WEST VIRGINIA LEGISLATURE

2024 REGULAR SESSION

Introduced

House Bill 4817

By Delegates Summers, Tully, Worrell, Petitto, Sheedy and Griffith

[Introduced January 16, 2024; Referred
to the Committee on Health and Human Resources]

A BILL to amend and reenact §30-7-5 and §30-7-15b of the Code of West Virginia, 1931, as amended, all relating to updating the practice of nursing.

Be it enacted by the Legislature of West Virginia:

ARTICLE 7. REGISTERED PROFESSIONAL NURSES.

§30-7-5. Schools of nursing.

(a) A nursing program is determined to be board approved if the program is accredited by a national nursing accrediting agency recognized by the United States Department of Education. The accreditation is considered board approved and is exempt from board rules that require ongoing approval if the school or program maintains this accreditation.

(b) ~~By July 1, 2022, all nursing programs~~ A nursing program shall be accredited by a national accrediting agency recognized by the United States Department of Education. A new program ~~created after July 1, 2018,~~ shall have 5 years to obtain accreditation by an accrediting agency recognized by the United States Department of Education.

(c) The board may require information concerning the nursing program to be reported to the board by legislative rule. The requested information shall be consistent with information already being collected by the schools which is required to maintain the program’s accreditation.

(d) The board may provide advice and assistance to a nursing program, including but not limited to those nurses who call about scope of practice issues.

(e) The board shall approve a new nursing program until the program is accredited by a national nursing accrediting agency recognized by the United States Department of Education.

§30-7-15b. Eligibility for prescriptive authority; application; fee; collaborative relationships and agreements.

(a) An advanced practice registered nurse shall be eligible to apply for authorization to prescribe drugs pursuant to section fifteen-a of this article after satisfying the following requirements:

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

(2) Be at least eighteen years of age;

(3) Have completed forty-five contact hours of education in pharmacology ~~and clinical management of drug therapy~~ under a program approved by the board, fifteen hours of which shall have been completed within the two-year period immediately prior to entering into a prerequisite collaborative relationship;

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

(5) Does not have his or her advanced practice registered nursing license, certification or registration in any jurisdiction suspended, limited or revoked; and

(6) Submit a completed ~~notarized~~ application to the board, accompanied by a fee as established by the board by rule.

(b) The board shall authorize an applicant to prescribe prescription drugs under the terms of a collaborative agreement and in accordance with section fifteen-a of this article and applicable legislative rules if the applicant has met the prerequisites of subsection (a) of this section and the following additional prerequisites are satisfied:

(1) The board is satisfied that the collaborating physician is licensed in good standing;

(2) The collaborative agreement is sufficient in form;

(3) The applicant has completed the education requirements; and

(4) The applicant has submitted a completed application on forms developed by the board and paid an application fee established by the board in legislative rule.

(c) A collaborative agreement for a collaborative relationship for prescriptive practice between a physician and an advanced practice registered nurse shall be set forth in writing and include, but not be limited to, the following:

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

(2) Statements describing the individual and shared responsibilities of the advanced practice registered nurse and the collaborating physician;

(3) Periodic and joint evaluation of prescriptive practice; and

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

(d) Verification of a collaborative agreement shall be filed with the board by the advanced practice registered nurse with documentation of completion of the education requirements described in subsection (a) of this section. The board shall forward a copy of the verified agreement to the board through which the collaborative physician is licensed.

(e) The board shall, upon application, authorize an advanced practice registered nurse to prescribe prescription drugs in accordance with section fifteen-a of this article without the further requirement of a collaborative agreement if the applicant has satisfied the following prerequisites:

(1) Has practiced at least three years in a duly-documented collaborative relationship with granted prescriptive authority;

(2) Licensed in good standing with the board; and

(3) Has submitted a completed application on forms developed by the board and paid an application fee established by the board in legislative rule.

(f) Notwithstanding the provisions of subsection (e) of this section, the board may require an advanced practice registered nurse to practice in a collaborative agreement if the board determines, by order arising out of the board’s complaint process, that a collaborative relationship is necessary for the rehabilitation of a licensee or for protection of the public.

NOTE: The purpose of this bill is to update the practice of nursing.

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