By: Oliverson, et al. (Senate Sponsor - Perry) H.B. No. 278 (In the Senate - Received from the House April 15, 2019; April 16, 2019, read first time and referred to Committee on Health & Human Services; April 24, 2019, reported favorably by the 1-1 1-2 1-3 1-4 1-5 following vote: Yeas 9, Nays 0; April 24, 2019, sent to printer.)

1 - 71-8 1-9 1-10 1-11 1-12

1-6

COMMITTEE VOTE

1-7		Yea	Nay	Absent	PNV
1-8	Kolkhorst	Х			
1-9	Perry	Х			
1-10	Buckingham	Х			
1-11	Campbell	Х			
1-12	Flores	Х			
1-13	Johnson	Х			
1-14	Miles	Х			
1-15	Powell	Х			
1-16	Seliger	Х			

1-17

1-18

A BILL TO BE ENTITLED AN ACT

1-19 relating to the frequency and location of certain meetings required 1-20 by a prescriptive authority agreement. 1-21

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-22 1-23 SECTION 1. Sections 157.0512(e) and (f), Occupations Code, are amended to read as follows: 1-24

A prescriptive authority agreement must, at a minimum: (e)

1-25 (1)be in writing and signed and dated by the parties 1-26 to the agreement;

(2) state the name, address, and all professional license numbers of the parties to the agreement; 1-27 1-28

1-29 (3) state the nature of the practice, practice 1-30 locations, or practice settings;

1-31 (4) identify the types or categories of drugs or devices that may be prescribed or the types or categories of drugs 1-32 1-33 or devices that may not be prescribed;

1-34 provide a general plan for addressing consultation (5) 1-35 and referral; 1-36

(6) provide a plan for addressing patient emergencies; (7) state the general process for communication and the sharing of information between the physician and the advanced 1-37 1-38 1-39 practice registered nurse or physician assistant to whom the 1-40 physician has delegated prescriptive authority related to the care

1-41 and treatment of patients; if alternate 1-42 (8) physician supervision is to be 1-43 utilized, designate one or more alternate physicians who may:

1 - 44(A) provide appropriate supervision on а 1-45 temporary basis in accordance with the requirements established by 1-46 the prescriptive authority agreement and the requirements of this 1-47 subchapter; and

1-48 participate in the prescriptive authority (B) 1-49 quality assurance and improvement plan meetings required under this 1-50 section; and

1-51 (9) prescriptive describe authority а qualitv assurance and improvement plan and specify methods for documenting 1-52 1-53 the implementation of the plan that include the following:

1-54 (A) chart review, with the number of charts to be reviewed determined by the physician and 1-55 advanced practice 1-56

registered nurse or physician assistant; <u>and</u> (B) [if the agreement is between a physician and an advanced practice registered nurse,] periodic [face-to-face] 1-57 1-58 meetings between the advanced practice registered nurse or 1-59 location determine physician assistant and the physician [at a 1-60 1-61 the physician and the advanced practice registered nurse; and

H.B. No. 278 [(C) if the agreement is between a physician and

a physician assistant, periodíc meetings between the physician 2-2 assistant and the physician]. 2-3 2-4 (f) The periodic [face-to-face] meetings described by 2-5 Subsection (e)(9)(B) must:

(1)include:

(A) the sharing of information relating to patient treatment and care, needed changes in patient care plans, 2-8 2-9 and issues relating to referrals; and (B) discussion of patient care improvement;

2**-**10 2**-**11 [and] 2-12

2-1

2-6

2-7

be documented; and (2)

(3) take place at least once a month in a manner determined by the physician and the advanced practice registered nurse or physician assistant [occur: 2-13 2-14 2**-**15 2**-**16

[(A) except as provided by Paragraph (B): [(i) at least monthly until the third 2-17 anniversary of the date the agreement is executed; and 2-18

[(ii) at least quarterly after the third 2-19 2-20 2-21 anniversary of the date the agreement is executed, with monthly meetings held between the quarterly meetings by means of a remote electronic communications system, including videoconferencing 2-22 technology or the Internet; or 2-23

2-24 [(B) if during the seven years preceding the date 2**-**25 2**-**26 the agreement is executed the advanced practice registered nurse for at least five years was in a practice that included the exercise 2-27 of prescriptive authority with required physician supervision: 2-28

(i) at least monthly until the first anniversary of the date the agreement is executed; and 2-29

of the date the agreement is executed, with monthly 2-30 2-31 anniversary 2-32 meetings held between the quarterly meetings by means of a remote electronic communications system, including videoconferencing 2-33 2-34 technology or the Internet].

SECTION 2. Section 157.0512(f-1), Occupations Code, is 2-35 2-36 repealed.

2-37 SECTION 3. Section 157.0512, Occupations Code, as amended by this Act, applies only to a prescriptive authority agreement entered into on or after the effective date of this Act. An agreement entered into before the effective date of this Act is governed by the law in effect on the date the agreement was entered 2-38 2-39 2-40 2-41 into, and the former law is continued in effect for that purpose. 2-42 2-43 SECTION 4. This Act takes effect September 1, 2019.

2-44

* * * * *