

A 4052 -- Redline

Introduced to Committee Substitute -- Eliminates certain practice restrictions for advanced practice nurses.

Deletions ~~struck~~ · Insertions underlined

A4052 ACS ASSEMBLY COMMITTEE SUBSTITUTE FOR ASSEMBLY, No.

4052 STATE OF NEW JERSEY 222nd LEGISLATURE ~~INTRODUCED~~ADOPTED ~~FEBRUARY~~MARCH 12, 19, 2026 Sponsored by:

Assemblymen Scharfenberger, Kearney, Assemblywomen ~~Fantasia~~Fantasia, Park, Dunn, Reynolds-Jackson, Speight and ~~Park~~Assemblyman Onyema SYNOPSIS Eliminates certain practice restrictions for advanced practice ~~nurses.~~nurses. ~~CURRENT VERSION OF TEXT~~ As introduced.

~~An~~CURRENT ~~Act~~VERSION ~~concerning~~OF ~~advanced~~TEXT ~~practice~~_____ ~~nurses.~~Substitute revising ~~as various~~adopted ~~parts~~by ~~of the~~statutory ~~Assembly~~law, ~~Appropriations~~and ~~Committee.~~supplementing P.L.1991, c.377 (C.45:11-45 et al.).

An Act concerning advanced practice nurses, revising various parts of the statutory law, and supplementing P.L.1991, c.377 (C.45:11-45 et al.).

1. (New ~~section~~)section) The Legislature finds and declares that:

e. ~~Currently,~~As 24 of March 2026, 27 states, the District of Columbia, and two U.S.

~~112, 112~~ (2020), which, among other things, directly and through waivers issued pursuant to its authority, waived existing practice restrictions for advanced practice nurses, including joint protocol and supervision requirements.

112 (2020) and the waivers issued pursuant to the executive order. No adverse incidents were reported during the waiver period involving advanced practice nurses practicing without practice restrictions.

i. Given the need for expanded access to care, it is necessary and appropriate to take steps to remove practice restrictions that serve as a barrier for advanced practice nurses to practice in New Jersey in certain healthcare settings to the full extent of their education, clinical training, and national certification.

b. The practice of nursing as a registered professional nurse is defined as diagnosing and treating human responses to actual or potential physical and emotional health problems, through such services as casefinding, health teaching, health counseling, and provision of care supportive to or restorative of life and well-being, and executing medical regimens as prescribed by a licensed or otherwise legally authorized physician or ~~dentist, dentist.~~ Diagnosing in the context of nursing practice means the identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen within the scope of practice of the registered professional nurse. Such diagnostic privilege is distinct from a medical diagnosis. Treating means selection and performance of those therapeutic measures essential to the effective management and execution of the nursing regimen. Human responses means those signs, symptoms, and processes which denote the individual's health need or reaction to an actual or potential health problem.

Diagnosing in the context of nursing practice means the identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen within the scope of practice of the registered professional nurse. Such diagnostic privilege is distinct from a medical diagnosis. Treating means selection and performance of those therapeutic measures essential to the effective management and execution of the nursing regimen. Human responses means those signs, symptoms, and processes which denote the individual's health need or reaction to an actual or potential health problem.

c. "Homemaker-home health aide" means a person who is employed by a home care services agency and who is performing delegated nursing regimens or nursing tasks delegated through the authority of a duly licensed registered professional nurse. No homemaker-home health aide shall follow a delegated nursing regimen or perform tasks which are delegated unless the homemaker-home health aide is under the supervision of a duly licensed registered professional nurse provided by the home care services agency that directly employs the homemaker-home health ~~aide.~~aide. ~~"Home care services agency" means home health agencies, assisted living residences, comprehensive personal care homes, assisted living programs or alternate family care sponsor agencies licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et al.), nonprofit homemaker-home health aide agencies, and health care service firms regulated by the Director of the Division of Consumer Affairs in the Department of Law and Public Safety and the Attorney General pursuant to P.L.1989, c.331 (C.34:8-43 et seq.) and P.L.1960, c.39 (C.56:8-1 et seq.) respectively, which are engaged in the business of procuring or offering to procure employment for homemaker-home health aides, where a fee may be exacted, charged or received directly or indirectly for procuring or offering to procure that employment.~~ d. "Advanced practice nurse" means a person who holds a certification in accordance with section or 9 of P.L.1991, c.377 (C.45:11-47 or 45:11-48).

"Home e. care "Collaborating services [physician]agency" provider" means a home [person]health physician agencies, assisted living residences, comprehensive personal care homes, assisted living

programs or alternate family care sponsor agencies licensed to practice the medicine Department and of surgery Health pursuant to chapter P.L.1971, §c.136 of (C.26:2H-1 Title et 45 al.), nonprofit homemaker-home health aide agencies, and health care service firms regulated by the Director of the Revised Division Statutes of [who Consumer agrees Affairs to in work the with] Department of or of an Law advanced and practice Public nurse Safety issued and at the certification Attorney General pursuant to section P.L.1989, §c.331 or (C.34:8-43 et seq.) and P.L.1960, c.39 (C.56:8-1 et seq.) respectively, which are engaged in the business of P.L.1991, procuring c.377 or (C.45:11-47) offering to procure employment for homemaker-home health aides, where a fee may be exacted, charged or C.45:11-48) received with directly more or than indirectly 24 for months procuring or 2,400 offering hours to of procure licensed, that active, employment. advanced nursingd. "Advanced practice nurse" means a person who holds a certification in an accordance initial with role, section or 9 of P.L.1991, c.377 (C.45:11-47 or 45:11-48).

f. — e. "APN-Anesthesia" "Collaborating or physician" "Certified means Registered a Nurse person Anesthetist" licensed meansto an practice advanced medicine practice and nurse surgery licensed pursuant to practice chapter as 9 an of APN-Anesthesia Title in 45 accordance of with the requirements Revised established Statutes by who the agrees board to for work licensure with as an APN-Anesthesia-advanced practice nurse.

f. "Primary health care" means preventative, diagnostic, treatment, management, or reassessment services which are provided in a family-centered and community oriented manner to an individual with acute or chronic illness in the areas of family practice, general internal medicine, general pediatrics, general obstetrics, gynecology and reproductive health services, or clinical prevention:

(1) at the time of the individual's initial point of contact with the health care system; or (2) by a health care practitioner who, regardless of the presence or absence of disease, has assumed responsibility for the individual and has an ongoing responsibility to coordinate the individual's medical care.

"Primary health care" includes sick or well care that is provided to any and all age groups, from perinatal and pediatric care to geriatric care.

g. "Reproductive health services" means medical, surgical, counseling, or referral services relating to the human reproductive system.

h. "Behavioral health care" mean procedures or services rendered by a health care practitioner to a patient for the treatment of a mental illness, emotional disorder, or drug or alcohol use disorder.

i. "Higher level of care" means a clinically appropriate level of behavioral health care treatment that provides a greater degree of supervision, intensity, structure, or medical monitoring than the level of care currently being provided to a patient.

P.L.2019, c.48, s.2) — 3. Section 10 of P.L.1991, c.377 (C.45:11-49) is amended to read as follows:

10. a. ~~a. In addition to all other tasks which a registered professional nurse may, by law, perform, an advanced practice nurse may manage preventive care services [and], diagnose, monitor, and manage deviations from wellness and long-term illnesses, and administer local anesthesia and conscious sedation, consistent with the needs of the patient and within the defined scope of practice of [the] that advanced practice nurse, by:~~

In addition to all other tasks which a registered professional nurse may, by law, perform, an advanced practice nurse may manage preventive care services [and], diagnose, monitor, and manage deviations from wellness and long-term illnesses, consistent with the needs of the patient and within the defined scope of practice of [the] that advanced practice nurse, by:

and c.] ~~g-b., c., g., or h.~~

~~or h.~~

~~[and] and~~ (3) prescribing or ordering treatments, including referrals to other licensed health care professionals, and performing specific procedures in accordance with the provisions of this [subsection] ~~section; section.~~

and — (4) ~~b. administering An general advanced anesthesia, practice major nurse regional may anesthesia, order neuraxial medications anesthesia, and minor devices conduction in blocks, within the specific inpatient scope setting, of subject practice to of the APN-Anesthesia, following as conditions: authorized by subsection i. of this section.~~

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

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

and (7) the advanced practice nurse has completed six contact hours of continuing professional education in pharmacology related to controlled substances, including pharmacologic therapy, addiction prevention and management, and issues concerning prescription opioid drugs, including responsible

prescribing practices, alternatives to opioids for managing and treating pain, and the risks and signs of opioid abuse, addiction, and diversion, in accordance with regulations adopted by the New Jersey Board of Nursing. The six contact hours shall be in addition to New Jersey Board of Nursing pharmacology education requirements for advanced practice nurses related to initial certification and recertification of an advanced practice nurse as set forth in ~~N.J.A.C.13:37-7.2.~~ N.J.A.C.13:37-7.2. ~~(Deleted by amendment, P.L. _____, c. _____) (pending before the Legislature as this bill)~~ c. [An advanced practice nurse may prescribe medications and devices in all other medically appropriate settings, subject to the following conditions:

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

and (8) the advanced practice nurse has completed six contact hours of continuing professional education in pharmacology related to controlled substances, including pharmacologic therapy, addiction prevention and management, and issues concerning prescription opioid drugs, including responsible prescribing practices, alternatives to opioids for managing and treating pain, and the risks and signs of opioid abuse, addiction, and diversion, in accordance with regulations adopted by the New Jersey Board of Nursing. The six contact hours shall be in addition to New Jersey Board of Nursing pharmacology education requirements for advanced practice nurses related to initial certification and recertification of an advanced practice nurse as set forth in ~~N.J.A.C.13:37-7.2.~~ N.J.A.C.13:37-7.2. ~~(Deleted by amendment, P.L. _____, c. _____) (pending before the Legislature as this bill)~~ d. [The joint protocols employed pursuant to subsections b.

d. The joint protocols employed pursuant to subsections b.

of this section shall conform with standards adopted by the Director of the Division of Consumer Affairs pursuant to section 12 of P.L.1991, c.377 (C.45:11-51) or section 10 of P.L.1999, c.85 (C.45:11-49.2), as applicable.]applicable. ~~(Deleted by amendment, P.L. _____, c. _____) (pending before the Legislature as this bill)~~ e. (Deleted by amendment, P.L.2004, c.122.) f. An attending advanced practice nurse may determine and certify the cause of death of the nurse's patient and execute the death certification pursuant to R.S.26:6-8 if no [collaborating] physician is available to do so and the nurse is the patient's primary caregiver.

g. e. (Deleted by amendment, P.L.2004, c.122.) f. An attending advanced practice nurse may authorize determine qualifying and patients certify for the medical cause use of death of cannabis the and nurse's issue patient written and instructions execute for the medical death cannabis certification pursuant to registered R.S.26:6-8 qualifying if patients, no subject [collaborating] physician is available to do so and the [following nurse conditions: is the patient's primary caregiver.

(1) g. the [An] collaborating (1) physician Except and as advanced otherwise practice provided nurse shall address in the paragraph joint (2) protocols of whether this prior subsection, consultation an with advanced the practice collaborating nurse physician may is required to authorize a qualifying patient patients for the medical use of cannabis or and issue written instructions for medical cannabis; cannabis to registered qualifying patients, subject to the following conditions:

(2) [(1)] the (a) authorization for the medical collaborating use physician of and cannabis advanced or practice issuance nurse of shall written address instructions in for the cannabis joint is protocols in whether accordance prior consultation with standing the orders collaborating or physician joint is protocols required developed to in authorize agreement between a collaborating qualifying physician patient and for the advanced medical practice use nurse, of cannabis or pursuant issue to written the instructions specific for direction medical of cannabis; a physician;

(3) [(2)] (b) the advanced authorization practice for nurse the signs medical the use nurse's of own cannabis name or to issuance the of authorization written instructions for cannabis is in accordance with standing orders or written joint instruction protocols developed in agreement between a collaborating physician and prints the advanced practice nurse, or pursuant to the nurse's specific name direction and of certification a number; physician;

(4) [(3)] (c) the authorization advanced or practice written nurse instructions signs is the dated nurse's and own includes the name of to the qualifying authorization patient or and written the instruction name, address, and telephone prints number the of nurse's the name collaborating and physician; certification number;

(5) [(4)] (d) the physician authorization or written instruction is present dated or and readily includes available the through name electronic of communications; the qualifying patient and the name, address, and telephone number of the collaborating physician;

(6) [(5)] the (e) charts and records of qualifying patients treated by the advanced physician practice is nurse present are or periodically readily reviewed available by through the electronic collaborating communications; physician and the advanced practice nurse;

(7) [(6)] (f) the joint charts protocols and developed records by of the qualifying collaborating patients physician treated and by the advanced practice nurse are reviewed, periodically updated, reviewed and by signed the at collaborating least physician annually and by the both advanced parties; practice nurse;

and (8) [(7)] (g) the advanced joint practice protocols nurse developed complies by with the]

~~requirements for authorizing qualifying patients for the medical collaborating use of cannabis and for the issuing advanced written practice instructions nurse for are medical reviewed, cannabis updated, established and pursuant signed to at P.L.2009, least c.307 annually (C.24:6I-1 by et both al.), parties; and~~ h. — [(8)] An (h) the advanced practice nurse may comply order with medication the requirements for authorizing qualifying patients for the medical use of cannabis and devices, for subject issuing written instructions for medical cannabis established pursuant to the P.L.2009, following c.307 conditions: (C.24:6I-1 et al.).

~~(1) — (2) The Subject advanced to practice the nurse requirements shall for issue authorizing a qualifying prescription patients on for at the New medical Jersey use Prescription of Blank cannabis in and accordance for with issuing the written provisions instructions of for P.L.2003, medical c.280 cannabis (C.45:14-40 established pursuant to P.L.2009, c.307 (C.24:6I-1 et seq.), al.), and an include advanced on practice the nurse prescription who blank is the authorized to practice advanced practice nurse's nursing signature, within printed a name, population certification focus number, of and family patient or information, individual and across any the other lifespan, information adult required gerontology, pursuant pediatrics, to women's regulations health, adopted or by behavioral the health New shall Jersey be Board exempt of from Nursing; subsections b.~~

~~(2) — The advanced practice nurse shall have completed six contact hours of continuing professional education in pharmacology related to controlled substances, including pharmacologic therapy and addiction c. prevention and management, in accordance with regulations adopted by the New Jersey Board of Nursing. The six contact hours shall be in addition to New Jersey Board of Nursing pharmacology education requirements for advanced practice nurses related to initial certification and recertification of an advanced practice nurse as set forth in regulations adopted by the New Jersey Board of Nursing;~~

~~(3) — The advance practice nurse shall have completed 10 contact hours of continuing this professional section education and in may pharmacology authorize each qualifying biennial patients period, for in accordance with regulations adopted by the New medical Jersey use Board of Nursing. cannabis The and 10 issue contact written hours instructions shall for be medical in cannabis addition to New registered Jersey qualifying Board patients of without Nursing a requirements joint for protocol renewal with of a registered collaborating professional physician, nursing provided license, that: as set forth in regulations adopted by the board;~~

~~and — (4) — (a) — An the advanced practice nurse with has fewer more than 245,000 months or 2,400 hours of licensed, active, advanced nursing practice in an a initial role shall have a joint protocol with a collaborating provider. The joint protocol shall be required only with respect to prescribing medications. An advanced practice nurse subject to this paragraph shall maintain signed and dated copies of all required joint protocols, and shall notify the board applicable that population the focus; requirements of this paragraph have been met.~~

~~i. — (b) Notwithstanding the provisions of any other law or regulation to the contrary, an advanced practice nurse who is an APN-Anesthesia and who has completed either 24 months or 2,400 hours of licensed, active advanced practice nursing practice providing anesthesia primary services health to care patients in an initial role shall be authorized to practice as an APN-Anesthesia to the fullest extent of the authorized scope of practice for APN-Anesthesia permitted by the Board of Nursing, without any requirement for supervision by a licensed physician or dentist behavioral and health without care; any requirement that the APN-Anesthesia enter into joint protocols with a licensed physician or dentist.~~

~~j. — (c) Notwithstanding the provisions of any other law or regulation to the contrary, an advanced practice nurse with is greater not than providing 24 health months care or services 2,400 in hours the area of licensed, general active, obstetrics; advanced nursing practice shall be authorized to practice without a joint protocol with a collaborating provider.~~

~~k. — (d) Any provision of State law or regulation that requires the signature, stamp, verification, affidavit, or endorsement of a physician shall be deemed to require the signature, stamp, verification, affidavit, or endorsement of a physician or an advanced practice nurse, nurse to is the not extent providing consistent elective with aesthetic the or scope cosmetic of services; practice of an advanced practice nurse.~~

~~and — (e) the advanced practice nurse, to the extent the advanced practice nurse is providing behavioral health care services, takes appropriate action to facilitate the timely referral, transfer, or admission to a higher level of care in the event the advanced practice nurse determines, based upon clinical judgment, that a patient requires such level of care. The determination shall be based upon a documented clinical assessment.~~

~~h. (1) Pursuant to this subsection, an advanced practice nurse who is authorized to practice advanced practice nursing within a population focus of family or individual across the lifespan, adult gerontology, pediatrics, women's health, or behavioral health shall be exempt from subsections b. and c.~~

~~of this section and shall be authorized to practice without a joint protocol with a collaborating physician, provided that:~~

~~(a) the advanced practice nurse has more than 5,000 hours of licensed, active, advanced nursing practice in a role with the applicable population focus;~~

(b) the advanced practice nurse is providing primary health care or behavioral health care;

(c) the advanced practice nurse is not providing health care services in the area of general obstetrics;

(d) the advanced practice nurse is not providing elective aesthetic or cosmetic services;

and (e) the advanced practice nurse, to the extent the advanced practice nurse is providing behavioral health care services, takes appropriate action to facilitate the timely referral, transfer, or admission to a higher level of care in the event the advanced practice nurse determines, based upon clinical judgment, that a patient requires such level of care. The determination shall be based upon a documented clinical assessment.

(2) An advanced practice nurse who meets the exemption criteria provided pursuant to paragraph (1) of this subsection may order medications and devices, subject to the following conditions:

(a) the advanced practice nurse shall issue a prescription on a New Jersey Prescription Blank in accordance with the provisions of P.L.2003, c.280 (C.45:14-40 et seq.), and include on the prescription blank the advanced practice nurse's signature, printed name, certification number, and patient information, and any other information required pursuant to regulations adopted by the New Jersey Board of Nursing;

(b) the advanced practice nurse shall have completed 14 contact hours of continuing professional education in pharmacology related to controlled substances, including pharmacologic therapy and addiction prevention and management. Of the 14 contact hours, eight hours shall be in addition to New Jersey Board of Nursing controlled dangerous substance pharmacology education requirements for advanced practice nurses related to initial certification of an advanced practice nurse as set forth in regulations adopted by the New Jersey Board of Nursing at the time of the effective date of P.L. , c. (C.) (pending before the Legislature as this bill);

(c) the advanced practice nurse shall have completed 10 contact hours of continuing professional education in pharmacology each biennial period;

(d) the advanced practice nurse, who is practicing independently, shall be held to the same standard of care as other independent health care practitioners.

(e) the advanced practice nurse shall be required to be covered by malpractice liability insurance, or if such liability coverage is not available, by a letter of credit for at least the minimum amount applicable to a licensed physician. The advanced practice nurse shall notify the Board of Nursing of the name and address of the insurance carrier or the institution issuing the letter of credit;

(f) if the advanced practice nurse does not provide services to beneficiaries of the Medicare program established pursuant to section 1801 of the Social Security Act (42 U.S.C.

s.1395 et seq.), the advanced practice nurse shall, if applicable, prominently display in the advanced practice nurse's office an appropriate notice, and inform, in writing, the Board of Nursing;

and (g) the advanced practice nurse shall immediately notify the Board of Nursing if the advanced practice nurse is:

(i) is incapable, for medical or any other good cause, of discharging the functions of the advanced practice nurse in a manner consistent with the public's health, safety and welfare;

(ii) is indicted or convicted of a crime involving moral turpitude or a crime adversely relating to the advanced practice nurse's practice;

(iii) is named as a defendant or respondent in a civil, criminal or administrative investigation, complaint or judgment involving alleged malpractice, negligence or misconduct relating to the advanced practice nurse's practice;

(iv) is the subject of any voluntary license or certification surrender or any disciplinary action or order by any state or Federal agency, board or commission, including any order of limitation or preclusion;

or (v) fails to maintain or renew any certification which is required by law as a condition of practice or as a condition of license or certification renewal.

i. Any provision of State law or regulation that requires the signature, stamp, verification, affidavit, or endorsement of a physician shall be deemed to require the signature, stamp, verification, affidavit, or endorsement of a physician or an advanced practice nurse, to the extent consistent with the scope of practice of an advanced practice nurse.

P.L.2019, c.153, s.47) ~~4. — 4. Section 1310 of P.L.2017, P.L.1999, c.341 c.85 (C.45:11-49.3) (C.45:10-49.2)~~ is amended to read as follows:

10. No later than the 180th day after the enactment of P.L.1999, c.85, the Director of the Division of Consumer Affairs in the Department of Law and Public Safety shall adopt standards for the joint protocols required by subsection d.

of section 10 of P.L.1991, c.377 (C.45:11-49), which shall apply to the ordering or prescription of controlled dangerous substances by an advanced practice nurse pursuant to that section.

The standards shall be adopted by regulation in accordance with the "Administrative Procedure Act,"

P.L.1968, c.410 (C.52:14B-1 et seq.), provided that such regulation shall not be more restrictive than the provisions of P.L.1991, c.377 (C.45:11-45 et al.).

(cf:

P.L.1999, c.85, s.10) 5. Section 13 of P.L.2017, c.341 (C.45:11-49.3) is amended to read as follows:

s.823. ~~[An[An] When applicable, an~~ advanced practice nurse who is authorized to dispense such drugs may do so regardless of whether the advanced practice nurse's collaborating physician has met the training and registration requirements set forth in subsection (g) of 21 U.S.C.

s.823, provided that the joint protocol established by the advanced practice nurse and the collaborating physician ~~include include~~ the collaborating physician's written approval for the advanced practice nurse to dispense the ~~drugs.] drugs.~~ ~~b. Notwithstanding any other provision of law or regulation to the contrary, an advanced practice nurse [, under the joint protocol established by the advanced practice nurse and the collaborating physician,] may make the determination as to the medical necessity for services for the treatment of substance use disorder, as provided in P.L.2017, c.28 (C.17:48-6nn et al.), and may prescribe such services.~~

b. Notwithstanding any other provision of law or regulation to the contrary, an advanced practice nurse, under the joint protocol established by the advanced practice nurse and the collaborating physician, may make the determination as to the medical necessity for services for the treatment of substance use disorder, as provided in P.L.2017, c.28 (C.17:48-6nn et al.), and may prescribe such services.

c. The provisions of this section regarding joint protocols shall not apply under the circumstances outlined in subsections g.

and h.

of section 10 of P.L.1991, c. 377 (C.45:11-49).

P.L.2017, c.341, s.13) 5. 6. Section 11 of P.L.1991, c.377 (C.45:11-50) is amended to read as follows:

a. To promulgate, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), rules and regulations to effectuate the purposes of [this ~~act, act]~~ P.L.1991, c.377 (C.45:11-45 et al.), except for those subjects of rule-making authority allocated to the Director of the Division of Consumer Affairs pursuant to section 12 of P.L.1991, c.377 (C.45:11-51) or to the Commissioner of Health and Senior Services pursuant to section 13 of P.L.1991, c.377 ~~(C.45:11-52)] (C.45:11-52); P.L.1991, c.377 (C.45:11-45 et al.);~~

k. To limit, restrict, deny, suspend or revoke an advanced practice nurse's licensure, or prescriptive or dispensing authority.

The board may take disciplinary action for:

(1) prescribing, dispensing, administering, or distributing medications in an unsafe manner;

(2) prescribing or distributing medications outside the advanced practice nurse's role or population focus;

or (3) prescribing, ordering, procuring, administering, dispensing and furnishing over the counter, legend and controlled substances outside the applicable state and federal laws or regulations.

P.L.1999, c.85, s.8) 6. 7. (NewSection section) 12 The Board of NursingP.L.1991, andc.377 the(C.45:11-51) Commissioneris ofamended Health shall each adopt, pursuant to theread "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), such rules and regulations as shallfollows: be necessary to implement the provisions of this act. 7. The following sections are repealed:

Section12. The Director of P.L.1999, the c.85Division (C.45:11-49.2); of Consumer Affairs in the Department of Law and Public Safety may receive and shall give due consideration to advice from the Board of Nursing and the State Board of Medical Examiners in adopting standards for the joint protocols required by subsection d.

of Sectionsection 10 of P.L.1991, c.377 (C.45:11-51); (C.45:11-49). The standards shall be established by rule adopted by the Director of the Division of Consumer Affairs in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), provided that such rule shall not be more restrictive than the provisions of P.L.1991, c.377 (C.45:11-45 et al.).

and(cf: Section of P.L.1991, c.377 (C.45:11-52).

P.L.1991, c.377, 8. s.12) This act shall8. takeSection effect13 on the first day of theP.L.1991, fourthc.377 month(C.45:11-52) nextis followingamended theto date read ofas enactmentfollows:

STATEMENT This13. billThe eliminatesCommissioner practice restrictions for advanced practice nurses (APNs), including restrictions that limit the ability of APNsHealth to[and prescribeSenior medicationsServices] andshall, administerby anesthesia, rule andadopted establishesin newaccordance requirementswith forthe APNs"Administrative toProcedure prescribeAct," medications. P.L.1968, c.410

~~The (C.52:14B-1) bill expressly (seq.), provides establish that, notwithstanding the provisions periods of any time other within law which or regulation to the contrary, charts and APN records with greater than 24 months or 2,400 hours of licensed, the active, patients advanced treated nursing by practice will be authorized to practice without a joint protocol with a collaborating provider. With regard to prescribing medications, the bill requires the use of New Jersey Prescription Blanks and satisfying continuing professional education requirements related to pharmacology and prescribing controlled substances. An APN with fewer than 24 months or 2,400 hours of licensed, active, advanced nursing practice nurse in an initial inpatient role setting will shall be permitted reviewed to by prescribe the medication advanced only practice if nurse and formal the joint collaborating protocol physician, with as are required physician by or paragraph experienced (5) advanced of practice subsection nurse b. is in place. of The section bill 10 revises of the P.L.1991, requirements c.377 for (C.45:11-49), APNs provided to authorize patients for medical cannabis and to issue written instructions for medical cannabis, to provide that the such APN rule will shall only not be required more to restrictive meet than the requirements provisions set of forth P.L.1991, under c.377 the (C.45:11-45 "Jake Honig Compassionate Use Medical Cannabis Act," P.L.2009, c.307 (C.24:6I-1 et al.). al.). Those requirements include:~~

~~possessing (cf: active P.L.1999, State c.85, s.9) 9. (New section) Notwithstanding the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, the Board of Nursing and federal the registrations Commissioner of Health shall adopt, immediately upon filing proper notice with the Office of Administrative Law, regulations necessary to prescribe effectuate controlled the dangerous purposes substances, of this act, including the process by which the Board shall verify the number of hours an advanced practice nurse has completed in order for the advanced practice nurse to practice without a joint protocol pursuant to subsections g. being and the h. health care practitioner responsible for the ongoing treatment of a patient's qualifying medical condition; and of complying section with 3 various and other subsections requirements a. for issuing written instructions for medical cannabis.~~

~~The bill further provides that every APN who is an APN-Anesthesia and who b. has completed 24 months or 2,400 hours of licensed, active, advanced nursing practice in an initial role will be authorized to practice as an APN-Anesthesia to the full scope of practice for APNs-Anesthesia, without any requirement for supervision by a licensed physician and without any requirement that the APN-Anesthesia enter into joint protocols with a licensed physician. The bill provides that any State law or regulation that requires the signature or similar endorsement of a physician will be deemed to require the same of an APN, to the extent consistent with an APN's scope of practice.~~

~~of The section bill 10, revises provided and that repeals such certain rules sections shall of not law be that more are restrictive obviated than by the changes provisions made of under P.L.1991, the c.377 bill. (C.45:11-45 et al.).~~

~~Such regulations shall be effective for a period not to exceed 18 months from the date of the filing, at which point the Board of Nursing and the Commissioner of Health may thereafter amend, adopt, or readopt the regulations in accordance with the requirements of P.L.1968, c.410 (C.52:14B-1 et seq.).~~

~~10. This act shall take effect immediately, except that notwithstanding any provision of this P.L. , c. (C.) (pending before the Legislature as this bill) to the contrary, an advanced practice nurse authorized to prescribe, authorize, or order medications and devices without a joint protocol pursuant to Executive Order No.~~

~~13 (2026) shall be authorized to:~~

~~a. if the advanced practice nurse would have 5,000 hours of licensed, active, advanced nursing practice within 12 months of the effective date of this P.L. , c. (C.) (pending before the Legislature as this bill), continue practicing without a joint protocol;~~

~~or b. if the advanced practice nurse would have less than 5,000 hours of licensed, active, advanced nursing practice within 12 months of the effective date of this P.L. , c. (C.) (pending before the Legislature as this bill), continue practicing without a joint protocol for a period of six months after the effective date of P.L. , c. (C.) (pending before the Legislature as this bill), after which the advanced practice nurse shall be required to establish a joint protocol with a collaborating physician pursuant to the provisions of section 10 of P.L.1991, c.377 (C.45:11-49) and any hours of licensed, active, advanced nursing practice without a joint protocol shall be counted towards the requirements for practice without a joint protocol with a collaborating physician pursuant to section of P.L.1991, c.377 (C.45:11-49).~~