

SUBJECT: Removing limit on Schedule II prescriptive authority for APRNs and PAs

COMMITTEE: Public Health — favorable, without amendment

VOTE: 9 ayes — S. Thompson, Wray, Allison, Guerra, Lucio, Ortega, Price, Sheffield, Zedler

1 nay — Frank

1 absent — Coleman

WITNESSES: For — Autumn Spencer, Ascension Texas, Ascension Seton, Ascension Providence, Dell Children's; Matt Boutte, Texas Academy of Physician Assistants; Sharon Hillgartner, Texas Nurse Practitioners; Dianne Lavin, Psychiatric Advanced Practice Nurses of Texas, Texas Nurse Practitioners; (*Registered, but did not testify*: Blake Hutson, AARP Texas; Carrie Kroll, Texas Hospital Association; Dan Finch, Texas Medical Association; Erin Cusack, Texas Nurse Practitioners; Andrew Cates, Texas Nurses Association; and six individuals)

Against — None

BACKGROUND: Occupations Code sec. 157.0511(a) establishes that a physician's authority to delegate the prescribing or ordering of a drug or device to advanced practice registered nurses (APRNs) and physician assistants (PAs) is limited to nonprescription and dangerous drugs and controlled substances to the extent provided by sec. 157.0511(b) and (b-1).

Sec. 157.0511(b) allows physicians to delegate the prescribing or ordering of a Schedule III, IV, or V controlled substance only if:

- the prescription, including a refill, is limited to a 90-day supply;
- the refill is authorized after consultation with the delegating physician and the consultation is noted in the patient's chart; and
- regarding prescriptions for a child younger than two years old, the prescription is made after consultation with the delegating

physician and the consultation is noted in the patient's chart.

Sec. 157.0511(b-1) authorizes physicians to delegate the prescribing or ordering of a Schedule II controlled substance only in a hospital facility-based practice and as part of the care provided to a patient who:

- has been admitted to the hospital for an intended stay of at least 24 hours; or
- is receiving services in the hospital's emergency department.

A physician also may delegate Schedule II prescriptive authority when a patient has executed a written certification of a terminal illness, has elected to receive hospice care, and is receiving hospice treatment from a qualified hospice provider.

Observers have noted that current limitations on APRNs' and PAs' Schedule II prescriptive authority hinder their ability to treat patients with chronic disease, cancer, mental health conditions, and other illnesses in various practice settings. Observers suggest expanding this prescriptive authority to APRNs and PAs would ensure patients had more timely access to care.

DIGEST: HB 2250 would repeal Occupations Code sec. 157.0511(b-1), which limits physicians' delegation of Schedule II prescriptive authority to advanced practice registered nurses and physician assistants to certain circumstances.

The bill would take effect September 1, 2019.