45: 11-23

LEGISLATIVE HISTORY CHECKLIST Compiled by the NJ State Law Library

			(Nurse-practitioner)							
NJSA:	45:11-23									
LAWS OF:	1991		CHAPTER: 377							
BILL NO:	S3491									
SPONSOR(S)	Lipman									
DATE INTRODUCE	D: May	13, 1991								
COMMITTEE:	ASSE SENA	MBLY: TE:	 Labor							
AMENDED DURING	PASSAGE:	No Sena	ate Substitute Enacted							
DATE OF PASSAG		MBLY: TE:	January 10, 1992 December 16, 1992							
DATE OF APPROVAL: January 15, 1992										
FOLLOWING STATEMENTS ARE ATTACHED IF AVAILABLE:										
SPONSOR STATEM	ENT :		Yes							
COMMITTEE STAT	EMENT :	ASSEMBLY:	No							
		SENATE:	Yes							
FISCAL NOTE:			No							
VETO MESSAGE:										
MESSAGE ON SIG	NING:		No							
FOLLOWING WERE	PRINTED:									
REPORTS:			Үев							
HEARINGS:			No							
Report mentioned: 974.90 New Jersey. Governor's Commission on Health Care Costs. 159 ReportOctober 1, 1990.										

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1990 [pp17-18]

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See newspaper clippings-attached.

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### SENATE SUBSTITUTE FOR SENATE, No. 3491 SCS

# STATE OF NEW JERSEY

#### ADOPTED DECEMBER 9, 1991

#### Sponsored by Senator LIPMAN

1 AN ACT providing for certification the of nurse 2 practitioners/clinical nurse specialists and granting them 3 prescriptive powers under certain circumstances, and revising parts of the statutory law. 4 5 6 BE IT ENACTED by the Senate and General Assembly of the 7 State of New Jersey: 8 1. (New section) This act shall be known and may be cited as 9 the "Nurse Practitioner/Clinical Nurse Specialist Certification Act." 10 11 2. Section 1 of P.L.1947, c.262 (C.45:11-23) is amended to read as follows: 12 1. As used in this act: 13 14 a. The words "the board" mean the New Jersey Board of Nursing created by this act. 15 b. The practice of nursing as a registered professional nurse is 16 17 defined as diagnosing and treating human responses to actual or potential physical and emotional health problems, through such 18 services as casefinding, health teaching, health counseling, and 19 20 provision of care supportive to or restorative of life and well-being, and executing medical regimens as prescribed by a 21 licensed or otherwise legally authorized physician or dentist. 22 23 Diagnosing in the context of nursing practice means that identification of and discrimination between physical and 24 25 psychosocial signs and symptoms essential to effective execution and management of the nursing regimen. Such diagnostic privilege 26 27 is distinct from a medical diagnosis. Treating means selection and performance of those therapeutic measures essential to the 28 29 effective management and execution of the nursing regimen. 30 Human responses means those signs, symptoms, and processes which denote the individual's health need or reaction to an actual 31 or potential health problem. 32 33 The practice of nursing as a licensed practical nurse is defined 34 as performing tasks and responsibilities within the framework of casefinding; reinforcing the patient and family teaching program 35 36 through health teaching, health counseling and provision of 37 supportive and restorative care, under the direction of a registered 38 nurse or licensed or otherwise legally authorized physician or

39 dentist.

40 The terms "nursing," "professional nursing," and "practical

EXPLANATION---Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined <u>thus</u> is new matter.

nursing" as used in this act shall not be construed to include 1 nursing by students enrolled in a school of nursing accredited or 2 approved by the board performed in the prescribed course of study 3 and training, nor nursing performed in hospitals, institutions and 4 agencies approved by the board for this purpose by graduates of 5 such schools pending the results of the first licensing examination 6 scheduled by the board following completion of a course of study 7 and training and the attaining of age qualification for examination, 8 or thereafter with the approval of the board in the case of each 9 individual pending results of subsequent examinations; nor shall 10 any of said terms be construed to include nursing performed for a 11 period not exceeding 12 months unless the board shall approve a 12 longer period, in hospitals, institutions or agencies by a nurse 13 legally qualified under the laws of another state or country, 14 pending results of an application for licensing under this act, if 15 such nurse does not represent or hold himself or herself out as a 16 nurse licensed to practice under this act; nor shall any of said 17 18 terms be construed to include the practice of nursing in this State by any legally qualified nurse of another state whose engagement 19 20 made outside of this State requires such nurse to accompany and care for the patient while in this State during the period of such 21 22 engagement, not to exceed six months in this State, if such nurse 23 does not represent or hold himself or herself out as a nurse licensed to practice in this State; nor shall any of said terms be 24 construed to include nursing performed by employees or officers of 2526 the United States Government or any agency or service thereof while in the discharge of his or her official duties; nor shall any of 27 28 said terms be construed to include services performed by nurses aides, attendants, orderlies and ward helpers in hospitals, 29 30 institutions and agencies or by technicians, physiotherapists, or medical secretaries, and such duties performed by said persons 31 32 aforementioned shall not be subject to rules or regulations which the board may prescribe concerning nursing; nor shall any of said 33 34 terms be construed to include first aid nursing assistance, or gratuitous care by friends or members of the family of a sick or 35 infirm person, or incidental care of the sick by a person employed 36 primarily as a domestic or housekeeper, notwithstanding that the 37 occasion for such employment may be sickness, if such incidental 38 39 care does not constitute professional nursing and such person does not claim or purport to be a licensed nurse; nor shall any of said 40 41 terms be construed to include services rendered in accordance with the practice of the religious tenets of any well-recognized 42 43 church or denomination which subscribes to the art of healing by prayer. A person who is otherwise qualified shall not be denied 44 licensure as a professional nurse or practical nurse by reason of 45 the circumstances that such person is in religious life and has 46 47 taken a vow of poverty.

48 c. "Homemaker-home health aide" means a person who is 49 employed by a home care services agency and who is performing 3

delegated nursing regimens or nursing tasks delegated through the 1 2 authority of a duly licensed registered professional nurse. "Home 3 care services agency" means home health agencies licensed by the 4 Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et 5 al.), nonprofit homemaker-home health aide agencies, and 6 employment agencies and temporary help services firms regulated 7 by the Director of the Division of Consumer Affairs in the 8 Department of Law and Public Safety and the Attorney General 9 pursuant to [P.L.1951, c.337 (C.34:8-24 et seq.)] P.L.1989, c.331 10 (C.34:8-43 et seq.) and P.L.1960, c.39 (C.56:8-1 et seq.) 11 respectively, which are engaged in the business of procuring or 12 offering to procure employment for homemaker-home health 13 aides, where a fee is exacted, charged or received directly or 14 indirectly for procuring or offering to procure that employment.

<u>d. "Nurse practitioner/clinical nurse specialist" means a person</u>
who holds a certification in accordance with section 8 or 9 of
<u>P.L.</u>, c. (C.) (now pending before the Legislature as this
<u>bill.</u>)

e. "Collaborating physician" means a person licensed to
 practice medicine and surgery pursuant to chapter 9 of Title 45 of
 the Revised Statutes who agrees to work with a nurse
 practitioner/clinical nurse specialist.

Nothing in this act shall confer the authority to a person
licensed to practice nursing to practice another health profession
as currently defined in Title 45 of the Revised Statutes.

26 (cf: P.L.1989, c.98, s.1)

3. Section 2 of P.L.1947, c.262 (C.45:11-24) is amended to read
as follows:

29 2. a. The board; appointment; terms. In addition to the members appointed to represent the interests of the public 30 pursuant to P.L.1971, c.60 as amended by P.L.1977, c.285 31 32 (C.45:1-2.2) the New Jersey Board of Nursing shall consist of 10 members, [seven] six of whom shall be registered professional 33 34 nurses, two of whom shall be licensed practical nurses, one of whom shall be a nurse practitioner/clinical nurse specialist, and 35 36 one of whom shall be an additional public member, all to be appointed by the Governor. Appointments to the board shall be for 37 38 terms of five years or for the unexpired portion of a term in the case of a vacancy for any cause within a term, and until a 39 shall be appointed and qualified. 40 successor In making appointments the Governor shall give due consideration to, but 41 shall not be bound by, recommendations submitted by the various 42 43 nurses' professional associations of this State. Upon notice and 44 hearing, the Governor may remove from office any member of the 45 board for neglect of duty, incompetency, unprofessional or dishonorable conduct. 46

47	b.	Qua	Qualifications			for app	pointi	ment	. <u>The</u>	nurse
48	pract	<u>titioner/</u>	<u>clinical</u>	nur	se s	pecialist n	nemb	oer st	<u>all be a resid</u>	<u>dent of</u>
49	<u>this</u>	<u>Stat</u> e,	shall	be	a	graduate	of	an	accredited	nurse

1 practitioner/clinical nurse specialist program, shall have had at least five years' experience in professional nursing, shall at the 2 3 time of appointment be actively working as a nurse practitioner/clinical nurse specialist, and, except for the member 4 5 first appointed, shall hold a certification as a nurse practitioner/clinical nurse specialist pursuant to P.L. 6 , C. 7 )(now pending before the Legislature as this bill). Each (C. registered professional nurse member of the board shall be a 8 9 citizen of the United States and a resident of this State; shall be a graduate of an accredited school of nursing within the United 10 States; shall be a registered nurse in this State; shall have had at 11 12 least five years' experience in professional nursing following 13 graduation from an accredited school of nursing; and shall at the 14 time of appointment be actively engaged in nursing or work relating thereto. The licensed practical nurse members of the 15 board shall be citizens of the United States and residents of this 16State; shall hold a valid license to practice practical nursing in this 17 18 State; shall have had at least three years' experience in practical nursing; and shall at the time of appointment be actively engaged 19 20 in practical nursing or work related thereto.

c. Oath or affirmation of office. Within 30 days after receipt
of the commission, each appointee shall take, subscribe and file in
the office of the Secretary of State the oath or affirmation
prescribed by law.

d. Duties and powers. The board shall have the following duties 25 and powers: (1) It shall hold annual meetings and such other 26 27 meetings as it may deem necessary at such times and places as the 28 board shall prescribe and a majority of the board including one officer shall constitute a quorum. (2) It shall elect from its 29 30 members and prescribe the duties of president а and secretary-treasurer, each of whom shall serve for one year and 31 32 until a successor is elected. (3) It shall appoint and prescribe the 33 duties of an executive secretary to the board who need not be a 34 member thereof but who shall be a citizen of the United States, a graduate of a college or university with a major in nursing 35 36 education, a registered nurse of this State with at least five years' 37 experience in teaching or administration or both in an accredited 38 school of professional nursing, or have equivalent qualifications as 39 determined by the board. The executive secretary shall hold office during the will and pleasure of the board. (4) It shall employ and 40 41 prescribe the duties of such persons as in its judgment shall be 42 necessary for the proper performance and execution of the duties 43 and powers of the board. (5) It shall determine and pay reasonable 44 compensation and necessary expenses of the executive secretary 45 and all employees of the board. (6) It shall pay to each member of the board the compensation hereinafter provided. (7) It shall have 46 47 a common seal, keep an official record of all its meetings, and through its secretary-treasurer report annually to the Governor 48 49 the work of the board. (8) It shall examine applicants for a license

1 or renewals thereof, issue, renew, revoke and suspend licenses, as 2 hereinafter provided. (9) It shall in its discretion investigate and 3 prosecute all violations of provisions of this act. (10) It shall keep an official record which shall show the name, age, nativity and 4 5 permanent place of residence of each applicant and licensee and 6 such further information concerning each applicant and licensee as 7 the board shall deem advisable. The record shall show also 8 whether the applicant was examined, licensed or rejected under 9 this and any prior act. Copies of any of the entries of the record 10 or of any certificate issued by the board may be authenticated by 11 any member of the board under its seal and when so authenticated 12 shall be evidence in all courts of this State of the same weight and 13 force as the original thereof. For authenticating a copy of any entry or entries contained in its record the board shall be paid a 14 fee of \$3.00, but such authentication, if made at the request of 15 16 any public agency of this or any other jurisdiction, may be without 17 fee. (11) In its discretion it may publish at such times as it shall 18 determine a list of nurses licensed under this act, a list of schools 19 of nursing accredited or approved under this act, and such other 20 information as it shall deem advisable. (12) It shall prescribe 21 standards and curricula for schools of nursing and evaluate and 22 approve courses for affiliation. (13) It shall hear and determine applications for accreditation of schools of professional nursing, 23 24 conduct investigations before and after accreditation of such 25 schools and institutions with which they are affiliated, and issue, 26 suspend or revoke certificates of accreditation as hereinafter 27 provided. (14) It shall approve schools of practical nursing which 28 shall conform to the standards, curricula, and requirements 29 prescribed by the board, and suspend or revoke approval for 30 violations thereof; provided, that this power shall not extend to 31 schools operated by any board of education in this State. (15) It 32 may consult with the Medical Society of New Jersey and the New 33 Jersey Hospital Association with respect to any matter relating to the administration of this act and shall consult with those 34 35 associations with respect to standards and curricula and any change thereof for schools of nursing. (16) It shall issue subpoenas 36 37 for the attendance of witnesses and production of documents at any hearing before the board authorized by this act and any 38 39 member of the board shall administer an oath or affirmation to 40 persons appearing to give testimony at such hearings. (17) It may conduct any investigations, studies of nursing and nursing 41 education and related matters, and prepare and issue such 42 publications as in the judgment of the board will advance the 43 44 profession of nursing and its service to the public. (18) It shall perform all other functions which are provided in this act to be 45 46 performed by it or which in the judgment of the board are necessary or proper for the administration of this act. (19) It shall 47 48 from time to time prescribe rules and regulations not inconsistent with this act. (20) It shall prescribe standards and curricula for 49

homemaker-home health aide education and training programs 1 2 which a homemaker-home health aide shall complete in order to 3 work in this State. (21) It shall review applications to provide 4 homemaker-home health aide training programs and shall issue, 5 suspend or revoke program approval. (22) It shall establish and 6 maintain a registry of all individuals who have successfully 7 completed a homemaker-home health aide training and competency evaluation program. (23) It shall prescribe standards 8 9 and requirements for a competency evaluation program resulting 10 in certification of the homemaker-home health aide, and the 11 renewal, revocation, and suspension of that certification. (24) It shall review applications for homemaker home-health aide 12 13 certification and shall issue, suspend, revoke, or fail to renew certifications and conduct investigations pursuant to the provisions 14 15 of P.L.1978, c.73 (C.45:1-14 et seq.).

e. Compensation. Each member of the board shall receive
\$15.00 per day for each day in which such member is actually
engaged in the discharge of duties and traveling and other
expenses necessarily incurred in the discharge of duties.

20 (cf: P.L.1989, c.98, s.2)

21 4. R.S.45:14–13 is amended to read as follows:

22 45:14-13. No person who is not a registered pharmacist of this 23 State, or an apprentice employed in a pharmacy under the 24 immediate personal supervision of a registered pharmacist, shall compound, dispense, fill or sell prescriptions of physicians, 25 26 dentists, veterinarians, any other medical practitioners, [or], 27 certified nurse midwives or nurse practitioners/clinical nurse 28 specialists, licensed or approved to write prescriptions for drugs 29 and medicines.

30 (cf: P.L.1991, c.97, s.7)

31 5. R.S.45:14–14 is amended to read as follows:

32 45:14-14. The term "prescription" as used in R.S.45:14-13, and 33 R.S.45:14-15 to R.S.45:14-17 means an order for drugs or medicines or combinations or mixtures thereof, written or signed 34 35 by a duly licensed physician, dentist, veterinarian, other medical 36 practitioner [or], a certified nurse midwife or a nurse 37 practitioner/clinical nurse specialist licensed or approved to write prescriptions intended for the treatment or prevention of disease 38 39 in man or animals, and includes orders for drugs or medicines or 40 combinations or mixtures thereof transmitted to pharmacists through word of mouth, telephone, telegraph or other means of 41 42 communication by a duly licensed physician, dentist, veterinarian, 43 other medical practitioner [or], a certified nurse midwife or a 44 nurse practitioner/clinical nurse specialist licensed or approved to 45 write prescriptions intended for the treatment or prevention of 46 disease in man or animals, and such prescriptions received by word 47 of mouth, telephone, telegraph or other means of communication 48 shall be recorded in writing by the pharmacist and the record so 49 made by the pharmacist shall constitute the original prescription

1 to be filed by the pharmacist as provided for in R.S.45:14-15, but 2 no prescription, for any narcotic drug, except as provided in 3 section 15 of P.L.1970, c.226 (C.24:21-15), shall be given or transmitted to pharmacists, in any other manner, than in writing 4 5 signed by the physician, dentist, veterinarian, other medical 6 practitioner [or], certified nurse midwife or nurse 7 practitioner/clinical nurse specialist giving or transmitting the 8~ same, nor shall such prescription be renewed or refilled.

9 (cf: P.L.1991, c.97, s.8)

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6. R.S.45:14–15 is amended to read as follows:

45:14-15. The registered pharmacist compounding, dispensing, 11 12 filling or selling a prescription shall place the original written prescription in a file kept for that purpose for a period of not less 13 14 than five years if such period is not less then two years after the 15 last refilling, and affix to the container in which the prescription 16 is dispensed, a label bearing the name and complete address of the 17 pharmacy or drug store in which dispensed, the brand name or generic name of the product dispensed unless the prescriber states 18 19 otherwise on the original written prescription, the date on which 20 the prescription is recorded in his files, together with the name of 21 the physician, dentist, veterinarian, other medical practitioner 22 [or], certified nurse midwife or nurse practitioner/clinical nurse 23 specialist prescribing it and the directions for the use of the prescription by the patient, as directed on the prescription of the 24 25 physician, dentist, veterinarian, other medical practitioner [or], certified nurse midwife or nurse practitioner/clinical nurse 26 27 specialist licensed or approved to write prescriptions. Everv 28 registered pharmacist who fills or compounds a prescription, or 29 who supervises the filling or compounding or a prescription by a 30 person other than a pharmacist registered in this State, shall place 31 his name or initials on the original prescription or on the label 32 affixed to the container in which the prescription is dispensed or in 33 a book kept for the purpose of recording prescriptions. The [board 34 of pharmacy] Board of Pharmacy or any of its agents is hereby 35 empowered to inspect the prescription files and other prescription 36 records of a pharmacy and to remove from said files and take possession of any original prescription, providing, that the 37 38 authorized agent removing or taking possession of an original 39 prescription shall place in the file from which it was removed a copy certified by said person to be a true copy of the original 40 prescription thus removed; provided further, that the original copy 41 42 shall be returned by the [board of pharmacy] Board of Pharmacy to 43 the file from which it was removed after it has served the purpose 44 for which it was removed.

45 (cf: P.L.1991, c.97, s.9)

46 7. (New section) a. (1) No person shall practice as a nurse
47 practitioner/clinical nurse specialist or present, call or represent
48 himself as a nurse practitioner/clinical nurse specialist unless
49 certified in accordance with sections 8 or 9 of P.L. , c. (C. )

1 (now pending before the Legislature as this bill).

2 (2) Nothing in this act shall be construed to limit, preclude, or 3 otherwise interfere with the practices of other persons licensed by 4 appropriate agencies of the State of New Jersey, provided that 5 such duties are consistent with the accepted standards of the 6 person's profession and the person does not represent himself as a 7 nurse practitioner/clinical nurse specialist.

8 b. No person shall assume, represent himself as, or use the 9 titles or designations "nurse practitioner," "clinical nurse specialist" or "nurse practitioner/clinical nurse specialist" or the 10 abbreviations "N.P.," "C.N.S.," or "N.P./C.N.S." or any other title 11 or designation which indicates or implies that he is a nurse 12 13 practitioner/clinical nurse specialist unless certified pursuant to sections 8 or 9 of P.L. (C. ) (now pending before the 14 , C. 15 Legislature as this bill).

16 8. (New section) a. The New Jersey Board of Nursing may issue
17 a certification as a nurse practitioner/clinical nurse specialist to
18 an applicant who fulfills the following requirements:

19 (1) Is at least 18 years of age;

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(2) Is of good moral character;

(3) Is a registered professional nurse;

(4) Has successfully completed an educational program,
including pharmacology, approved by the board; and

(5) Has passed a written examination approved by the board.
b. In addition to the requirements of subsection a. of this
section, an applicant for renewal of a certification as a nurse
practitioner/clinical nurse specialist shall present satisfactory
evidence that, in the period since the certification was issued or
last renewed, all continuing education requirements have been
completed as required by regulations adopted by the board.

31 c. The board may accept, in lieu of the written examination 32 required by paragraph (5) of subsection a. of this section, proof 33 that an applicant for certification holds a current certification in 34 a state which has standards substantially equivalent to those of 35 this State.

9. (New section) For 180 days following the date procedures
are established by the New Jersey Board of Nursing for applying
for certification under this section, the board may issue a
certification as a nurse practitioner/clinical nurse specialist to an
applicant who fulfills the following requirements:

41 a. Is at least 18 years of age;

42 b. Is of good moral character;

c. Is a registered professional nurse; and

d. Has been certified as a nurse practitioner, clinical nurse
specialist or advanced practice nurse by a national accrediting
organization, which:

- (1) is approved by the board;
  - (2) includes pharmacology in its required curriculum; and
  - (3) requires successful completion of a written

examination, including pharmacology, of all persons awarded its
 certificates.

3 10. (New section) a. In addition to all other tasks which a
4 registered professional nurse may, by law, perform, a nurse
5 practitioner/clinical nurse specialist may manage specific common
6 deviations from wellness and stabilized long-term illnesses by:

(1) initiating laboratory and other diagnostic tests; and

8 (2) prescribing or ordering medications and devices, as 9 authorized by subsections b. and c. of this section.

b. A nurse practitioner/clinical nurse specialist may order
medications and devices in the inpatient setting, subject to the
following conditions:

(1) no controlled dangerous substances may be ordered;

(2) the order is written in accordance with standing orders
or joint protocols developed in agreement between a collaborating
physician and the nurse practitioner/clinical nurse specialist, or
pursuant to the specific direction of a physician;

(3) the nurse practitioner/clinical nurse specialist
authorizes the order by signing his own name, printing the name
and certification number, and printing the collaborating
physician's name;

22 (4) the physician is present or readily available through23 electronic communications;

(5) the charts and records of the patients treated by the 24 nurse practitioner/clinical nurse specialist are reviewed by the 25 collaborating physician and the nurse practitioner/clinical nurse 26 27 specialist within the period of time specified by rule adopted by the State Commissioner of Health pursuant to section 13 of 28 29 P.L. , C. (C. ) (now pending before the Legislature as this bill); and 30

(6) the joint protocols developed by the collaborating
physician and the nurse practitioner/clinical nurse specialist are
reviewed, updated and signed at least annually by both parties.

c. A nurse practitioner/clinical nurse specialist may prescribe
medications and devices in all other medically appropriate
settings, subject to the following conditions:

37 (1) no controlled dangerous substances may be prescribed;

(2) the prescription is written in accordance with standing
orders or joint protocols developed in agreement between a
collaborating physician and the nurse practitioner/clinical nurse
specialist, or pursuant to the specific direction of a physician;

42 (3) the nurse practitioner/clinical nurse specialist writes
43 the prescription on the prescription blank of the collaborating
44 physician, signs his name to the prescription and prints his name
45 and certification number;

46 (4) the prescription is dated and includes the name of the
47 patient and the name, address and telephone number of the
48 collaborating physician;

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(5) the physician is present or readily available through

1 electronic communications;

(6) the charts and records of the patients treated by the 2 3 practitioner/clinical nurse specialist nurse are periodically and reviewed by the collaborating physician the nurse 4 5 practitioner/clinical nurse specialist; and

6 (7) the joint protocols developed by the collaborating 7 physician and the nurse practitioner/clinical nurse specialist are 8 reviewed, updated and signed at least annually by both parties.

9 d. The joint protocols employed pursuant to subsections b. 10 and c. of this section shall conform with standards adopted by the 11 Director of the Division of Consumer Affairs pursuant to section 12 of P.L., c. (C.) (now pending before the Legislature as 13 this bill).

14 11. (New section) In addition to such other powers as it may by
15 law possess, the New Jersey Board of Nursing shall have the
16 following powers and duties;

17 a. To promulgate, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), rules and regulations to 18 19 effectuate the purposes of this act, except for those subjects of rule-making authority allocated to the Director of the Division of 20 21 Consumer Affairs pursuant to section 12 of P.L. , C. (C. ) (now pending before the Legislature as this bill) or to the State 22 23 Commissioner of Health pursuant to section 13 of P.L. . C. ) (now pending before the Legislature as this bill); 24 (C.

b. To evaluate and pass upon the qualifications of candidates
for certification as nurse practitioners/clinical nurse specialists;

c. To evaluate and pass upon national accreditation organizations and the holders of certificates from those organizations as necessary to award certificates pursuant to section 9 of P.L., c. (C.) (now pending before the Legislature as this bill);

32 d. To establish specialty areas of practice for nurse
33 practitioners/clinical nurse specialists;

e. To take disciplinary action, in accordance with P.L.1973,
c.73 (C.45:1-14 et seq.) against a nurse practitioner/clinical nurse
specialist who violates the provisions of this act, any regulation
promulgated thereunder, or P.L.1978, c.78 (C.45:1-14 et seq.);

f. To approve the examination to be taken by candidates for
certification;

40 g. To set standards of professional conduct for nurse
41 practitioners/clinical nurse specialists;

42 h. To set fees for examinations, certification and other 43 services consistent with section 2 of P.L.1974, c.46 (C.45:1-3.2);

44 i. To set standards for and approve continuing education45 programs; and

j. To determine whether the requirements of another state with respect to certification as a nurse practitioner/clinical nurse specialist are substantially equivalent to those of this State in accordance with subsection c. of section 8 of P.L. , c. (C. )

(now pending before the Legislature as this bill).

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2 12. (New section) The Director of the Division of Consumer 3 Affairs in the Department of Law and Public Safety may receive 4 and shall give due consideration to advice from the Board of Nursing and the State Board of Medical Examiners in adopting 5 standards for the joint protocols required by subsection d. of 6 7 (C. ) (now pending before the section 10 of P.L. , C. 8 Legislature as this bill). The standards shall be established by rule adopted by the Director of the Division of Consumer Affairs in 9 10 accordance with the "Administrative Procedure Act," P.L.1968, 11 c.410 (C.52:14B-1 et seq.)

13. (New section) The State Commissioner of Health shall, by 12 rule adopted in accordance with the "Administrative Procedure 13 Act," P.L.1968, c.410 (C.52:14B-1 et seq.), establish the periods of 14 15 time within which the charts and records of the patients treated by the nurse practitioner/clinical nurse specialist in an inpatient 16 17 setting shall be reviewed by the nurse practitioner/clinical nurse 18 specialist and the collaborating physician, as required by paragraph (5) of subsection b. of section 10 of P.L. (C.) (now 19 , C. pending before the Legislature as this bill). 20

21 14. This act shall take effect one year following enactment,
22 except that sections 3, 11, 12 and 13 shall take effect immediately.
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#### STATEMENT

Currently, nurse practitioners are recognized in the medical community but are not State licensed or certified. This substitute provides for a category of nursing practice designated as nurse practitioner/clinical nurse specialist. Under the bill a process for certification of nurse practitioner/clinical nurse specialist is also established.

To be eligible for a certificate as a nurse practitioner/clinical
nurse specialist, an applicant must fulfill the following
requirements:

(1) Is at least 18 years of age;

(2) Is of good moral character;

(3) Is a registered professional nurse;

39 (4) Has successfully completed an educational program,
40 including pharmacology, approved by the New Jersey Board of
41 Nursing; and

42 (5) Has passed a written examination approved by the43 New Jersey Board of Nursing.

In addition to those tasks which may be performed by a registered professional nurse, a nurse practitioner/clinical nurse specialist is authorized in this substitute to manage specific common deviations from wellness and stabilized long-term illnesses by initiating laboratory and other diagnostic tests and by prescribing or ordering medications and devices in accordance with

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1 specific conditions provided in the substitute.

2 This substitute provides that а qualified nurse 3 practitioner/clinical nurse specialist may, in an inpatient setting, order medications and devices if the order is written in accordance 4 5 with standing orders or joint protocols developed in agreement 6 collaborating physician between а and the nurse 7 practitioner/clinical nurse specialist, or pursuant to the specific 8 direction of a physician; the nurse practitioner/clinical nurse 9 specialist signs his name, prints his name and certification number, 10 and prints his collaborating physician's name; the physican is 11 present or readily available through electronic communciations; 12 the charts and records of the patients treated by the nurse 13 practitioner/clinical nurse specialist are reviewed by him and the 14 collaborating physician within a time period to be specified by a 15 rule to be adopted by the Commissioner of Health; and the joint protocols that are developed are reviewed, updated and signed at 16 17 least annually by the collaborating physician and the nurse 18 practitioner/clinical nurse specialist.

19 The substitute also permits a qualified nurse 20 practitioner/clinical nurse specialist to order medications and 21 drugs in all other medically appropriate settings, subject to the 22 following: the prescription is written in accordance with standing 23 orders or joint protocols developed in agreement between a collaborating physician and the nurse practitioner/clinical nurse 24 25 specialist, or pursuant to the specific direction of a physician; the 26 nurse practitioner/clinical nurse specialist writes the prescription 27 on the prescription blank of the collaborating physician and prints his name and certification number; the prescription is dated and 28 29 includes the name, address and telephone number of the 30 collaborating physician; the physician is readily available through 31 electronic communications; the charts and records of patients 32 treated by the nurse practitioner/clinical nurse specialist are 33 periodically reviewed by the collaborating physician and the nurse practitioner/clinical nurse specialist; the joint protocols that are 34 35 developed are reviewed, updated and signed at least annually by the collaborating physician and the nurse practitioner/clinical 36 37 nurse specialist. Furthermore, the joint protocols shall conform to 38 standards adopted by the Director of the Division of Consumer 39 Affairs in the Department of Law and Public Safety.

Also, the substitute specifically prohibits nurse
practioners/clinical nurse specialists from prescribing controlled
dangerous substances.

The substitute also provides pharmacists with the authority to fill prescriptions signed by nurse practioners/clinical nurse specialists. The substitute further provides that one of the members of the New Jersey Board of Nursing shall be a nurse practitioner/clinical nurse specialist.

### SENATE, No. 3491

# STATE OF NEW JERSEY

#### INTRODUCED MAY 13, 1991

#### By Senator LIPMAN

1 AN ACT concerning prescriptive powers for nurse practitioners and nurse midwives, amending R.S.45:14-13, R.S.45:14-14 and 2 R.S.45:14-15, and amending and supplementing P.L.1947, c.262. 3 4 BE IT ENACTED by the Senate and General Assembly of the 5 6 State of New Jersey: 1. (New section) The Legislature recognizes that nursing is a 7 8 dynamic field, the practice of which is continually evolving to include more sophisticated patient care activities. It is the 9 10 intent of the Legislature through this act to provide clear legal authority for functions and procedures which have common 11 12 acceptance and authority; to recognize the existence of 13 overlapping functions between physicians and registered 14 professional nurses; and to recognize that certain professional 15 services can be provided to consumers at a greatly reduced cost 16 without affecting the high professional quality with which these 17 services are currently provided. 18 2. Section 1 of P.L.1947, c.262 (C.45:11-23) is amended to read 19 as follows: 20 1. As used in this act: a. The words "the board" mean the New Jersey Board of 21 22 Nursing created by this act. 23 b. The practice of nursing as a registered professional nurse is defined as diagnosing and treating human responses to actual or 24 25 potential physical and emotional health problems, through such services as casefinding, health teaching, health counseling, and 26 provision of care supportive to or restorative of life and 27 28 well-being, and executing medical regimens as prescribed by a licensed or otherwise legally authorized physician or dentist. 29 30 Diagnosing in the context of nursing practice means that identification of and discrimination between physical and 31 32 psychosocial signs and symptoms essential to effective execution and management of the nursing regimen. [Such diagnostic 33 privilege is distinct from a medical diagnosis.] Treating means 34 selection and performance of those therapeutic measures 35 36 essential to the effective management and execution of the 37 nursing regimen. Human responses means those signs, symptoms, 38 and processes which denote the individual's health need or reaction to an actual or potential health problem. 39 40 The practice of nursing as a licensed practical nurse is defined

EXPLANATION---Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

as performing tasks and responsibilities within the framework of casefinding; reinforcing the patient and family teaching program through health teaching, health counseling and provision of supportive and restorative care, under the direction of a registered nurse or licensed or otherwise legally authorized physician or dentist.

The terms "nursing," "professional nursing," and "practical 7 8 nursing" as used in this act shall not be construed to include 9 nursing by students enrolled in a school of nursing accredited or 10 approved by the board performed in the prescribed course of 11 study and training, nor nursing performed in hospitals, institutions 12 and agencies approved by the board for this purpose by graduates 13 of such schools pending the results of the first licensing examination scheduled by the board following completion of a 14 15 course of study and training and the attaining of age qualification 16 for examination, or thereafter with the approval of the board in 17 the case of each individual pending results of subsequent examinations; nor shall any of said terms be construed to include 18 19 nursing performed for a period not exceeding 12 months unless 20 the board shall approve a longer period, in hospitals, institutions 21 or agencies by a nurse legally qualified under the laws of another 22 state or country, pending results of an application for licensing 23 under this act, if such nurse does not represent or hold himself or 24 herself out as a nurse licensed to practice under this act; nor 25 shall any of said terms be construed to include the practice of 26 nursing in this State by any legally qualified nurse of another 27 state whose engagement made outside of this State requires such 28 nurse to accompany and care for the patient while in this State 29 during the period of such engagement, not to exceed six months 30 in this State, if such nurse does not represent or hold himself or 31 herself out as a nurse licensed to practice in this State; nor shall 32 any of said terms be construed to include nursing performed by 33 employees or officers of the United States Government or any agency or service thereof while in the discharge of his or her 34 35 official duties; nor shall any of said terms be construed to include services performed by nurses aides, attendants, orderlies and 36 37 ward helpers in hospitals, institutions and agencies or by technicians, physiotherapists, or medical secretaries, and such 38 duties performed by said persons aforementioned shall not be 39 subject to rules or regulations which the board may prescribe 40 41 concerning nursing; nor shall any of said terms be construed to 42 include first aid nursing assistance, or gratuitous care by friends 43 or members of the family of a sick or infirm person, or incidental 44 care of the sick by a person employed primarily as a domestic or 45 housekeeper, not withstanding that the occasion for such employment may be sickness, if such incidental care does not 46 constitute professional nursing and such person does not claim or 47 purport to be a licensed nurse; nor shall any of said terms be 48 construed to include services rendered in accordance with the 49

practice of the religious tenets of any well-recognized church or denomination which subscribes to the art of healing by prayer. A person who is otherwise qualified shall not be denied licensure as a professional nurse or practical nurse by reason of the circumstances that such person is in religious life and has taken a vow of poverty.

7 "Homemaker-home health aide" means a person who is C. 8 employed by a home care services agency and who is performing 9 delegated nursing regimens or nursing tasks delegated through the 10 authority of a duly licensed registered professional nurse. "Home care services agency" means home health agencies licensed by 11 the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 12 13 et al.), nonprofit homemaker-home health aide agencies, and employment agencies and temporary help services firms 14 regulated by the Attorney General pursuant to P.L.1951, c.337 15 (C.34:8-24 et seq.) and P.L.1960, c.39 (C.56:8-1 et seq.) 16 17 respectively, which are engaged in the business of procuring or offering to procure employment for homemaker-home health 18 19 aides, where a fee is exacted, charged or received directly or 20 indirectly for procuring or offering to procure that employment.

21 "Nurse practitioner or nurse midwife" means a registered d. 22 professional nurse who through completion of a formal 23 postgraduate nursing education program and national certification in a specialty has demonstrated expertise in a 24 selected clinical area of nursing knowledge and practice. 25

[Nothing in this act shall confer the authority to a person
licensed to practice nursing to practice another health profession
as currently defined in Title 45 of the Revised Statutes.]

29 (cf: P.L.1989, c.98, s.1)

30 3. Section 2 of P.L.1947, c.262 (C.45:11-24) is amended to read
31 as follows:

32 2. a. The board; appointment; terms. In addition to the 33 members appointed to represent the interests of the public 34 pursuant to P.L.1971, c.60 as amended by P.L.1977, c.285 35 (C.45:1-2.2) the New Jersey Board of Nursing shall consist of 10 36 members, [seven] six of whom shall be registered professional 37 nurses, two of whom shall be licensed practical nurses, one of 38 whom shall be a nurse practitioner or nurse midwife in active 39 practice, and one of whom shall be an additional public member, 40 all to be appointed by the Governor. Appointments to the board 41 shall be for terms of five years or for the unexpired portion of a 42 term in the case of a vacancy for any cause within a term, and 43 until a successor shall be appointed and qualified. In making 44 appointments the Governor shall give due consideration to, but 45 shall not be bound by, recommendations submitted by the various 46 nurses' professional associations of this State. Upon notice and 47 hearing, the Governor may remove from office any member of 48 the board for neglect of duty, incompetency, unprofessional or 49 dishonorable conduct.

Qualifications for appointment. Each 1 b. registered professional nurse member of the board shall be a citizen of the 2 3 United States and a resident of this State; shall be a graduate of 4 an accredited school of nursing within the United States; shall be 5 a registered nurse in this State; shall have had at least five years' experience in professional nursing following graduation 6 7 from an accredited school of nursing; and shall at the time of appointment be actively engaged in nursing or work relating 8 9 thereto. The licensed practical nurse members of the board shall be citizens of the United States and residents of this State; shall 10 11 hold a valid license to practice practical nursing in this State; shall have had at least three years' experience in practical 12 13 nursing; and shall at the time of appointment be actively engaged in practical nursing or work related thereto. 14

c. Oath or affirmation of office. Within 30 days after receipt
of the commission, each appointee shall take, subscribe and file
in the office of the Secretary of State the oath or affirmation
prescribed by law.

d. Duties and powers. The board shall have the following 19 duties and powers: (1) It shall hold annual meetings and such 20 21 other meetings as it may deem necessary at such times and places as the board shall prescribe and a majority of the board 22 23 including one officer shall constitute a quorum. (2) It shall elect from its members and prescribe the duties of a president and 24 25 secretary-treasurer, each of whom shall serve for one year and until a successor is elected. (3) It shall appoint and prescribe the 26 27 duties of an executive secretary to the board who need not be a member thereof but who shall be a citizen of the United States, a 28 graduate of a college or university with a major in nursing 29 education, a registered nurse of this State with at least five 30 years' experience in teaching or administration or both in an 31 32 accredited school of professional nursing, or have equivalent qualifications as determined by the board. 33 The executive 34 secretary shall hold office during the will and pleasure of the 35 board. (4) It shall employ and prescribe the duties of such persons 36 as in its judgment shall be necessary for the proper performance 37 and execution of the duties and powers of the board. (5) It shall 38 determine and pay reasonable compensation and necessary 39 expenses of the executive secretary and all employees of the board. (6) It shall pay to each member of the board the 40 compensation hereinafter provided. (7) It shall have a common 41 42 seal, keep an official record of all its meetings, and through its 43 secretary-treasurer report annually to the Governor the work of 44 the board. (8) It shall examine applicants for a license or renewals thereof, issue, renew, revoke and suspend licenses, as 45 hereinafter provided. (9) It shall in its discretion investigate and 46 prosecute all violations of provisions of this act. (10) It shall 47 keep an official record which shall show the name, age, nativity 48 and permanent place of residence of each applicant and licensee 49

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and such further information concerning each applicant and 1 licensee as the board shall deem advisable. The record shall show 2 also whether the applicant was examined, licensed or rejected 3 under this and any prior act. Copies of any of the entries of the 4 record or of any certificate issued by the board may be 5 authenticated by any member of the board under its seal and 6 7 when so authenticated shall be evidence in all courts of this State of the same weight and force as the original thereof. For 8 authenticating a copy of any entry or entries contained in its 9 record the board shall be paid a fee of \$3.00, but such 10 authentication, if made at the request of any public agency of 11 12 this or any other jurisdiction, may be without fee. (11) In its 13 discretion it may publish at such times as it shall determine a list 14 of nurses licensed under this act, a list of schools of nursing 15 accredited or approved under this act, and such other information as it shall deem advisable. (12) It shall prescribe standards and 16 curricula for schools of nursing and evaluate and approve courses 17 18 for affiliation. (13) It shall hear and determine applications for accreditation of schools of professional nursing, 19 conduct 20 investigations before and after accreditation of such schools and 21 institutions with which they are affiliated, and issue, suspend or 22 revoke certificates of accreditation as hereinafter provided. (14) 23 It shall approve schools of practical nursing which shall conform to the standards, curricula, and requirements prescribed by the 24 25 board, and suspend or revoke approval for violations thereof; provided, that this power shall not extend to schools operated by 26 27 any board of education in this State. (15) It may consult with the Medical Society of New Jersey and the New Jersey Hospital 28 Association with respect to any matter relating to the 29 administration of this act and shall consult with those 30 31 associations with respect to standards and curricula and any challenge thereof for schools of nursing. (16) It shall issue 32 subpenas for the attendance of witnesses and production of 33 34 documents at any hearing before the board authorized by this act and any member of the board shall administer an oath or 35 36 affirmation to persons appearing to give testimony at such hearings. (17) It may conduct any investigations, studies of 37 38 nursing and nursing education and related matters, and prepare 39 and issue such publications as in the judgment of the board will advance the profession of nursing and its service to the public. 40 41 (18) It shall perform all other functions which are provided in this 42 act to be performed by it or which in the judgment of the board 43 are necessary or proper for the administration of this act. (19) It 44 shall from time to time prescribe rules and regulations not 45 inconsistent with this act. (20) It shall prescribe standards and 46 curricula for homemaker-home health aide education and training 47 programs which a homemaker-home health aide shall complete in 48 order to work in this State. (21) It shall review applications to 49 provide homemaker-home health aide training programs and shall

1 issue, suspend or revoke program approval. (22) It shall establish 2 and maintain a registry of all individuals who have successfully 3 completed a homemaker-home health aide training and 4 competency evaluation program. (23) It shall prescribe standards and requirements for a competency evaluation program resulting 5 6 in certification of the homemaker-home health aide, and the 7 renewal, revocation, and suspension of that certification. (24) It 8 shall review applications for homemaker home-health aide certification and shall issue, suspend, revoke, or fail to renew 9 10 certifications and conduct investigations pursuant to the provisions of P.L.1978, c.73 (C.45:1-14 et seq.). 11

e. Compensation. Each member of the board shall receive
\$15.00 per day for each day in which such member is actually
engaged in the discharge of duties and traveling and other
expenses necessarily incurred in the discharge of duties.

16 (cf: P.L.1989, c.98, s.2)

17 4. R.S.45:14–13 is amended to read as follows:

18 45:14-13. No person who is not a registered pharmacist of this 19 State, or an apprentice employed in a pharmacy under the 20 immediate personal supervision of a registered pharmacist, shall 21 compound, dispense, fill or sell prescriptions of physicians, 22 dentists, veterinarians [or], any other medical practitioners or 23 <u>nurse practitioners or nurse midwives</u> licensed to write 24 prescriptions for drugs and medicines.

25 (cf: R.S.45:14-13)

26 5. R.S.45:14–14 is amended to read as follows:

The term "prescription" as used in [section] 27 45:14-14. 28 R.S.45:14-13[,] and R.S.45:14-15 to R.S.45:14-17 [of this Title] 29 means an order for drugs or medicines or combinations or mixtures thereof, written or signed by a duly licensed physician, 30 31 dentist, veterinarian [or], other medical practitioner or a nurse practitioner or nurse midwife licensed to write prescriptions 32 33 intended for the treatment or prevention of disease in man or animals, and includes orders for drugs or medicines or 34 35 combinations or mixtures thereof transmitted to pharmacists through word of mouth, telephone, telegraph or other means of 36 communication by a duly licensed physician, dentist, veterinarian 37 [or], other medical practitioner or a nurse practitioner or nurse 38 midwife licensed to write prescriptions intended for 39 the treatment or prevention of disease in man or animals, and such 40 41 prescriptions received by word of mouth, telephone, telegraph or other means of communication shall be recorded in writing by the 42 43 pharmacist and the record so made by the pharmacist shall constitute the original prescription to be filed by the pharmacist, 44 as provided for in [section] R.S.45:14-15 [of this Title], but no 45 prescription, for any narcotic drug, except as provided in 46 47 [section] R.S.24:18-7 [of the Revised Statutes], shall be given or transmitted to pharmacists, in any other manner, than in writing 48 signed by the physician, dentist, veterinarian [or], other medical 49

practitioner or nurse practitioner or nurse midwife giving or
 transmitting the same, nor shall such prescription be renewed or
 refilled.

4 (cf: P.L.1952, c.351, s.2)

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6. R.S.45:14-15 is amended to read as follows:

6 45:14-15. The registered pharmacist compounding, dispensing, filling or selling a prescription shall place the original written 7 8 prescription in a file kept for that purpose for a period of not less 9 than five years if such period is not less than two years after the 10 last refilling, and affix to the container in which the prescription is dispensed, a label bearing the name and complete address of 11 12 the pharmacy or drug store in which dispensed, the brand name or generic name of the product dispensed unless the prescriber 13 states otherwise on the original written prescription, the date on 14 which the prescription was compounded and an identifying 15 16 number under which the prescription is recorded in his files, 17 together with the name of the physician, dentist, veterinarian 18 [or], other medical practitioner or nurse practitioner or nurse ī9 midwife prescribing it and the directions for the use of the 20 prescription by the patient, as directed on the prescription of the 21 physician, dentist, veterinarian [or], other medical practitioner or 22 nurse practitioner or nurse midwife licensed to write 23 registered pharmacist prescriptions. Every who fills or compounds a prescription, or who supervises the filling or 24 compounding of a prescription by a person other than a 25 pharmacist registered in this State, shall place his name or 26 initials on the original prescription or on the label affixed to the 27 container in which the prescription is dispensed or in a book kept 28 for the purpose of recording prescriptions. The [board of 29 pharmacy] Board of Pharmacy or any of its agents is hereby 30 to inspect the prescription files and other 31 empowered 32 prescription records of a pharmacy and to remove from said files 33 and take possession of any original prescription; providing, that 34 the authorized agent removing or taking possession of an original 35 prescription shall place in the file from which it was removed a 36 copy certified by said person to be a true copy of the original 37 prescription thus removed; provided further, that the original 38 copy shall be returned by the [board of pharmacy] Board of 3**9** Pharmacy to the file from which it was removed after it has 40 served the purpose for which it was removed.

41 (cf: P.L.1979, c.146, s.1)

42 7. (New section) A nurse practitioner or nurse midwife who
43 meets qualifications approved by the board and who is authorized
44 by the board's rules and regulations, may:

(1) prescribe drugs, agents, tests and devices not listed in
paragraph (2) of this section, in accordance with protocols
approved by the board;

48 (2) prescribe the following:

49 – non-parenteral antibiotics for middle ear infections, urinary

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tract infections, streptococcal throat infections, otitis externa, 1 2 sexually transmitted diseases and sinusitis; 3 - antifungal and antiparasitic agents; 4 - antihistamines and nasal decongestants; 5 - non-narcotic analgesic-antipyretic medications; 6 non-steroidal anti-inflammatory medications and 7 noncontrolled skeletal muscle relaxants; 8 - non-narcotic expectorants and cough preparations; 9 - non-narcotic gastrointestinal agents for diarrhea, vomiting, 10 constipation and indigestion: - hormonal agents for contraception; 11 12 - antiviral vaccines and tetanus toxoid and routine pediatric 13 immunizations; 14 - vitamins and minerals; - antifungal, antiparasitic, anti-inflammatory and antibiotic 15 16 topical skin and mucous membrane preparations; - enteral feeding supplements; 17 - diagnostic agents and tests, including: tuberculin testing; 18 19 streptococcal testing; laboratory testing, including blood, urine, 20 sputum, vaginal, rectal and wound tests; electrocardiograms; and 21 noninvasive x-rays; 2.2 - therapeutic agents and devices, including: diaphragms, 23 cervical caps, urinary and gastrostomy catheters, 24 anti-spermicidals, condoms, syringes, gauze dressings, tape, nonadherent dressings, elasticized bandages, gauze bandage 25 wraps, povidone-iodine solutions, peroxide solutions, sterile 26 27 water, sterile normal saline solutions, sterile dressing trays, 28 sterile tracheostomy cleaning trays, lubricants, non-colloids, 29 hydrocolloid dressings and pastes, anti-emboli stockings, slings, 30 heel pads, sheepskins pads, urinary incontinence pads, restraints, 31 and ambulatory assist devices; and 32 - colostomy, ureterostomy, ileostomy and urinary drainage 33 devices and collection bags, and sterile preparation trays; 34 (3) make referrals to physicians, dentists and allied health care 35 professionals, as appropriate; and 36 (4) not dispense for profit drugs, agents, tests or devices for 37 which the nurse writes a prescription. 38 Effective January 1, 1996, the provisions of this section shall 39 only apply to a nurse practitioner or nurse midwife who has a 40 master's degree in nursing, except that this requirement shall not apply to a nurse practitioner or nurse midwife who was 41 prescribing drugs, agents, tests and devices in this or another 42 state prior to that date. 43 44 8. This act shall take effect immediately.

#### STATEMENT

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This bill defines a "nurse practitioner or nurse midwife," and

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provides that registered professional nurses who are nurse practitioners or nurse midwives, and who meet qualifications approved by the New Jersey Board of Nursing, may prescribe certain drugs, agents, tests and devices appropriate to their specialty areas, as enumerated in this bill. The bill also provides pharmacists with the authority to fill prescriptions signed by nurse practitioners or nurse midwives.

8 This bill will make certain professional services available to 9 health care consumers at greatly reduced cost without affecting the high quality with which these services are currently 10 provided. The bill is in keeping with the recommendations issued 11 12 by the Governor's Commission on Health Care Costs in its report of October 1, 1990, which specifically called for the increased 13 14 use of non-physician providers "in a variety of service settings." The report noted that: "These professionals have the ability to 15 16 deliver high quality care at much lower cost."

This general concept, and its specific application to nurses' 17 18 prescriptive authority, has received support in other states. For 19 example, the March 1991 issue of the newsletter, State Health 20 Notes, published by the Intergovernmental Health Policy Project 21 at The George Washington University in Washington, D.C., quoted 22 a recent Virginia task force report, Access and Barriers to the 23 Services of Nurse Practitioners, which recommended that nurse 24 practitioners be granted limited authority to prescribe drugs in 25 that state. That report cited "authoritative evidence of the 26 safety, competence, patient acceptance and cost-effectiveness 27 of services provided by all nurse practitioner specialties." The 28 recommendation was approved unanimously by the Virginia Board 29 of Health Professions on January 15, 1991, and the legislature in 30 that state passed legislation (HB 1402) to allow nurse 31 practitioners to prescribe Schedule VI drugs.

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#### **REGULATED PROFESSIONS**

Provides nurse practitioners and nurse midwives with prescriptive
powers appropriate to their specialty areas.

#### STATEMENT TO

### SENATE COMMITTEE SUBSTITUTE FOR SENATE, No. 3491

## STATE OF NEW JERSEY

#### DATED: JUNE 24, 1991

The Senate Labor, Industry and Professions Committee reports favorably a Senate Committee Substitute for Senate Bill No. 3491.

This bill amends the law which provides for the regulation and licensure of nurses to establish the category of nursing practice designated as "nurse practitioner." Under the bill a "nurse practitioner" is defined as a registered professional nurse who has completed a formal postgraduate nursing education program, received national certification in a specialty and demonstrated expertise in a selected clinical area of nursing knowledge and practice. A nurse practitioner who meets qualifications approved by the New Jersey Board of Nursing and is authorized by that board's rules and regulations, may, in an inpatient setting, order medications if the order is administered in accordance with specific physician direction or a joint protocol formulated by a collaborating physician and the nurse practitioner; the prescription states whether it is written pursuant to physician direction or joint protocol; and the nurse practitioner signs his name, prints his name and license number and prints the physician's name. The bill prohibits nurse practitioners from prescribing controlled dangerous substances.

The bill also provides pharmacists with the authority to fill prescriptions signed by nurse practitioners. The bill eliminates from the nursing practices act the current distinction between the diagnostic privilege of registered professional nurses and a medical diagnosis. The bill further provides that one of the registered professional nurses on the New Jersey Board of Nursing must be a nurse practitioner. Lastly, the bill provides that, on or after January 1, 1996, only nurse practitioners who have a master's degree may prescribe drugs pursuant to the provisions of this bill, except that all nurse practitioners who were prescribing drugs in this or another state prior to that date may continue to do so.

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Release: WEDNESDAY JAN. 15, 1992

#### GOVERNOR FLORIO TAKES FURTHER AIM AT RISING HEALTH CARE COST WITH NURSE PRACTITIONERS LAW AND PHYSICIAN ASSISTANTS LAW

Two bills designed to help contain the spiraling health care costs by forcing the system to operate more efficiently were signed into law today by Governor Jim Florio.

One of the measures allows physician assistants to be licensed in the state, making New Jersey the last state in the nation to license physician assistants. The signing of this legislation culminates several years of effort to allow these health care professionals to serve New Jersey patients.

The second bill allows nurse practitioners to prescribe medications when working with a collaborating physician. It makes New Jersey the 39th state to extend this authority to nurse practitioners, who are registered nurses who have completed a post graduate program and received national certification.

"These new laws are about common sense and about making health care more accessible. They're about making our health care system more efficient by containing unnecessary costs," Governor Florio said.

"Before today, physician assistants could graduate from one of the finest training programs in the nation at the University of Medicine and Dentistry of New Jersey, but they would have to leave here and go to any other state when they graduated and wanted to work," Governor Florio said. "That simply doesn't make sense."

Physician assistants are reimbursed by Medicare and are an important resource in caring for the homebound elderly. They also often serve as second assistants in surgery.

The second new law, the Nurse Practitioner Prescribing Act, requires that protocols be established between doctors and nurse practitioners to allow nurse practitioners to prescribe medications.

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