

WEST VIRGINIA LEGISLATURE

2022 REGULAR SESSION

Introduced

House Bill 4111

BY DELEGATES ROHRBACH, D. JEFFRIES, SUMMERS,
REED, G. WARD, BATES, ROWAN, FORSHT, MALLOW, AND
WORRELL

[Introduced January 17, 2022; Referred to the
Committee on Health and Human Resources then the
Judiciary]

1 A BILL to amend and reenact §30-3E-3 of the Code of West Virginia, 1931, as amended; and to
2 amend and reenact §30-7-15a of said code, all relating to clarifying prescriptive authority
3 of physicians assistants and registered professional nurses.

Be it enacted by the Legislature of West Virginia:

ARTICLE 3E. PHYSICIAN ASSISTANTS PRACTICE ACT.

§30-3E-3. Rulemaking.

1 (a) The boards shall propose rules for legislative approval in accordance with the
2 provisions of §29A-3-1 et seq. of this code to implement the provisions of this article, including:
3 (1) The extent to which physician assistants may practice in this state;
4 (2) The extent to which physician assistants may pronounce death;
5 (3) Requirements for licenses and temporary licenses;
6 (4) Requirements for practice notifications;
7 (5) Requirements for continuing education;
8 (6) Conduct of a licensee for which discipline may be imposed;
9 (7) The eligibility and extent to which a physician assistant may prescribe, including: A
10 state formulary classifying those categories of drugs which may not be prescribed by a physician
11 assistant, including, but not limited to, Schedules I and II of the Uniform Controlled Substances
12 Act, antineoplastics, radiopharmaceuticals, and general anesthetics: *Provided*, That a physician
13 assistant ~~or an advanced practice registered nurse~~ may prescribe no more than a three-day
14 supply, without refill, of a drug listed in the Uniform Controlled Substances Act as a Schedule II
15 drug. Drugs listed under Schedule III shall be limited to a 30-day supply without refill. In addition
16 to the above referenced provisions and restrictions and pursuant to a practice notification as set
17 forth in this article, the rules shall permit the prescribing of an annual supply of any drug, with the
18 exception of controlled substances, which is prescribed for the treatment of a chronic condition,
19 other than chronic pain management. For the purposes of this section, a chronic condition is a
20 condition which lasts three months or more, generally cannot be prevented by vaccines, can be

21 controlled but not cured by medication, and does not generally disappear. These conditions, with
22 the exception of chronic pain, include, but are not limited to, arthritis, asthma, cardiovascular
23 disease, cancer, diabetes, epilepsy and seizures, and obesity;

24 (8) A fee schedule; and

25 (9) Any other rules necessary to effectuate the provisions of this article.

26 (b) The boards may propose emergency rules pursuant to §29A-3-1 *et seq.* of this code
27 to ensure conformity with this article.

ARTICLE 7. REGISTERED PROFESSIONAL NURSES.

§30-7-15a. Prescriptive authority for prescription drugs; coordination with Board of Pharmacy; rule-making authority.

1 (a) The board may, in its discretion, authorize an advanced practice registered nurse to
2 prescribe prescription drugs in accordance with this article and all other applicable state and
3 federal laws. An authorized advanced practice registered nurse may write or sign prescriptions or
4 transmit prescriptions verbally or by other means of communication.

5 (b) The board shall promulgate legislative rules in accordance with §29A-3-1 *et seq.* of
6 this code of this code governing the eligibility and extent to which an advanced practice registered
7 nurse may prescribe drugs. ~~Such~~ The rules shall provide, at a minimum, a state formulary
8 classifying those categories of drugs which ~~shall~~ may not be prescribed by advanced practice
9 registered nurse including, but not limited to, Schedules I and II of the Uniform Controlled
10 Substances Act, antineoplastics, radiopharmaceuticals and general anesthetics: Provided, That
11 an advanced practice registered nurse may prescribe no more than a three-day supply, without
12 refill, of a drug listed in the Uniform Controlled Substances Act as a Schedule II drug. Drugs listed
13 under Schedule III shall be limited to a thirty-day supply without refill. In addition to the above
14 referenced provisions and restrictions and pursuant to a collaborative agreement as set forth in
15 §30-7-15b of this code, the rules shall permit the prescribing of an annual supply of any drug, with

16 the exception of controlled substances, which is prescribed for the treatment of a chronic
17 condition, other than chronic pain management. For the purposes of this section, a “chronic
18 condition” is a condition which lasts three months or more, generally cannot be prevented by
19 vaccines, can be controlled but not cured by medication and does not generally disappear. These
20 conditions, with the exception of chronic pain, include, but are not limited to, arthritis, asthma,
21 cardiovascular disease, cancer, diabetes, epilepsy and seizures, and obesity. The prescriber
22 authorized in this section shall note on the prescription the chronic disease being treated.

23 (c) The board may promulgate emergency rules to implement the provisions of this article
24 pursuant to §29A-3-15 of this code.

25 (d) The board shall transmit to the Board of Pharmacy a list of all advanced practice
26 registered nurses with prescriptive authority. The list shall include:

- 27 (1) The name of the authorized advanced practice registered nurse;
28 (2) The prescriber's identification number assigned by the board; and
29 (3) The effective date of prescriptive authority.

NOTE: The purpose of this bill is to clean up the code concerning prescriptive authority of
physicians assistants and advance practice registered nurses.

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