst: Nathan Leaman

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.