

ASSEMBLY, No. 5459

STATE OF NEW JERSEY

218th LEGISLATURE

INTRODUCED JUNE 6, 2019

Sponsored by:

Assemblywoman SHANIQUE SPEIGHT

District 29 (Essex)

Assemblywoman YVONNE LOPEZ

District 19 (Middlesex)

Assemblyman RAJ MUKHERJI

District 33 (Hudson)

Co-Sponsored by:

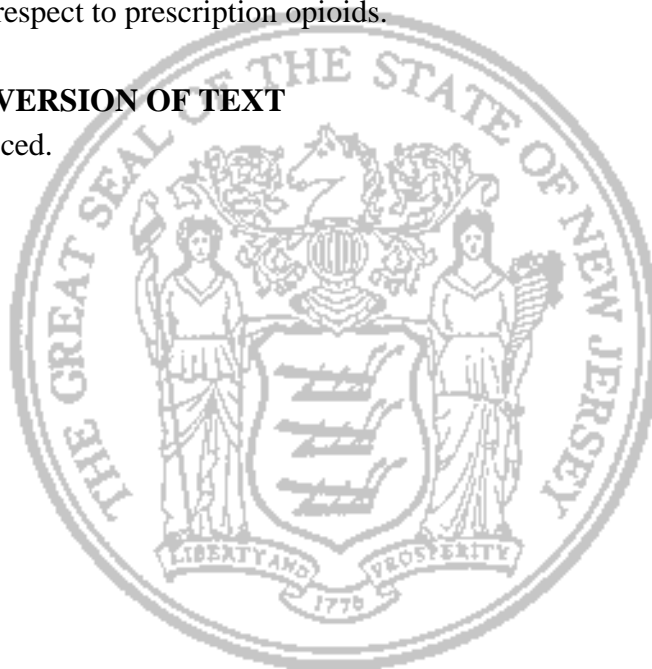
**Assemblywoman Reynolds-Jackson, Assemblyman Armato,
Assemblywomen Vainieri Huttie, Downey, Assemblymen Houghtaling and
Verrelli**

SYNOPSIS

Concerns continuing education requirements for certain health care providers concerning best practices and advances in the care of pregnant women with respect to prescription opioids.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/21/2019)

1 AN ACT concerning continuing education requirements for certain
2 health care providers with respect to prescription opioids and
3 amending various parts of the statutory law.

4
5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7
8 1. Section 3 of P.L.1991, c.97 (C.45:10-19) is amended to read
9 as follows:

10 3. To qualify to prescribe drugs pursuant to section 2 of
11 P.L.1991, c.97 (C.45:10-18), a certified nurse midwife shall have
12 completed 30 contact hours, as defined by the National Task Force
13 on the Continuing Education Unit, in pharmacology or a
14 pharmacology course, acceptable to the board, in an accredited
15 institution of higher education approved by the **[Department]**
16 Office of the Secretary of Higher Education or the board. Such
17 contact hours shall include one credit of educational programs or
18 topics on issues concerning prescription opioid drugs, including
19 responsible prescribing practices, alternatives to opioids for
20 managing and treating pain, and the risks and signs of opioid abuse,
21 addiction, and diversion; and one credit on best practices and
22 advances in the care of pregnant women with respect to prescription
23 opioids.

24 (cf: P.L.2017, c.28, s.14)

25
26 2. Section 10 of P.L.1991, c.377 (C.45:11-49) is amended to
27 read as follows:

28 10. a. In addition to all other tasks which a registered
29 professional nurse may, by law, perform, an advanced practice
30 nurse may manage preventive care services and diagnose and
31 manage deviations from wellness and long-term illnesses, consistent
32 with the needs of the patient and within the scope of practice of the
33 advanced practice nurse, by:

34 (1) initiating laboratory and other diagnostic tests;

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

37 (3) prescribing or ordering treatments, including referrals to
38 other licensed health care professionals, and performing specific
39 procedures in accordance with the provisions of this subsection.

40 b. An advanced practice nurse may order medications and
41 devices in the inpatient setting, subject to the following conditions:

42 (1) the collaborating physician and advanced practice nurse
43 shall address in the joint protocols whether prior consultation with
44 the collaborating physician is required to initiate an order for a
45 controlled dangerous substance;

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.

1 (2) the order is written in accordance with standing orders or
2 joint protocols developed in agreement between a collaborating
3 physician and the advanced practice nurse, or pursuant to the
4 specific direction of a physician;

5 (3) the advanced practice nurse authorizes the order by signing
6 the nurse's own name, printing the name and certification number,
7 and printing the collaborating physician's name;

8 (4) the physician is present or readily available through
9 electronic communications;

10 (5) the charts and records of the patients treated by the advanced
11 practice nurse are reviewed by the collaborating physician and the
12 advanced practice nurse within the period of time specified by rule
13 adopted by the Commissioner of Health pursuant to section 13 of
14 P.L.1991, c.377 (C.45:11-52);

15 (6) the joint protocols developed by the collaborating physician
16 and the advanced practice nurse are reviewed, updated, and signed
17 at least annually by both parties; and

18 (7) the advanced practice nurse has completed six contact hours
19 of continuing professional education in pharmacology related to
20 controlled substances, including pharmacologic therapy, addiction
21 prevention and management~~],and]~~; issues concerning prescription
22 opioid drugs, including responsible prescribing practices,
23 alternatives to opioids for managing and treating pain, and the risks
24 and signs of opioid abuse, addiction, and diversion; and best
25 practices and advances in the care of pregnant women with respect
26 to prescription opioids, in accordance with regulations adopted by
27 the New Jersey Board of Nursing. The six contact hours shall be in
28 addition to New Jersey Board of Nursing pharmacology education
29 requirements for advanced practice nurses related to initial
30 certification and recertification of an advanced practice nurse as set
31 forth in N.J.A.C.13:37-7.2.

32 c. An advanced practice nurse may prescribe medications and
33 devices in all other medically appropriate settings, subject to the
34 following conditions:

35 (1) the collaborating physician and advanced practice nurse
36 shall address in the joint protocols whether prior consultation with
37 the collaborating physician is required to initiate a prescription for a
38 controlled dangerous substance;

39 (2) the prescription is written in accordance with standing orders
40 or joint protocols developed in agreement between a collaborating
41 physician and the advanced practice nurse, or pursuant to the
42 specific direction of a physician;

43 (3) the advanced practice nurse writes the prescription on a New
44 Jersey Prescription Blank pursuant to P.L.2003, c.280 (C.45:14-40
45 et seq.), signs the nurse's own name to the prescription and prints
46 the nurse's name and certification number;

1 (4) the prescription is dated and includes the name of the patient
2 and the name, address, and telephone number of the collaborating
3 physician;

4 (5) the physician is present or readily available through
5 electronic communications;

6 (6) the charts and records of the patients treated by the advanced
7 practice nurse are periodically reviewed by the collaborating
8 physician and the advanced practice nurse;

9 (7) the joint protocols developed by the collaborating physician
10 and the advanced practice nurse are reviewed, updated, and signed
11 at least annually by both parties; and

12 (8) the advanced practice nurse has completed six contact hours
13 of continuing professional education in pharmacology related to
14 controlled substances, including pharmacologic therapy, addiction
15 prevention and management [, and]; issues concerning prescription
16 opioid drugs, including responsible prescribing practices,
17 alternatives to opioids for managing and treating pain, and the risks
18 and signs of opioid abuse, addiction, and diversion; and best
19 practices and advances in the care of pregnant women with respect
20 to prescription opioids, in accordance with regulations adopted by
21 the New Jersey Board of Nursing. The six contact hours shall be in
22 addition to New Jersey Board of Nursing pharmacology education
23 requirements for advanced practice nurses related to initial
24 certification and recertification of an advanced practice nurse as set
25 forth in N.J.A.C.13:37-7.2.

26 d. The joint protocols employed pursuant to subsections b. and
27 c. of this section shall conform with standards adopted by the
28 Director of the Division of Consumer Affairs pursuant to section 12
29 of P.L.1991, c.377 (C.45:11-51) or section 10 of P.L.1999, c.85
30 (C.45:11-49.2), as applicable.

31 e. (Deleted by amendment, P.L.2004, c.122.)

32 f. An attending advanced practice nurse may determine and
33 certify the cause of death of the nurse's patient and execute the
34 death certification pursuant to R.S.26:6-8 if no collaborating
35 physician is available to do so and the nurse is the patient's primary
36 caregiver.

37 (cf: P.L.2017, c.28, s.15)

38

39 3. Section 3 of P.L.1975, c.24 (C.45:12-9.3) is amended to read
40 as follows:

41 3. Fifty credits of continuing professional optometric education
42 shall be required biennially of each New Jersey optometrist holding
43 an active license during the period preceding the established license
44 renewal date. Each credit shall represent or be equivalent to one
45 hour of actual course attendance or in the case of those electing an
46 alternative method of satisfying the requirements of this act shall be
47 approved by the board and certified to the board on forms to be
48 provided for that purpose. Of the 50 credits biennially required

1 under this section, at least one credit shall be for educational
2 programs or topics that concern the prescription of hydrocodone, or
3 the prescription of opioid drugs in general, including responsible
4 prescribing practices, the alternatives to the use of opioids for the
5 management and treatment of pain, and the risks and signs of opioid
6 abuse, addiction, and diversion; and one credit shall be for
7 programs or topics that concern best practices and advances in the
8 care of pregnant women with respect to prescription opioids.

9 (cf: P.L.2017, c.28, s.17)

10
11 4. Section 18 of P.L.2017, c.28 (C.45:6-10.2a) is amended to
12 read as follows:

13 18. a. The New Jersey State Board of Dentistry shall require
14 that the number of credits of continuing dental education required
15 of each person licensed as a dentist, as a condition of biennial
16 registration pursuant to R.S.45:6-10 and section 1 of P.L.1972,
17 c.108 (C.45:1-7), include one credit of educational programs or
18 topics concerning prescription opioid drugs, including responsible
19 prescribing practices, alternatives to opioids for managing and
20 treating pain, and the risks and signs of opioid abuse, addiction, and
21 diversion; and one credit of programs or topics concerning best
22 practices and advances in the care of pregnant women with respect
23 to prescription opioids. The continuing dental education
24 requirement in this subsection shall be subject to the provisions of
25 P.L.1991, c.490 (C.45:6-10.1 et seq.), including, but not limited to,
26 the authority of the board to waive the provisions of this section for
27 a specific individual if the board deems it is appropriate to do so.

28 b. The New Jersey State Board of Dentistry, pursuant to the
29 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
30 seq.), shall adopt such rules and regulations as are necessary to
31 effectuate the purposes of this section.

32 (cf: P.L.2017, c.28, s.18)

33
34 5. Section 19 of P.L.2017, c.28 (C.45:9-7.8) is amended to read
35 as follows:

36 19. a. The State Board of Medical Examiners shall require that
37 the number of credits of continuing medical education required of
38 each person licensed as a physician, as a condition of biennial
39 registration pursuant to section 1 of P.L.1971, c.236 (C.45:9-6.1),
40 include one credit of educational programs or topics concerning
41 prescription opioid drugs, including responsible prescribing
42 practices, alternatives to opioids for managing and treating pain,
43 and the risks and signs of opioid abuse, addiction, and diversion;
44 and one credit of programs or topics concerning best practices and
45 advances in the care of pregnant women with respect to prescription
46 opioids. The continuing medical education requirement in this
47 subsection shall be subject to the provisions of section 10 of
48 P.L.2001, c.307 (C.45:9-7.1), including, but not limited to, the

1 authority of the board to waive the provisions of this section for a
2 specific individual if the board deems it is appropriate to do so.

3 b. The State Board of Medical Examiners, pursuant to the
4 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
5 seq.), shall adopt such rules and regulations as are necessary to
6 effectuate the purposes of this section.
7 (cf: P.L.2017, c.28, s.19)

8
9 6. Section 20 of P.L.2017, c.28 (C.45:9-27.25a) is amended to
10 read as follows:

11 20. a. The State Board of Medical Examiners shall require that
12 the number of credits of continuing medical education required of
13 each person licensed as a physician assistant, as a condition of
14 biennial renewal pursuant to section 4 of P.L.1991, c.378 (C.45:9-
15 27.13), include one credit of educational programs or topics
16 concerning prescription opioid drugs, including responsible
17 prescribing practices, alternatives to opioids for managing and
18 treating pain, and the risks and signs of opioid abuse, addiction, and
19 diversion; and one credit of programs or topics concerning best
20 practices and advances in the care of pregnant women with respect
21 to prescription opioids. The continuing medical education
22 requirement in this subsection shall be subject to the provisions of
23 section 16 of P.L.1991, c.378 (C.45:9-27.25), including, but not
24 limited to, the authority of the board to waive the provisions of this
25 section for a specific individual if the board deems it is appropriate
26 to do so.

27 b. The State Board of Medical Examiners, pursuant to the
28 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
29 seq.), shall adopt such rules and regulations as are necessary to
30 effectuate the purposes of this section.
31 (cf: P.L.2017, c.28, s.20)

32
33 7. Section 21 of P.L.2017, c.28 (C.45:11-26.3) is amended to
34 read as follows

35 21. a. The New Jersey Board of Nursing shall require that the
36 number of credits of continuing education required of each person
37 licensed as a professional nurse or a practical nurse, as a condition
38 of biennial license renewal, include one credit of educational
39 programs or topics concerning prescription opioid drugs, including
40 alternatives to opioids for managing and treating pain and the risks
41 and signs of opioid abuse, addiction, and diversion; and one credit
42 of programs or topics concerning best practices and advances in the
43 care of pregnant women with respect to prescription opioids.

44 b. The board may, in its discretion, waive the continuing
45 education requirement in subsection a. of this section on an
46 individual basis for reasons of hardship, such as illness or disability,
47 retirement of the license, or other good cause. A waiver shall apply

1 only to the current biennial renewal period at the time of board
2 issuance.

3 c. The New Jersey Board of Nursing, pursuant to the
4 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
5 seq.), shall adopt such rules and regulations as are necessary to
6 effectuate the purposes of this section.
7 (cf: P.L.2017, c.28, s.21)

8
9 8. Section 22 of P.L.2017, c.28 (C.45:14-54.1) is amended to
10 read as follows

11 22. a. The New Jersey State Board of Pharmacy shall require
12 that the number of credits of continuing pharmacy education
13 required of each person registered as a pharmacist, as a condition of
14 biennial renewal certification, include one credit of educational
15 programs or topics concerning prescription opioid drugs, including
16 alternatives to opioids for managing and treating pain and the risks
17 and signs of opioid abuse, addiction, and diversion; and one credit
18 of programs or topics concerning best practices and advances in the
19 care of pregnant women with respect to prescription opioids. The
20 continuing pharmacy education requirement in this subsection shall
21 be subject to the provisions of section 15 of P.L.2003, c.280
22 (C.45:14-54), including, but not limited to, the authority of the
23 board to waive the provisions of this section for a specific
24 individual if the board deems it is appropriate to do so.

25 b. The New Jersey State Board of Pharmacy, pursuant to the
26 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
27 seq.), shall adopt such rules and regulations as are necessary to
28 effectuate the purposes of this section.
29 (cf: P.L.2017, c.28, s.22)

30
31 9. This act shall take effect on the 90th day next following the
32 date of enactment.

33

34

35 STATEMENT

36

37 This bill requires certain health care providers to receive training
38 concerning best practices and advances in the care of pregnant
39 women with respect to prescription opioids.

40 Health care professionals who have the authority to prescribe
41 opioid medications, including physicians, physician assistants,
42 dentists, and optometrists (who have limited authority to prescribe
43 only hydrocodone), are currently required to complete one
44 continuing education credit on topics that include responsible
45 prescribing practices, alternatives to opioids for managing and
46 treating pain, and the risks and signs of opioid abuse, addiction, and
47 diversion. This bill provides that the existing requirements for each
48 of these professionals will now include one credit on best practices

1 and advances in the care of pregnant women with respect to
2 prescription opioids. For advance practice nurses who have
3 prescribing authority, their required six contact hours of continuing
4 professional education in pharmacology related to controlled
5 substances will also include one contact hour on best practices and
6 advances in the care of pregnant women with respect to prescription
7 opioids. Certified nurse midwives also will be required to complete
8 one credit of educational programs or topics on best practices and
9 advances in the care of pregnant women with respect to prescription
10 opioids as part of the 30 contact hours in pharmacology training
11 that is required for them to be authorized to prescribe drugs.

12 Health care professionals who do not have prescribing authority
13 but who frequently interact with patients who may be prescribed
14 opioids, including pharmacists, professional nurses, and practical
15 nurses, will also be required to complete one continuing education
16 credit on best practices and advances in the care of pregnant women
17 with respect to prescription opioids.

18 The continuing education credits required under the bill will be
19 part of the professional's regular continuing education credits and
20 will not increase the total number of continuing education credits
21 required.