

By: Representative Hughes

To: Public Health and Human Services

HOUSE BILL NO. 398

1 AN ACT TO AMEND SECTION 73-25-35, MISSISSIPPI CODE OF 1972,
2 TO PROVIDE THAT CERTAIN CERTIFIED NURSE PRACTITIONERS WITH OVER
3 3,600 HOURS OF CLINICAL PRACTICE SHALL NOT BE REQUIRED TO HAVE A
4 WRITTEN COLLABORATIVE AGREEMENT WITH A PHYSICIAN OR BE REQUIRED TO
5 SUBMIT PATIENT CHARTS TO A PHYSICIAN FOR REVIEW; TO AMEND SECTION
6 73-15-20, MISSISSIPPI CODE OF 1972, TO CONFORM TO THE PRECEDING
7 PROVISIONS; AND FOR RELATED PURPOSES.

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

9 **SECTION 1.** Section 73-25-35, Mississippi Code of 1972, is
10 amended as follows:

11 73-25-35. (1) Registered nurses who are licensed and
12 certified by the Mississippi Board of Nursing as nurse
13 practitioners are not prohibited from such nursing practice, but
14 are entitled to engage therein without a physician's license.

15 (2) If (a) an existing written practice agreement with a
16 collaborating physician terminates as a result of the
17 collaborating physician moving, retiring, no longer needing the
18 services of the nurse practitioner, no longer being qualified to
19 practice, or another cause due to no fault on the part of the
20 nurse practitioner; and (b) the nurse practitioner demonstrates



21 that he or she has made a good faith effort to enter into a new
22 written practice agreement with a collaborating physician and has
23 been unable to do so, then upon approval of the Mississippi Board
24 of Nursing, the certified nurse practitioner may continue to
25 practice in collaboration with an advanced practice registered
26 nurse or nurse practitioner who has been certified and practicing
27 for more than three thousand six hundred (3,600) hours, and the
28 certified nurse practitioner shall not be required to submit
29 patient charts to a physician for review.

30 **SECTION 2.** Section 73-15-20, Mississippi Code of 1972, is
31 amended as follows:

32 73-15-20. (1) **Advanced practice registered nurses.** Any
33 nurse desiring to be certified as an advanced practice registered
34 nurse shall apply to the board and submit proof that he or she
35 holds a current license to practice professional nursing and that
36 he or she meets one or more of the following requirements:

37 (a) Satisfactory completion of a formal post-basic
38 educational program of at least one (1) academic year, the primary
39 purpose of which is to prepare nurses for advanced or specialized
40 practice.

41 (b) Certification by a board-approved certifying body.
42 Such certification shall be required for initial state
43 certification and any recertification as a registered nurse
44 anesthetist, nurse practitioner or nurse midwife. The board may
45 by rule provide for provisional or temporary state certification



46 of graduate nurse practitioners for a period of time determined to
47 be appropriate for preparing and passing the National
48 Certification Examination. Those with provisional or temporary
49 certifications must practice under the direct supervision of a
50 licensed physician or a certified nurse practitioner or certified
51 nurse midwife with at least five (5) years of experience.

52 (c) Graduation from a program leading to a master's or
53 post-master's degree in a nursing clinical specialty area with
54 preparation in specialized practitioner skills.

55 (2) **Rulemaking.** The board shall provide by rule the
56 appropriate requirements for advanced practice registered nurses
57 in the categories of certified registered nurse anesthetist,
58 certified nurse midwife and advanced practice registered nurse.

59 (3) **Collaboration.** Except as otherwise provided in Section
60 73-25-35, an advanced practice registered nurse shall perform
61 those functions authorized in this section within a
62 collaborative/consultative relationship with a dentist or
63 physician with an unrestricted license to practice dentistry or
64 medicine in this state and within an established protocol or
65 practice guidelines, as appropriate, that is filed with the board
66 upon license application, license renewal, after entering into a
67 new collaborative/consultative relationship or making changes to
68 the protocol or practice guidelines or practice site. The board
69 shall review and approve the protocol to ensure compliance with
70 applicable regulatory standards. The advanced practice registered



71 nurse may not practice as an APRN if there is no
72 collaborative/consultative relationship with a physician or
73 dentist and a board-approved protocol or practice guidelines,
74 except as otherwise provided in Section 73-25-35.

75 (4) **Renewal.** The board shall renew a license for an
76 advanced practice registered nurse upon receipt of the renewal
77 application, fees and protocol or practice guidelines. The board
78 shall adopt rules establishing procedures for license renewals.
79 The board shall by rule prescribe continuing education
80 requirements for advanced practice nurses not to exceed forty (40)
81 hours biennially as a condition for renewal of a license or
82 certificate.

83 (5) **Reinstatement.** Advanced practice registered nurses may
84 reinstate a lapsed privilege to practice upon submitting
85 documentation of a current active license to practice professional
86 nursing, a reinstatement application and fee, a protocol or
87 practice guidelines, documentation of current certification as an
88 advanced practice nurse in a designated area of practice by a
89 national certification organization recognized by the board and
90 documentation of at least forty (40) hours of continuing education
91 related to the advanced clinical practice of the nurse
92 practitioner within the previous two-year period. The board shall
93 adopt rules establishing the procedure for reinstatement.

94 (6) **Changes in status.** The advanced practice registered
95 nurse shall notify the board immediately regarding changes in the



96 collaborative/consultative relationship with a licensed physician
97 or dentist. If changes leave the advanced practice registered
98 nurse without a board-approved collaborative/consultative
99 relationship with a physician or dentist, the advanced practice
100 nurse may not practice as an advanced practice registered nurse,
101 except as otherwise provided in Section 73-25-35.

102 (7) **Practice requirements.** The advanced practice registered
103 nurse shall practice:

104 (a) According to standards and guidelines of the
105 National Certification Organization.

106 (b) In a collaborative/consultative relationship with a
107 licensed physician whose practice is compatible with that of the
108 nurse practitioner, except as otherwise provided in Section
109 73-25-35. Certified registered nurse anesthetists may
110 collaborate/consult with licensed dentists. The advanced practice
111 nurse must be able to communicate reliably with a
112 collaborating/consulting physician or dentist while practicing.

113 (c) According to a board-approved protocol or practice
114 guidelines.

115 (d) Advanced practice registered nurses practicing as
116 nurse anesthetists must practice according to board-approved
117 practice guidelines that address pre-anesthesia preparation and
118 evaluation; anesthesia induction, maintenance, and emergence;
119 post-anesthesia care; peri-anesthetic and clinical support
120 functions.



121 (e) Advanced practice registered nurses practicing in
122 other specialty areas must practice according to a board-approved
123 protocol that has been mutually agreed upon by the nurse
124 practitioner and a Mississippi licensed physician or dentist whose
125 practice or prescriptive authority is not limited as a result of
126 voluntary surrender or legal/regulatory order.

127 (f) Each collaborative/consultative relationship shall
128 include and implement a formal quality assurance/quality
129 improvement program which shall be maintained on site and shall be
130 available for inspection by representatives of the board. This
131 quality assurance/quality improvement program must be sufficient
132 to provide a valid evaluation of the practice and be a valid basis
133 for change, if any.

134 (g) Nurse practitioners may not write prescriptions
135 for, dispense or order the use of or administration of any
136 schedule of controlled substances except as contained in this
137 chapter.

138 (8) **Prescribing controlled substances and medications.**
139 Certified nurse midwives and certified nurse practitioners may
140 apply for controlled substance prescriptive authority after
141 completing a board-approved educational program. Certified nurse
142 midwives and certified nurse practitioners who have completed the
143 program and received prescription authority from the board may
144 prescribe Schedules II-V. The words "administer," "controlled
145 substances" and "ultimate user," shall have the same meaning as



146 set forth in Section 41-29-105, unless the context otherwise
147 requires. The board shall promulgate rules governing prescribing
148 of controlled substances, including distribution, record keeping,
149 drug maintenance, labeling and distribution requirements and
150 prescription guidelines for controlled substances and all
151 medications. Prescribing any controlled substance in violation of
152 the rules promulgated by the board shall constitute a violation of
153 Section 73-15-29(1)(f), (k) and (l) and shall be grounds for
154 disciplinary action. The prescribing, administering or
155 distributing of any legend drug or other medication in violation
156 of the rules promulgated by the board shall constitute a violation
157 of Section 73-15-29(1)(f), (k) and (l) and shall be grounds for
158 disciplinary action.

159 **SECTION 3.** This act shall take effect and be in force from
160 and after July 1, 2018.

