

# Regulatory Analysis Form

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IRRC REVIEW COMMISSION

(1) Agency

Department of State, Bureau of Professional and  
Occupational Affairs, State Board of Nursing

(2) I.D. Number (Governor's Office Use)

16A-5117

IRRC Number: 2314

(3) Short Title

Continuing Education

(4) PA Code Cite

49 Pa. Code, §§ 21.332-21.337

(5) Agency Contacts & Telephone Numbers

Primary Contact: Teresa Lazo-Miller, Counsel

State Board of Nursing (717) 783-7200

Secondary Contact: Joyce McKeever, Deputy Chief

Counsel, Department of State (717) 783-7200

(6) Type of Rulemaking (check one)

☐ Proposed Rulemaking

☒ Final Order Adopting Regulation

☐ Policy Statement

(7) Is a 120-Day Emergency Certification  
Attached?

☒ No

☐ Yes: By the Attorney General

☐ Yes: By the Governor

(8) Briefly explain the regulation in clear and nontechnical language.

The regulation details the requirements of continuing education for certified registered nurse practitioners (CRNPs).

(9) State the statutory authority for the regulation and any relevant state or federal court decisions.

By way of Act 206 of 2002, effective February 9, 2003, the General Assembly mandated continuing education for all CRNPs. Section 8.1(c) of the Professional Nursing Law (63 P.S. §218.1(c)) requires 30 hours of continuing education for biennial license renewal, with 16 of the 30 hours in pharmacology for CRNPs with prescriptive authority approval, and authorizes the Board to approve continuing education.

### Regulatory Analysis Form

(10) Is the regulation mandated by any federal or state law or court order, or federal regulation? If yes, cite the specific law, case or regulation, and any deadlines for action.

**The regulation is mandated by amendments made to the Professional Nursing Law by Act 206 of 2002.**

(11) Explain the compelling public interest that justifies the regulation. What is the problem it addresses?

**The regulation sets forth the criteria by which a continuing education course gains Board approval and provides for individual awards of credit to CRNPs who participate in certain activities (*i.e.*, peer-reviewed journal articles).**

(12) State the public health, safety, environmental or general welfare risks associated with nonregulation.

**Nonregulation could lead to CRNPs not obtaining appropriate continuing education and would make it difficult for the Board to enforce continuing education requirements.**

(13) Describe who will benefit from the regulation. (Quantify the benefits as completely as possible and approximate the number of people who will benefit.)

**CRNPs (approximately 5500) will benefit by having the continuing education requirement clarified. Continuing education providers will benefit by having a process by which to obtain approval of their courses.**

### Regulatory Analysis Form

(14) Describe who will be adversely affected by the regulation. (Quantify the adverse effects as completely as possible and approximate the number of people who will be adversely affected.)

**The Board has not identified any groups that will be adversely affected by the regulation.**

(15) List the persons, groups or entities that will be required to comply with the regulation. (Approximate the number of people who will be required to comply.)

**All CRNPs and continuing education providers (unknown number) will be required to comply with the regulation.**

(16) Describe the communications with and input from the public in the development and drafting of the regulation. List the persons and/or groups who were involved, if applicable.

**After the publication of the proposed rulemaking, the Board received encouragement to proceed to final rulemaking from the Pennsylvania Coalition of Nurse Practitioners. The Board received two comments from the House Professional Licensure Committee and numerous comments from IRRC, all of which were addressed in the Preamble to the final rulemaking.**

### Regulatory Analysis Form

(17) Provide a specific estimate of the costs and/or savings to the regulated community associated with compliance, including any legal, accounting or consulting procedures which may be required.

It is estimated that a CRNP can complete the 30-hour requirement for between \$225.00 and \$500.00, depending on the mix of independent study courses and traditional seminars the CRNP chooses to attend. CRNPs with prescriptive authority will likely pay about twice these amounts for the specialized pharmacology courses. It is estimated that a CRNP can take 16 hours of continuing education in advanced pharmacology for \$225.00 or less. For example the National Conference for Nurse Practitioners offers 30.6 hours of pharmacology continuing education courses for \$225. The annual conference is held over 4 days. The Board believes that many CRNPs will not have to pay for courses because their employer will pay them for the courses. For example, the State System of Higher Education has authorized up to \$1,000 for its CRNPs to comply with the continuing education requirement.

The Board believes that CRNPs will be able to meet the continuing education requirement with less expense through distance learning courses that do not generate travel and accommodation expenses.

(18) Provide a specific estimate of the costs and/or savings to local governments associated with compliance, including any legal, accounting or consulting procedures which may be required.

There are minor costs to the Board associated with the approval of continuing education programs offered by providers that are not pre-approved. Requiring organizations that wish to offer courses to pay a fee for the process of approving the courses will offset these costs. The fee regulation related to this rulemaking is being promulgated in a separate package related to fees.

(19) Provide a specific estimate of the costs and/or savings to state government associated with the implementation of the regulation, including any legal, accounting, or consulting procedures which may be required.

Because the Board will conduct the approval of CRNP programs, there is no cost to state government associated with implementation of the regulation. The Board is required to be self-sustaining.

### Regulatory Analysis Form

(20) In the table below, provide an estimate of the fiscal savings and costs associated with implementation and compliance for the regulated community, local government, and state government for the current year and five subsequent years.

	Current FY Year	FY +1 Year	FY +2 Year	FY +3 Year	FY +4 Year	FY +5 Year
<b>SAVINGS:</b>	\$	\$	\$	\$	\$	\$
Regulated Community	NA	NA	NA	NA	NA	NA
Local Government	NA	NA	NA	NA	NA	NA
State Government	NA	NA	NA	NA	NA	NA
Total Savings	NA	NA	NA	NA	NA	NA
<b>COSTS:</b>						
Regulated Community	NA	NA	\$825,000	\$825,000	\$825,000	\$825,000
Local Government	NA	NA	NA	NA	NA	NA
State Government	NA	NA	NA	NA	NA	NA
Total Costs	NA	minimal	\$825,000	\$825,000	\$825,000	\$825,000
<b>REVENUE LOSSES:</b>						
Regulated Community	NA	NA	NA	NA	NA	NA
Local Government	NA	NA	NA	NA	NA	NA
State Government	NA	NA	NA	NA	NA	NA
Total Revenue Losses	NA	NA	NA	NA	NA	NA

(20a) Explain how the cost estimates listed above were derived.

The cost estimates were derived by estimating the cost to comply with continuing education requirements at \$300. Because this expense is biennial, the cost is approximately \$150 per year.

Approximately  $\$150 \times 5500 = \$825,000.00$

## Regulatory Analysis Form

(20b) Provide the past three year expenditure history for programs affected by the regulation.

Program	FY -98-99	FY -99-00	FY -00-01 AS OF 12/31/01	BUDGETED FY 01-02
State Board of Nursing	\$3,922,622.16	\$4,514,839.67	\$4,934,157.00	\$4,827,000.00

(21) Using the cost-benefit information provided above, explain how the benefits of the regulation outweigh the adverse effects and costs.

**As the 30 hour continuing education requirement is set by statute, a cost-benefit analysis of the regulation is not applicable. The public benefit of maintaining current knowledge in the community of CRNPs outweighs the costs of CRNP continuing education programs.**

(22) Describe the nonregulatory alternatives considered and the costs associated with those alternatives. Provide the reasons for their dismissal.

**No nonregulatory alternatives were considered because CRNPs and continuing education providers benefit by having clear rules regarding continuing education.**

(23) Describe alternative regulatory schemes considered and the costs associated with those schemes. Provide the reasons for their dismissal.

**The final rulemaking was developed after considering the public comments on pre-draft and comments of the HPLC and IRRC after publication as proposed rulemaking. In addition, amendments were made to the proposed rulemaking to incorporate the requirements of Act 206 of 2002, and avoid the confusion that would be caused by a recent statutory change followed by a more recent regulatory change.**

### Regulatory Analysis Form

(24) Are there any provisions that are more stringent than federal standards? If yes, identify the specific provisions and the compelling Pennsylvania interest that demands stronger regulation.

**No federal standards apply.**

(25) How does this regulation compare with those of other states? Will the regulation put Pennsylvania at a competitive disadvantage with other states?

**The regulation will not put Pennsylvania at a competitive disadvantage with other states. Twenty-six states, including Maryland and Ohio, require recertification of all CRNPs by a national certifying body, which requires continuing education. Delaware and West Virginia also require continuing education, including pharmacology courses for CRNPs with prescriptive authority. New Jersey requires CRNPs with prescriptive authority to complete 30 credits of continuing education biennially.**

(26) Will the regulation affect existing or proposed regulations of the promulgating agency or other state agencies? If yes, explain and provide specific citations.

**The regulation will not affect existing or proposed regulations of the Board or other state agencies.**

(27) Will any public hearings or informational meetings be scheduled? Please provide the dates, times, and locations, if available.

**The Board considered the comments in open session. No informational meetings are planned.**

## Regulatory Analysis Form

(28) Will the regulation change existing reporting, record keeping, or other paperwork requirements? Describe the changes and attach copies of forms or reports which will be required as a result of implementation, if available.

**The regulation will not change existing reporting requirements. Section 21.283 already requires CRNPs to document compliance with their biennial renewal application. The regulation requires continuing education providers and CRNPs to maintain records for 5 years.**

(29) Please list any special provisions which have been developed to meet the particular needs of affected groups or persons including, but not limited to, minorities, elderly, small businesses, and farmers.

**No particular affected groups were identified.**

(30) What is the anticipated effective date of the regulation; the date by which compliance with the regulation will be required; and the date by which any required permits, licenses or other approvals must be obtained?

**The regulation will become effective on publication of the final-form rulemaking in the Pennsylvania Bulletin.**

(31) Provide the schedule for continual review of the regulation.

**The Board continuously monitors its regulations at its meetings. Meeting dates are available on the Department of State's website, [www.dos.state.pa.us/bpoa](http://www.dos.state.pa.us/bpoa).**



## PROPOSED RULEMAKING

consider application for recertification until 1 year has passed from the date of decertification.

### NEW EMPLOYEE ORIENTATION, SIGNAGE, CERTIFICATION OF COMPLIANCE

#### § 5.221. New employee orientation.

(a) Owners or managers who wish to or are ordered to be in compliance with section 471.1 of the Liquor Code (47 P.S. § 4-471.1) shall provide new employee orientation on or before the first day of the employee's employment as a member of the licensee's alcohol service personnel staff. It is the sole responsibility of the licensee to ensure that either the designated manager or owner conducts the training. Licensees shall maintain new employee orientation records consisting of the name of the employee, date of hire, date of orientation and the name of the individual who trained the employee. Records shall be maintained in the same manner as other business records under section 493(12) of the Liquor Code (47 P.S. § 4-493(12)).

(b) The Board will provide licensees with a checklist and appropriate learning materials.

#### § 5.222. Signage.

(a) Signage will be provided by the Board. A licensee may use other signage provided that it is equivalent in size, number and content to the Board's signage. Signage shall minimally include the following information:

(1) Acceptable forms of identification as described in section 495(a) of the Liquor Code (47 P.S. § 4-495(a)).

(2) Refusal of service to minors and visibly intoxicated patrons under the Liquor Code.

(b) Signage shall be prominently displayed in a conspicuous place that can be observed readily by patrons. The signage shall be continuously posted commencing with the date a licensee seeks to be certified as in compliance with the responsible alcohol service program. A licensee shall be responsible for the posting and maintenance of the signage at all times.

#### § 5.223. Certification of compliance.

(a) Licensees may be certified by the Board in compliance with section 471.1 of the Liquor Code (47 P.S. § 4-471.1). Licensees shall file an application for compliance certification to be provided by the Board. If the requirements of section 471.1 of the Liquor Code are met, a licensee will be issued a certificate of compliance. Issuance of the certificate shall raise a presumption of compliance from the application mailing date, unless rebutted, in any subsequent legal proceeding in which compliance with section 471.1 of the Liquor Code is at issue. Compliance certification shall be valid for 2 years. Licensees may apply for recertification of compliance at least 60 days prior to expiration of current certification.

(b) If a licensee is found to be noncompliant with section 471.1 of the Liquor Code or this subchapter the Board may refuse or revoke certification. If certification is revoked, the Board will not consider application for recertification until 1 year has passed from the date of revocation. Appeals shall be as set forth in 2 Pa.C.S. § 702 (relating to appeals).

(c) The Office of Administrative Law Judge will take administrative notice of the Board's records with regard to questions of certification.

[Pa.B. Doc. No. 02-2057. Filed for public inspection November 15, 2002, 9:00 a.m.]

## STATE BOARD OF NURSING

[49 PA. CODE CH. 21]

### Continuing Education

The State Board of Nursing (Board) proposes to add §§ 21.332—21.337 to read as set forth in Annex A. Sections 21.332—21.337 detail the requirements of continuing education for certified registered nurse practitioners (CRNPs) who are approved to prescribe and dispense drugs in accordance with § 21.283(3) (relating to prescribing and dispensing drugs).

#### Effective Date

The proposed rulemaking will be effective upon final form publication in the *Pennsylvania Bulletin*.

#### Statutory Authority

The proposed rulemaking is authorized under section 2.1(k) of the Professional Nursing Law (63 P.S. § 212.1(k)).

#### Background and Need for the Proposed Rulemaking

On November 17, 2000, the Board and the State Board of Medicine jointly promulgated § 21.283 granting prescriptive authority to CRNPs. Section 21.283(3) provides that "[a] CRNP who has prescriptive authority shall complete at least 16 hours of State Board of Nursing approved continuing education in pharmacology in the 2 years prior to the biennial renewal date of the CRNP certification. The CRNP shall show proof that the CRNP completed the continuing education when submitting a biennial renewal."

Because the Board was designated to approve the continuing education, joint promulgation of the proposed rulemaking is not required. The Board proposes the rulemaking detailing the connection between certification of CRNPs and their completion of continuing education and explaining the processes for submission of proof of completion and approval of programs, courses and providers.

#### Description of Proposed Rulemaking

Section 21.332 (relating to requirement of continuing education) sets forth the regulatory authority for the continuing education requirement and would provide that CRNPs who are on inactive status need not complete the continuing education requirements except for the biennial period immediately preceding a request for reactivation to active status. In addition, if a CRNP's prescriptive authority has been in inactive status for 3 years or longer, prescriptive authority would only be reactivated by completing the requirements of § 21.283(2) or by demonstrating that the person has been practicing with prescriptive authority in another jurisdiction for at least 1 of those 3 years. The other jurisdiction must have requirements for initial approval and continuing education at least equivalent to those in this Commonwealth and the continuing education must have been completed within the last year.

The proposed rulemaking also provides that CRNPs who fail to meet the continuing education requirements may be subject to discipline. Finally, the proposed rulemaking provides that the Board may waive the requirements in cases of certified illness or undue hardship.

Section 21.333 (relating to continuing education subject matter) specifies the subject matter that will meet the requirement in the jointly promulgated regulation that CRNPs complete 16 hours in pharmacology. Section 21.333 provides that pharmacology courses must provide CRNPs with the knowledge and skills to understand the pharmacokinetics and pharmacodynamics of broad drug categories and to analyze the relationship between pharmacologic agents and physiologic/pathologic responses.

Section 21.334(a) (relating to sources of continuing education) contains a list of providers the Board has determined qualify for approval for all continuing education courses they offer. These providers will only be preapproved, however, if they agree to comply with § 21.334(c), which requires the provider to provide CRNPs who complete a course with a certificate of completion that complies with § 21.337(a) (relating to CRNP responsibilities) and agree to maintain records of course attendance for a minimum of 5 years. The section provides for credit for courses offered by other providers if the course is preapproved by the Board. In addition, CRNPs may apply on an individual basis, prior to attendance at a course, for approval for that course. Finally, the proposed rulemaking provides essential details regarding the continuing education requirement, such as granting up to 4 hours credit for serving in a teaching capacity, defining an hour as 50 clock minutes and providing that the Board will determine the number of hours approved for each course that is individually approved by the Board.

Section 21.335 (relating to requirements for courses) sets forth the standards that all courses must meet. Every course must have an established mechanism to measure the quality of the course, have established criteria for selecting and evaluating faculty, have established criteria for the evaluation of each participant who completes the course, provide adequate facilities and instructional materials and be offered by instructors who have suitable qualifications. The qualifications of instructors are further addressed in § 21.336(c) (relating to continuing education course approval).

Section 21.336 sets forth the procedure for approval of continuing education courses offered by providers who are not on the list of preapproved providers in § 21.334.

Section 21.337 lists the responsibilities of CRNPs in maintaining documentation of their completion of required continuing education, places the onus on CRNPs to document their completion of continuing education and provides that falsification of the documentation or prescribing or dispensing drugs without completing the requirements of § 21.332 may result in the withdrawal of prescriptive authority approval, the suspension or revocation of certification as a CRNP, the suspension or revocation of any nursing license and the imposition of a civil penalty.

The Board received four comments when it sent the proposed rulemaking to nursing organizations for predraft comment. The Pennsylvania Coalition of Nurse Practitioners (Coalition) commented that it found the draft proposed rulemaking "to be equitable and consistent with the current rules for prescribing CRNPs . . . [and]

consistent with those of other states." The Coalition noted that the Board might want to address its turnaround time for approving courses under § 21.334. The Board will not set a specific turnaround time in the proposed rulemaking. However, the Board notes that it will appoint a committee to meet monthly and review requests for course approval. The committee will then make a recommendation to the Board on whether to approve the course, reject the course or ask the provider for additional information. As the requests for approval will be reviewed on a monthly basis, the Board anticipates the approval process will proceed in a timely fashion.

The Albert Einstein Medical Center commented that the draft proposed rulemaking "[i]n general is very clear and complete." The Albert Einstein Medical Center suggested that the list of preapproved providers be expanded to include CRNP programs accredited by state boards of nursing in surrounding states. The list of preapproved providers already includes National associations and National credentialing organizations, which are likely to sponsor continuing education programs offered in multiple states. Therefore, the Board does not believe it is necessary to preapprove courses approved by other state boards.

The Pennsylvania State Nurses Association (Association) commented that, overall, it supported the draft proposed rulemaking. The Association made four specific comments. First, the Association noted that the American Nurses Credentialing Center (ANCC) did not "offer" courses because it merely credentialled courses, and suggested the language of § 21.334(a) reflect that some of the preapproved providers were actually providers and others were credentialing organizations. The Board adopted this suggestion. Second, the Association commented that the procedure for CRNPs to obtain approval for up to 4 hours for service as a teacher, speaker and the like, seemed "cumbersome for individuals and the State Board of Nursing" and suggested that the CRNPs simply submit documentation of the 4 hours at the same time they submitted their total of 16 hours at biennial renewal. The Board declines to adopt this suggestion. The proposed rulemaking requires that CRNPs who wish to receive up to 4 credits for this service apply to the Board for approval and that the Board may determine the number of credits it will grant for the service. To permit CRNPs to simply assume that their service would receive credit, and credit for 4 hours, would do a disservice to the CRNP who might find, after the biennial period had expired, that the Board would not accept 4 credits for the CRNP's teaching service. Third, the Association noted that the Board had failed to define an "hour." The Board addressed this issue in § 21.334 by defining an hour as 50 minutes. This is the time period used by the ANCC and most universities. Fourth, the Association asked whether CRNPs who had been on inactive status for 3 years or longer could reactivate their certification to prescribe by taking 45 hours of continuing education. The Board clarified the language in § 21.332(a)(2) to reference the 45-hour course required for initial certification in § 21.283(2), which requires the 45 hours to be taken in an approved CRNP education program or, if outside the program, in a program or programs approved by the Board and the State Board of Medicine. It is unlikely that a continuing education course would be approved for 45 hours; however, if a course met the requirements of the initial credentialing course, the Board and the State Board of Medicine could approve the course.

Finally, the Board received comments from an individual CRNP who raised four concerns. First, the CRNP

inquired why an individual who wished to reactivate a license had to complete 16 hours of continuing education within 1 year prior to the request to reactivate when CRNPs with active licenses have 2 years to complete the 16 hour biennial requirement. The Board purposefully made this distinction to reflect the fact that CRNPs in active practice are continuously learning and updating their knowledge while CRNPs on inactive or retired status do not have the educational benefit of being in active practice. Second, the CRNP noted a typographical error that has been corrected. Third, the CRNP commented that there should be additions made to the list of preapproved continuing education providers and credentialing organizations. The Board finds that its list already includes the major providers and organizations and believes other providers have been given a feasible method for obtaining Board approval. Fourth, the CRNP was concerned that the Board would not have time to approve individual courses submitted by a CRNP. The Board will appoint a committee to meet monthly and review requests for continuing education credit. The Board is confident that CRNPs can submit their requests in advance of the program being offered and the Board will have time to act on requests that are timely submitted.

*Compliance with Executive Order 1996-1, "Regulatory Review and Promulgation"*

The Board sent this proposed rulemaking to numerous nursing associations and hospital systems as required under the directives of Executive Order 1996-1. These organizations were: American Association of Neuroscience Nurses, Emergency Nurses Association, GPC—Oncology Nursing Society, The Hospital and Healthsystem Association of Pennsylvania, Intravenous Nurse Society, Licensed Practical Nurses Association of Pennsylvania, Pennsylvania Association of Home Health Agencies, Pennsylvania Association of Private School Administrators, Pennsylvania Association of Non-Profit Homes for the Aging, Pennsylvania Association of Nurse Anesthetists, Pennsylvania Association of Practical Nursing Program Administrators, Pennsylvania Coalition of Nurse Practitioners, Pennsylvania College of Associate Degree Nursing, Pennsylvania Council of Operating Room Nurses, Pennsylvania Department of Health—Bureau of CH Systems, Pennsylvania Health Care Association, Pennsylvania Higher Education Nursing Schools Association, Pennsylvania League for Nursing, Inc., Pennsylvania Organization of Nurse Leaders, Pennsylvania Society of Gastroenterology Nurses and Associates, Pennsylvania State Nurses Association, School Nurse Section, Southwestern Pennsylvania Organization for Nurse Leaders, Pennsylvania Medical Society, Nurses of Pennsylvania, Pennsylvania Association of School Nurses and Practitioners, Pennsylvania Nurses Association and Professional Nursing Resources, Inc. In addition, the Board considered the impact the proposed rulemaking would have on the regulated community and on public safety and welfare. The Board finds that the proposed rulemaking addresses a compelling public interest as described in this Preamble and otherwise complies with Executive Order 1996-1.

*Fiscal Impact and Paperwork Requirements*

The proposed rulemaking will have no adverse fiscal impact on the Commonwealth or its political subdivisions. The proposed rulemaking will impose no additional paperwork requirements upon the Commonwealth, political subdivisions or the private sector.

*Sunset Date*

The Board continuously monitors the cost effectiveness of its regulations. Therefore, no sunset date has been assigned.

*Regulatory Review*

Under section 5(a) of the Regulatory Review Act (71 P. S. § 745.5(a)), on October 31, 2002, the Board submitted a copy of this proposed rulemaking to the Independent Regulatory Review Commission (IRRC) and the Chairpersons of the Senate Consumer Protection and Professional Licensure Committee and the House Professional Licensure Committee. In addition to submitting the proposed rulemaking, the Board has provided IRRC and the Committees with a copy of a detailed Regulatory Analysis Form prepared by the Board in compliance with Executive Order 1996-1. A copy of this material is available to the public upon request.

Under section 5(g) of the Regulatory Review Act, if IRRC has objections to any portion of the proposed rulemaking, it will notify the Board within 10 days of the close of the Committees' review period. The notification shall specify the regulatory review criteria that have not been met by the portion of the proposed rulemaking to which an objection is made. The Regulatory Review Act specifies detailed procedures for review, prior to final publication of the rulemaking, by the Board, the General Assembly and the Governor of objections raised.

*Public Comment*

Interested persons are invited to submit written comments, suggestions or objections regarding this proposed rulemaking to Ann Steffanic, Board Administrator, State Board of Nursing, P. O. Box 2649, Harrisburg, PA 17105-2649, [www.dos.state.pa.us](http://www.dos.state.pa.us), within 30 days following publication of this proposed rulemaking in the *Pennsylvania Bulletin*.

K. STEPHEN ANDERSON, CRNA,  
Chairperson

Fiscal Note: 16A-5117. No fiscal impact; (8) recommends adoption.

Annex A

TITLE 49. PROFESSIONAL AND VOCATIONAL  
STANDARDS

PART I. DEPARTMENT OF STATE

Subpart A. PROFESSIONAL AND OCCUPATIONAL  
AFFAIRS

CHAPTER 21. STATE BOARD OF NURSING

Subchapter C. CERTIFIED REGISTERED NURSE  
PRACTITIONERS

CONTINUING EDUCATION

§ 21.332. Requirement of continuing education.

(a) A certified registered nurse practitioner approved to prescribe and dispense drugs under §§ 21.283—21.287 and §§ 18.53—18.57 shall comply with this section and §§ 21.333—21.337.

(1) An individual who places his license and certification on inactive status, or who notifies the Board that all collaborative agreements have expired, is not required to meet the continuing education requirements as outlined in this section and §§ 21.333—21.337, except to the extent that, upon application for reactivation of the license and certification and authorization to prescribe and dispense, the individual shall be required to show proof of continuing education for the biennial period

immediately preceding the request for reactivation of the certification and authority to prescribe and dispense drugs.

(2) An individual whose prescriptive authority approval has been in an inactive status for 3 years or longer may reactivate the prescriptive authority approval by meeting one of the following conditions:

(i) Complete the requirement in § 21.283(2) (relating to prescribing and dispensing drugs) by taking at least 45 hours of course work in advanced pharmacology.

(ii) Provide evidence to the Board that the applicant has practiced as a certified registered nurse practitioner with prescriptive authority in another jurisdiction which prescriptive authority is equivalent to that in this Commonwealth for at least 1 of the last 3 years, and, as a condition for continued practice in that jurisdiction, has completed continuing education that is substantially equivalent to the requirements of § 21.283(3), within 1 year prior to the request for reactivation of prescriptive authority.

(b) Continuing education requirements shall be completed each biennial cycle.

(1) An applicant for biennial renewal or reactivation of prescriptive authority approval is required to complete, during the 2 years preceding renewal or reactivation, a minimum of 16 hours of continuing education in pharmacology. Completion of a course described in § 21.283(2) shall satisfy the continuing education requirement for the biennial renewal period in which it is completed.

(2) A person failing to meet the continuing education requirements for a biennial renewal period will have his prescriptive authority approval withdrawn and will be prohibited from prescribing and dispensing drugs until the educational criteria are met, prescriptive authority approval is renewed and any fees and penalties are properly paid.

(3) The Board may waive the requirements of continuing education in cases of illness or undue hardship. It is the duty of each licensee who seeks a waiver to notify the Board in writing and request the waiver prior to the end of the renewal period. The Board will grant, deny, or grant in part the request for waiver. An individual who requests a waiver may not prescribe or dispense drugs after the expiration of his current prescriptive authority and until the Board grants the waiver request.

#### § 21.333. Continuing education subject matter.

Pharmacology continuing education courses shall provide the knowledge and skills to understand the pharmacokinetics and pharmacodynamics of broad categories of drugs and to analyze the relationship between pharmacologic agents and physiologic/pathologic responses.

#### § 21.334. Sources of continuing education.

(a) As a condition of approval, providers and credentialing organizations are required to provide CRNPs who complete continuing education courses with a certificate of completion which contains the information in § 21.337(a) (relating to CRNP responsibilities). Providers and credentialing organizations shall maintain records of course attendance for at least 5 years.

(b) The Board finds that the following providers of continuing education and credentialing organizations have currently met the standards for course approval for pharmacology continuing education.

(1) Accordingly, provided that these providers agree to abide by subsection (a), the courses offered or approved by the following providers or credentialing organizations are approved:

(i) Board-approved CRNP programs.

(ii) The American Nurses Credentialing Center's Commission on Accreditation (ANCC).

(iii) The American Academy of Nurse Practitioners (AANP).

(iv) The National Association of Pediatric Nurse Practitioners (NAPNP).

(v) The American Medical Association (AMA).

(2) The approval given to the providers and credentialing organizations in paragraph (1) is subject to reevaluation. A rescission of provider or credentialing organization approval will be made only in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure) or by amendment of this section.

(c) CRNPs may obtain credit for courses offered by providers not indicated in subsection (b)(1) if the provider receives approval of the course under § 21.336 (relating to continuing education course approval) prior to its implementation.

(d) CRNPs may obtain credit for continuing education hours on an individual basis if the CRNP, prior to attendance at the course, obtains Board approval by submitting a request for course approval and supporting documentation listed in § 21.336(a).

(e) CRNPs may obtain credit for correspondence courses, taped study courses and other independent study courses if the course is Board approved.

(f) Up to 4 hours will be credited for service as a teacher, preceptor, lecturer or speaker and for publication in a refereed journal or other scholarly publication relating to pharmacology. Application shall be made prior to the service or within 90 days of the publication to assure that the Board will approve the service or publication and to allow the Board to determine the number of contact hours that will be granted.

(g) An hour for purposes of nurse practitioner continuing education is 50 minutes.

#### § 21.335. Requirements for courses.

Each course shall have:

(1) An established mechanism to measure its quality, established criteria for selecting and evaluating faculty and established criteria for the evaluation of each participant who completes the course.

(2) Adequate facilities with appropriate instructional materials to carry out continuing education programs.

(3) Instructors who have suitable qualifications as detailed in § 21.336(c) (relating to continuing education course approval).

#### § 21.336. Continuing education course approval.

(a) Providers referenced in § 21.334(c) (relating to sources of continuing education) or CRNPs applying for individual approval in § 21.334(d), when seeking Board approval of a continuing education course shall pay the required fee (see § 21.253 (relating to fees)) and complete and submit an application for course approval, which shall include the following information:

(1) Full name and address of the provider.

(2) Title of the program.

## PROPOSED RULEMAKING

- (3) Dates and location of the program.
- (4) Faculty names, titles, affiliations, degrees and areas of expertise.
- (5) Schedule of program—title of subject, lecturer and time allocated.
- (6) Total number of hours requested.
- (7) Method of certifying and assuring attendance, and draft of certificate of attendance to be provided to course participants.
- (8) Course objectives.
- (9) Target audience.
- (10) Core subjects.
- (11) Program coordinator.
- (12) Instruction and evaluation methods.
- (13) Other information requested by the Board.

(b) Upon approval of a course, the Board will assign a course number and determine the number of hours awarded. The provider shall place the course number on the certificate of attendance and shall provide CRNPs who successfully complete a course with a certificate of attendance.

(c) Courses will be approved only in the instructor's demonstrated areas of expertise. Expertise may be demonstrated by the instructor's certification in the specialty area to be presented.

(d) A separate application shall be submitted whenever a change is made to any information submitted under subsection (a), except for information related to a change in date or location, or both, of the program submitted under subsection (a)(3).

#### § 21.337. CRNP responsibilities.

- (a) A CRNP with prescriptive authority is required to

maintain documentation of completion of continuing education, including:

- (1) CRNP name.
- (2) Dates attended.
- (3) Continuing education hours.
- (4) Title of course.
- (5) Course provider.
- (6) Location of course.
- (7) Course number.

(b) Primary responsibility for documenting completion of the continuing education requirements rests with the CRNP. Documentation shall be submitted with the biennial renewal application by those CRNPs with prescriptive authority seeking to renew their prescriptive authority. The evidence to support fulfillment of those requirements shall be maintained for 5 years after the completion of educational courses. The certificate issued by the course provider under § 21.334(b), (c) or (e) (relating to sources of continuing education) shall be acceptable documentation. Acceptable documentation of hours obtained through § 21.334(d) or (f) shall be the Board approval letter sent to the applicant.

(c) Falsification of information required under this section or failure to complete the requirements of § 21.332 (relating to requirement of continuing education) by those who continue to prescribe, may result in the withdrawal of prescriptive authority, the suspension or revocation of certification as a nurse practitioner, the suspension or revocation of any nursing license held by the licensee, and the imposition of a civil penalty.

[Pa.B. Doc. No. 02-2058. Filed for public inspection November 15, 2002, 9:00 a.m.]



INDEPENDENT REGULATORY REVIEW COMMISSION  
COMMONWEALTH OF PENNSYLVANIA  
333 MARKET STREET  
14TH FLOOR  
HARRISBURG, PA 17101

(717) 783-5417  
Fax (717) 783-2664

February 28, 2003

Janet H. Shields, MSN, CRNA, Chairperson  
State Board of Nursing  
116 Pine Street  
Harrisburg, PA 17105

Re: Regulation #16A-5117 (IRRC #2314)  
State Board of Nursing  
Continuing Education

Dear Chairperson Shields:

Enclosed are the Commission's Comments that include objections and recommendations for consideration when you prepare the final version of this regulation. These Comments are not a formal approval or disapproval of the regulation. However, they specify the regulatory review criteria that have not been met.

The Comments will soon be available on our website at [www.irc.state.pa.us](http://www.irc.state.pa.us). If you would like to discuss them, please contact my office at 783-5417.

Sincerely,

Robert E. Nyce  
Executive Director  
wbg  
Enclosure

cc: Honorable Mario J. Civera, Jr., Majority Chairman, House Professional Licensure Committee  
Honorable William W. Rieger, Democratic Chairman, House Professional Licensure Committee  
Honorable Robert M. Tomlinson, Chairman, Senate Consumer Protection and Professional Licensure Committee  
Honorable Lisa M. Boscola, Minority Chairman, Senate Consumer Protection and Professional Licensure Committee  
Honorable Benjamin Ramos, Acting Secretary, Department of State

# **Comments of the Independent Regulatory Review Commission**

on

## **State Board of Nursing Regulation No. 16A-5117**

### **Continuing Education**

**February 28, 2003**

We submit for your consideration the following objections and recommendations regarding this regulation. Each objection or recommendation includes a reference to the criteria in the Regulatory Review Act (71 P.S. § 745.5a(h) and (i)) which have not been met. The State Board of Nursing (Board) must respond to these Comments when it submits the final-form regulation. If the final-form regulation is not delivered within two years of the close of the public comment period, the regulation will be deemed withdrawn.

#### **1. Continuing Education. – Clarity.**

The title and undesignated center heading of this rulemaking is “Continuing Education.” This rulemaking addresses the continuing education requirements of Certified Registered Nurse Practitioners (CRNPs) who are approved to prescribe and dispense drugs. The continuing education requirements of CRNPs who are approved to prescribe and dispense drugs are different than CRNPs who are not approved to prescribe and dispense drugs. For clarity, the title should be changed to reflect that this rulemaking applies to CRNPs that are approved to prescribe and dispense drugs.

#### **2. Section 21.332. Requirement of continuing education. – Statutory Authority; Legislative intent; Reasonableness; Protection of public health, safety and welfare; Clarity.**

##### *Subsection (a)(2)*

This subsection addresses reactivation of prescriptive authority. Subparagraph (ii) states that an applicant can provide evidence to the Board that demonstrates the applicant has practiced in another jurisdiction. The final-form regulation should describe what would be acceptable evidence.

##### *Subsection (b)(3)*

This subsection provides that the Board may waive the requirements of continuing education “in cases of illness or undue hardship.” We have two concerns.

First, we question the Board’s statutory authority to provide this waiver. Section 8.1(c) of the Professional Nursing Law Act (206 of 2002) states that, as a condition of biennial renewal, a CRNP “must” complete the required hours of continuing education. It does not provide for exemptions or exclusions.

If the Board demonstrates that it has the statutory authority to grant waivers, we question the reasonableness of allowing a CRNP to prescribe and dispense drugs without the benefit of continuing education in this field. In addition, the availability of continuing education from a multitude of sources, as provided in Section 21.334 (e), ensures that CRNPs have ample opportunity to meet their continuing education requirements.

The comment and response portion of the final-form regulation should provide the specific statutory authority that allows the Board to grant a waiver for illness or undue hardship. It should also explain how the health and safety of the public is adequately protected when CRNPs with prescriptive authority are allowed to practice without the benefit of continuing education. In the alternative, this provision should be deleted.

Second, the subsection does not state how an applicant could apply for a waiver or how the Board will review the request. If the Board maintains the waiver provision in the final-form regulation, it should describe how an applicant could apply for the waiver and what the Board's responsibilities are for reviewing the request.

### **3. Section 21.334. Sources of continuing education. – Clarity.**

#### *Subsection (a)*

This subsection requires credentialing organizations to provide certificates of completion to CRNPs who complete continuing education courses. This subsection would be more appropriate under Section 21.335, relating to requirements for courses.

#### *Subsection (b)*

The phrase, "The Board finds that" is unnecessary and should be deleted from the final-form regulation.

#### *Subsection (e)*

Under this subsection, a CRNP may obtain credit for correspondence courses, taped study courses and other independent study courses if approved by the Board. We have three questions. First, would a course offered through the Internet be acceptable? Second, is there a limit to the number of courses from Subsection (e) that could be used to meet the continuing education requirement? Third, what kind of documentation must be submitted to obtain approval of the Board?

### **4. Section 21.336. Continuing education course approval. – Reasonableness.**

This section establishes procedures for providers and individual CRNPs to submit applications for approval of continuing education courses. However, the section provides no direction regarding the timing for submitting applications. Has the Board considered requiring licensees or providers to submit applications a specific number of days or in a specific time period before the courses begin? Through this requirement, the Board could give notice to licensees and providers to submit applications in a timely manner. This would give the Board sufficient opportunity to review the courses before CRNPs enroll or participate.



## **Regulation 16A-5117**

### **State Board of Nursing**

**PROPOSAL:** Regulation 16A-5117 amends 49 PA Code, Chapter 21, regulations of the State Board of Nursing. The amendments set forth continuing education requirements for Certified Registered Nurse Practitioners (CRNPs) who exercise prescriptive authority.

The proposed Rulemaking was published in the Pennsylvania Bulletin on November 16, 2002, and resubmitted to the Professional Licensure Committee on January 29, 2003. The Committee has until February 18, 2003 to submit comments on the regulation.

**ANALYSIS:** On November 17, 2000, the Board and the State Board of Medicine jointly promulgated regulations authorizing CRNPs to prescribe certain medications. CRNPs who prescribe must complete at least 16 hours of Board approved continuing education in pharmacology per biennium.

New Sec. 21.332 provides the general requirements for continuing education. CRNPs who are on inactive status would not need to complete CE except for the biennial period immediately preceding a request for reactivation. If a CRNP's prescriptive authority has been inactive for three years or longer, reactivation could occur only if the CRNP completed at least 45 hours of course work in advanced pharmacology, or by demonstrating that he or she has been practicing with prescriptive authority in another jurisdiction for at least one of the last three years and has completed appropriate CE. The Board may grant a waiver of the CE requirement for illness or undue hardship.

New Sec. 21.333 specifies the appropriate pharmacology CE subject matter. Sec. 21.334 lists the course providers that will be recognized as preapproved as long as they agree to provide CRNPs who complete a course with a certificate of completion containing the information specified in Sec. 21.337(a). Providers are required to maintain course attendance records for at least five years. CRNPs would be able to obtain credit for courses offered by providers who are not preapproved by applying for course approval pursuant to Sec. 21.336. Credit will be given for correspondence courses, taped study courses and other independent study courses if the course is Board-approved. Up to four hours of CE will be credited for service as a teacher, preceptor, lecturer, or speaker and for publication in a refereed journal or other scholarly publication relating to pharmacology.

New Sec. 21.335 sets forth the basic requirements for CE courses, and new Sec. 21.336 establishes the procedure for CE course approval. New Sec. 21.337 provides that the CRNP is responsible for maintaining specific documentation relating to course attendance for a period of five years. Falsification of information or continuing to prescribe without completing CE requirements may result in withdrawal of prescriptive authority, suspension or revocation of certification as a CRNP, suspension or revocation of any nursing license held by the licensee, and the imposition of a civil penalty.

**RECOMMENDATIONS:** It is recommended that the Professional Licensure Committee take no formal action until final form regulations are promulgated. However, the Committee submits the following comments:

- (1) The Committee requests an explanation as to why, pursuant to Sec. 21.334(g), 50 minutes is counted as a continuing education hour, rather than 60 minutes.
- (2) The Committee questions whether or not a limit should be placed on the number of credit hours a CRNP may obtain through correspondence courses, taped study courses and other independent study courses.

House of Representatives  
Professional Licensure Committee  
February 6, 2003

FACE SHEET  
FOR FILING DOCUMENTS  
WITH THE LEGISLATIVE REFERENCE BUREAU

(Pursuant to Commonwealth Documents Law)

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REVIEW COMMISSION

#2314

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BY: \_\_\_\_\_  
(DEPUTY ATTORNEY GENERAL)

State Board of Nursing  
(AGENCY)

DOCUMENT/FISCAL NOTE NO. 16A-5117

DATE OF ADOPTION: \_\_\_\_\_

9/15/03  
DATE OF APPROVAL

BY: Janet Hunter Shields  
Janet Hunter Shields, MSN, CRNP, CS

Exec.  
(Deputy General Counsel  
(Chief Counsel,  
Independent Agency  
~~Strike inapplicable~~  
~~title~~)

TITLE: Chairperson  
(EXECUTIVE OFFICER, CHAIRMAN OR SECRETARY)

- [ ] Check if applicable  
Copy not approved.  
Objections attached.
- [ ] Check if applicable. No Attorney  
General approval or  
objection within 30 day  
after submission.

FINAL RULEMAKING  
COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS  
STATE BOARD OF NURSING  
49 PA. CODE, CHAPTER 21  
CONTINUING EDUCATION FOR CERTIFIED REGISTERED NURSE PRACTITIONERS

The State Board of Nursing (Board) adopts an amendment to 49 Pa.Code §§ 21.332 – 21.337, relating to continuing education for certified registered nurse practitioners (CRNPs), as set forth in Annex A.

Notice of Proposed Rulemaking was published at 32 Pa.B. 5666 (November 16, 2002). Publication was followed by a 30-day public comment period during which the Board did not receive any comments from the public. On February 6, 2003, the House Professional Licensure Committee (HPLC) submitted two comments. The Senate Consumer Protection and Professional Licensure Committee (SCP/PLC) made no comments. The Independent Regulatory Review Commission (IRRC) submitted comments to the proposed rulemaking on February 28, 2003.

On February 9, 2003, Act 206 of 2002 became effective. Section 3(c) of Act 206 amended the Professional Nursing Law (Act) (63 P.S. §§ 211-226) by adding a new § 8.1 to the Act that requires all CRNPs to complete 30 hours of Board-approved continuing education prior to biennial renewal of certification. Act 206 also required that CRNPs with prescriptive authority complete at least 16 of the 30 hours in pharmacology. The proposed rulemaking package cited section 2.1(k) of the Act (63 P.S. § 212.1(k)) as the statutory authority for the rulemaking. Upon inquiry from the Office of Attorney General, the Board explained that its authority arose also from section 6.1 of the Act (63 P.S. § 216.1), which authorizes the Board to establish and approve programs for the preparation of registered professional nurses. These sections of the Act authorized the Board, jointly with the State Board of Medicine, to promulgate the Board's regulation at 49 Pa. Code § 283(3), effective November 18, 2000, which mandated 16 hours of continuing education in pharmacology for CRNPs with prescriptive authority. With the enactment of Act 206, this final rulemaking is authorized by section 8.1 of the Act (63 P.S. §218.1). This final-form rulemaking incorporates the new statutory requirement of continuing education for all CRNPs.

## **Summary of Comments and Responses to Proposed Rulemaking**

### **HPLC Comments**

The HPLC submitted two comments to the proposed rulemaking. First, the HPLC requested an explanation as to why 50 minutes constituted a continuing education hour instead of 60 minutes. (See § 21.334(f)). The Board decided to use the 50-minute hour because it anticipates that colleges and universities that house CRNP education programs will offer most of the continuing education courses that will be offered to CRNPs and 50 minutes is the standard hour in academia.

Second, the HPLC questioned whether a limit should be placed on the number of credit hours a CRNP could obtain through correspondence courses, taped study courses and other independent study courses. In developing the proposed rulemaking, the Board considered

whether it would be appropriate to place a limit on the number of continuing education credits that could be earned in these manners, and decided not to limit the number of distance learning credits that could be earned to satisfy the biennial requirement. The Board determined that it would not limit the number of credits that could be taken in distance learning for the following reasons: First, the Board is aware of only a very few distance learning courses being offered in the area of advanced pharmacology or CRNP practice areas as most of these courses are offered through CRNP programs; second, the nature of the practice of a CRNP in the Commonwealth often places the CRNP in less developed regions where the CRNP has difficulty accessing traditional continuing education programs and would greatly benefit by being permitted to meet the biennial requirement with primarily distance learning.

#### IRRC Comments

When proposed rulemaking was published, Act 206 of 2002 had not been enacted and the proposed rulemaking governed only CRNPs with prescriptive authority. IRRC commented that the regulation's title should reflect the regulation's limited application. This change is obviated by the changes made in this final rulemaking package to conform to Act 206.

IRRC suggested that § 21.334(a), relating to the provision of certificates of completion, would be more appropriate under § 21.335 (relating to requirements for courses). The Board concurs that § 21.334(a) is misplaced and has moved § 21.334(a) to § 21.336 (related to course approval). IRRC also advised that the phrase "the Board finds that" in § 21.334 is unnecessary and it has been deleted.

IRRC made numerous comments regarding the proposed rulemaking, including two similar to the HPLC comments. IRRC asked whether an Internet-based course would be included under the terminology "correspondence courses and other independent study courses." The Board considers Internet-based courses to be correspondence course, where the correspondence occurs through the computer rather than through the U.S. Postal Service. IRRC also inquired whether the Board should limit the number of credits obtainable through correspondence courses. As explained above, the Board did not wish to limit credits that could be earned through correspondence courses. Finally, IRRC asked what kind of documentation would be submitted to obtain approval of the course from the Board. Correspondence courses would be approved in the same manner as other continuing education courses, in accordance with § 21.334(b), which provides that CRNPs may obtain Board approval for courses under § 21.336. The Board anticipates that pre-approved providers listed in § 21.334(a) will offer the vast majority of continuing education courses, including correspondence courses.

IRRC requested that the Board add to the final-form regulation some description of the type of documentation that would be acceptable evidence that the CRNP had been employed in another jurisdiction as a CRNP with prescriptive authority in order to reactivate a license placed

on inactive status under § 21.332(a)(2)(ii). Generally, nurses who have placed their Pennsylvania licenses on inactive status to practice in another state and then seek to reactivate their Pennsylvania licenses submit a letter from their employer describing the nurse's duties. The Board declines to add such an explanation to this subsection, as the Board does not believe the provision as written will cause any confusion. In addition, the Board notes that the requirement that the CRNP demonstrate that he has completed continuing education that is substantially equivalent to the requirements of § 21.283(3) could be met by submitting certificates of attendance and course outlines or verification from the other state's nursing board that the requirements are equivalent.

IRRC commented that it believes that the Board lacks statutory authority for the provision of § 21.332(b)(4), which provides that the Board may waive the continuing education requirement in cases of illness or undue hardship. Section 8.1 of the Act authorizes the Board to certify registered nurse practitioners. With this authority comes the authority to pass on the qualifications of applicants for renewal of registered nurse practitioner certification. The Board understands and respects the Legislature's determination that continuing education contributes to continued competency and ensures the safety of the public. However, the Board is also aware that circumstances may dictate a case-by-case approach. For example, CRNPs serving overseas may be unable to complete required continuing education. The Board does not believe that these nurses should be denied the opportunity to resume their profession when they return to Pennsylvania. The Board intends to use the waiver provision thoughtfully and sparingly, in accordance with the wishes of the Legislature. An applicant would apply for a waiver by writing to the Board and explaining the special circumstances the applicant believes warrants the grant of a waiver.

Finally, IRRC questioned the reasonableness of § 21.336, noting that the Board had not provided any time limit for submitting applications for the approval of continuing education courses. In the final-form rulemaking, the Board has added a requirement that applications for course approval be submitted at least 60 days prior to the date the course is to be offered.

#### **Amendments to Conform the Rulemaking to Act**

By Act 206, the General Assembly instituted a 30-hour biennial continuing education requirement for all CRNPs, and codified the prior regulatory requirement of 16 hours of biennial continuing education for CRNPs with prescriptive authority. In order to avoid the confusion that may be caused by different statutory and regulatory provisions relating to continuing education, and to conform this rulemaking to Act 206, the Board has added provisions to the proposed version of the rulemaking.

Section 21.332 (relating to requirement of continuing education) has been amended to make the continuing education provisions apply to all CRNPs. Sections 21.332(a)(1) and (a)(2)

have been moved to new § 21.332a (relating to inactive status) for clarity. A new paragraph (1) has been added to § 21.332(b) to set forth the general 30-hour biennial continuing education requirement for all CRNPs. As all CRNPs with prescriptive authority are certificate holders, CRNPs with prescriptive authority must comply with both §§ 21.332(b)(1) and 21.332(b)(2). Former paragraphs within § 21.322(b) were renumbered to accommodate the addition. Section 21.332(b)(3) was amended to indicate that failure to meet continuing education requirements will subject a CRNP to formal disciplinary action. This amendment conforms the rulemaking to section 15 of the Act (63 P.S. § 225). CRNPs, like other professional licensees who are required to complete biennial continuing education, will verify their continuing education compliance and the Bureau will randomly audit 5% by requiring submission of documentation for 30 hours of continuing education.

A new subsection (a) was added to § 21.333 (relating to continuing education subject matter) to provide for general continuing education courses and the provision relating to pharmacology continuing education was designated as subsection (b). Section 21.334 (relating to sources of continuing education) was similarly amended. Now that all CRNPs in Pennsylvania are required to complete continuing education, it is anticipated that the broad list of pre-approved providers will offer courses in both general and pharmacology subjects.

#### **Statutory Authority**

The final rulemaking is authorized under section 8.1(c) of the Professional Nursing Law (Act) (63 P.S. § 218.1(c)), which mandates continuing education for all CRNPs and authorizes the Board to approve continuing education courses for CRNPs. In addition, section 2.1(k) of the Act (63 P.S. § 212.1(k)) authorizes the Board to promulgate regulations for the administration of the Act.

#### **Fiscal Impact and Paperwork Requirements**

The final rulemaking will have no adverse fiscal impact on the Commonwealth or its political subdivisions. The State Board of Nursing is self-supporting and the cost to the Board of reviewing applications for continuing education course approval will be satisfied by the fee charged for approval of continuing education courses. This fee is being promulgated in a separate rulemaking package related to fees. The final rulemaking will impose only minimal additional paperwork requirements upon the Board, and none upon any political subdivisions. The private sector, to the extent that it seeks to provide continuing education programs for CRNPs with prescriptive authority, will incur nominal costs in submitting information to the Board.

### **Compliance with Executive Order 1996-1**

Consistent with Executive Order 1996-1, the Board determined that a compelling need justified regulation in the area of continuing education for CRNPs.

### **Regulatory Review**

Under section 5(a) of the Regulatory Review Act (71 P.S. § 745.5(a)), the Board submitted a copy of the Notice of Proposed Rulemaking, published at 32 Pa.B. 5666 (November 16, 2002), to the Independent Regulatory Review Commission and to the Chairpersons of the House Committee on Professional Licensure and the Senate Committee on Consumer Protection and Professional Licensure. In compliance with section 5(c) (71 P.S. § 745.5(c)), the Board also provided the Commission and the committees with copies of all comments received, as well as other documents.

Publication of the Notice of Proposed Rulemaking was followed by a 30-day public comment period during which the Board received no comments from the public. The Board received comments from the HPLC and IRRC. In preparing this final-form regulation, the Board has considered all comments received from the HPLC and IRRC.

This final form regulation was (deemed) approved by the House Professional Licensure Committee on \_\_\_\_\_, 2003, and the Senate Consumer Protection and Professional Licensure Committee on \_\_\_\_\_, 2003. IRRC met on \_\_\_\_\_, 2003, and (deemed) approved the regulation in accordance with section 5.1(e) of the Regulatory Review Act.

### **Additional Information**

Additional information may be obtained by writing to Ann Steffanic, Board Administrator, State Board of Nursing, P.O. Box 2649, Harrisburg, PA 17105-2649.

### **Findings**

The State Board of Nursing finds:

- (1) That public notice of intention to adopt a regulation at 49 Pa. Code, Chapter 21, was given under sections 201 and 202 of the Commonwealth Documents Law, 45



P.S. §§ 1201-1202, and the regulations promulgated under those sections at 1 Pa. Code §§ 7.1-7.2.

- (2) That these amendments to the regulations of the State Board of Nursing are necessary and appropriate for the regulation of the practice of certified registered nurse practitioners in the Commonwealth.
- (3) That the amendments made to the final-form rulemaking to conform the regulation to the February 9, 2002, amendments (Act 206) do not enlarge the original purpose of the proposed rulemaking as published under section 201 of the Commonwealth Documents Law (45 P.S. 1201).

### Order

The Board therefore ORDERS:

- (A) That the regulations of the State Board of Nursing, 49 Pa. Code, Chapter 21, are amended to read as set forth in Annex A.
- (B) That the Board shall submit a copy of Annex A to the Office of the Attorney General and the Office of General Counsel for approval as required by law.
- (C) That the Board shall certify this Order and Annex and shall deposit them with the Legislative Reference Bureau as required by law.
- (D) That the regulations shall take effect immediately upon publication in the Pennsylvania Bulletin.

Janet Hunter Shields, MSN, CRNP, CS  
Chairperson, State Board of Nursing

**Annex A**

**TITLE 49. PROFESSIONAL AND VOCATIONAL STANDARDS**

**PART I. DEPARTMENT OF STATE**

**Subpart A. PROFESSIONAL AND OCCUPATIONAL AFFAIRS**

**CHAPTER 21. STATE BOARD OF NURSING**

**Subchapter C. CERTIFIED REGISTERED NURSE PRACTITIONERS**

\* \* \*

**CONTINUING EDUCATION**

**§ 21.332. Requirement of continuing education.**

- (a) A certified registered nurse practitioner ~~approved to prescribe and dispense drugs under §§21.283 – 21.287 and §§ 18.53 – 18.57~~ shall comply with this section and §§ 21.333 – 21.332A – 21.337.

- (1) ~~An individual who places his license and certification on inactive status, or who notifies the Board that all collaborative agreements have expired, is not required to meet the continuing education requirements as outlined in this section and §§21.333 – 21.337, except to the extent that, upon application for reactivation of the license and certification and authorization to prescribe and dispense, the individual shall be required to show proof of continuing education for the biennial period immediately preceding the request for reactivation of the certification and authority to prescribe and dispense drugs.~~

~~(2) An individual whose prescriptive authority approval has been in an inactive status for 3 years or longer may reactivate the prescriptive authority approval by meeting one of the following conditions:~~

~~(i) Complete the requirement in §21.283(2) (relating to prescribing and dispensing drugs) by taking at least 45 hours of course work in advanced pharmacology.~~

~~(ii) Provide evidence to the Board that the applicant has practiced as a certified registered nurse practitioner with prescriptive authority in another jurisdiction which prescriptive authority is equivalent to that in this Commonwealth for at least 1 of the last 3 years, and, as a condition for continued practice in that jurisdiction, has completed continuing education that is substantially equivalent to the requirements of §21.283(3), within 1 year prior to the request for reactivation of prescriptive authority.~~

(b) Continuing education requirements shall be completed each biennial cycle.

(1) AN APPLICANT FOR BIENNIAL RENEWAL OR REACTIVATION OF CERTIFICATION IS REQUIRED TO COMPLETE, DURING THE 2 YEARS PRECEDING RENEWAL OR REACTIVATION, A MINIMUM OF 30 HOURS OF BOARD-APPROVED CONTINUING EDUCATION, AS SET FORTH IN §8.1(C) OF THE ACT. COMPLETION OF A COURSE DESCRIBED IN §21.283(2) (RELATING TO PRESCRIBING AND DISPENSING DRUGS)

SHALL SATISFY THE CONTINUING EDUCATION REQUIREMENT FOR THE BIENNIAL RENEWAL PERIOD IN WHICH IT IS COMPLETED.

- (2) An applicant for biennial renewal or reactivation of prescriptive authority approval is required to complete, during the 2 years preceding renewal or reactivation, a minimum of 16 hours of continuing education in pharmacology. Completion of a course described in §21.283(2) shall satisfy the continuing education requirement for the biennial renewal period in which it is completed.
- (23) A person failing to meet the continuing education requirements for a biennial renewal period will ~~have his prescriptive authority approval withdrawn and will be prohibited from prescribing and dispensing drugs until the educational criteria are met, prescriptive authority approval is renewed and any fees and penalties are properly paid~~ BE SUBJECT TO FORMAL DISCIPLINARY ACTION.
- (34) The Board may waive the requirements of continuing education in cases of illness or undue hardship. It is the duty of each licensee who seeks a waiver to notify the Board in writing and request the waiver prior to the end of the renewal period. The Board will grant, deny, or grant in part the request for waiver. An individual who requests a waiver may not prescribe or dispense drugs after the expiration of his current prescriptive authority and until the Board grants the waiver request.

**§ 21.332A. INACTIVE STATUS.**

- (A) AN INDIVIDUAL WHO PLACES HIS CERTIFICATION ON INACTIVE STATUS, OR WHO PLACES HIS PRESCRIPTIVE AUTHORITY APPROVAL ON INACTIVE STATUS FOR LESS THAN 3 YEARS, OR WHO NOTIFIES THE BOARD THAT ALL COLLABORATIVE AGREEMENTS HAVE EXPIRED, IS NOT REQUIRED TO MEET THE CONTINUING EDUCATION REQUIREMENTS DURING THE PERIOD THE CERTIFICATION OR PRESCRIPTIVE AUTHORITY APPROVAL IS ON INACTIVE STATUS. UPON APPLICATION FOR REACTIVATION OF CERTIFICATION OR AUTHORIZATION TO PRESCRIBE AND DISPENSE, THE INDIVIDUAL SHALL SHOW PROOF OF MEETING THE CONTINUING EDUCATION REQUIREMENTS FOR THE BIENNIAL PERIOD IMMEDIATELY PRECEDING THE REQUEST FOR REACTIVATION.
  
- (B) AN INDIVIDUAL WHOSE PRESCRIPTIVE AUTHORITY APPROVAL HAS BEEN IN AN INACTIVE STATUS FOR 3 YEARS OR LONGER MAY REACTIVATE THE PRESCRIPTIVE AUTHORITY APPROVAL BY MEETING ONE OF THE FOLLOWING CONDITIONS:
  - (1) COMPLETE THE REQUIREMENT IN §21.283(2) (RELATING TO PRESCRIBING AND DISPENSING DRUGS) BY TAKING AT LEAST 45 HOURS OF COURSE WORK IN ADVANCED PHARMACOLOGY.

- (2) PROVIDE EVIDENCE TO THE BOARD THAT THE APPLICANT HAS PRACTICED AS A CERTIFIED REGISTERED NURSE PRACTITIONER WITH PRESCRIPTIVE AUTHORITY IN ANOTHER JURISDICTION WHICH PRESCRIPTIVE AUTHORITY IS EQUIVALENT TO THAT IN THIS COMMONWEALTH FOR AT LEAST 1 OF THE LAST 3 YEARS, AND, AS A CONDITION FOR CONTINUED PRACTICE IN THAT JURISDICTION, HAS COMPLETED CONTINUING EDUCATION THAT IS SUBSTANTIALLY EQUIVALENT TO THE REQUIREMENTS OF §21.283(3), WITHIN 1 YEAR PRIOR TO THE REQUEST FOR REACTIVATION OF PRESCRIPTIVE AUTHORITY.

**§ 21.333. Continuing education subject matter.**

(A) CONTINUING EDUCATION COURSES SHALL ADDRESS THE CRNP'S AREA OF PRACTICE AND MEET THE REQUIREMENTS OF § 21.332(B)(1).

(B) Pharmacology continuing education courses SHALL MEET THE REQUIREMENTS OF § 8.1(C) OF THE ACT AND § 21.332(B)(2) AND shall provide the knowledge and skills to understand the pharmacokinetics and pharmacodynamics of broad categories of drugs and to analyze the relationship between pharmacologic agents and physiologic/ pathologic responses.

**§ 21.334. Sources of continuing education.**

- (a) ~~As a condition of approval, providers and credentialing organizations are required to provide CRNPs who complete continuing education courses with a certificate of completion which contains the information listed in §21.337(a) (relating to CRNP responsibilities). Providers and credentialing organizations shall maintain records of course attendance for at least 5 years.~~
- (b) The Board finds that the following providers of continuing education and credentialing organizations have currently met the standards for course approval for pharmacology continuing education.
  - (1) Accordingly, provided that these providers agree to abide by subsection (a) § 21.336(a) (RELATING TO CONTINUING EDUCATION COURSE APPROVAL), the courses offered or approved by the following providers or credentialing organizations are approved:
    - (i) Board-approved CRNP programs.
    - (ii) The American Nurses Credentialing Center's Commission on Accreditation (ANCC).
    - (iii) The American Academy of Nurse Practitioners (AANP).
    - (iv) The National Association of Pediatric Nurse Practitioners (NAPNP).
    - (v) The American Medical Association (AMA).

- (2) The approval given to the providers and credentialing organizations in paragraph (1) is subject to reevaluation. A rescission of provider or credentialing organization approval will be made only in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure) or by amendment of this section.
- (eB) CRNPs may obtain credit for courses offered by providers not indicated in subsection (bA)(1) if the provider receives approval of the course under §21.336 (relating to continuing education course approval) prior to its implementation.
- (dC) CRNPs may obtain credit for continuing education hours on an individual basis if the CRNP, prior to attendance at the course, obtains Board approval by submitting a request for course approval and supporting documentation listed in §21.336(aB).
- (eD) CRNPs may obtain credit for correspondence courses, taped study courses and other independent study courses if the course is Board approved.
- (fE) Up to 4 hours will be credited for service as a teacher, preceptor, lecturer or speaker and for publication in a refereed journal or other scholarly publication relating to pharmacology OR THE CRNP'S AREA OF PRACTICE. Application shall be made prior to the service or within 90 days of the publication to assure that the Board will approve the service or publication and to allow the Board to determine the number of contact hours that will be granted.



(gF) An hour for purposes of nurse practitioner continuing education is 50 minutes.

**§ 21.335. Requirements for courses.**

Each course shall have:

- (1) An established mechanism to measure its quality, established criteria for selecting and evaluating faculty, and established criteria for the evaluation of each participant who completes the course.
- (2) Adequate facilities with appropriate instructional materials to carry out continuing education programs.
- (3) Instructors who have suitable qualifications as detailed in §21.336(eD) (relating to continuing education course approval).

**§ 21.336. Continuing education course approval.**

- (A) AS A CONDITION OF APPROVAL, PROVIDERS AND CREDENTIALING ORGANIZATIONS ARE REQUIRED TO PROVIDE CRNPS WHO COMPLETE CONTINUING EDUCATION COURSES WITH A CERTIFICATE OF COMPLETION WHICH CONTAINS THE INFORMATION LISTED IN §21.337(A) (RELATING TO CRNP RESPONSIBILITIES). PROVIDERS AND CREDENTIALING ORGANIZATIONS SHALL

MAINTAIN RECORDS OF COURSE ATTENDANCE FOR AT LEAST 5 YEARS.

(aB) Providers referenced in §21.334(eB) (relating to sources of continuing education) or CRNPs applying for individual approval in §21.334(dC), when seeking Board approval of a continuing education course shall pay the required fee (see §21.253 (relating to fees)) and complete and submit an application for course approval AT LEAST 60 DAYS PRIOR TO THE DATE THE COURSE IS TO BE OFFERED, which shall include the following information:

- (1) Full name and address of the provider.
- (2) Title of the program.
- (3) Dates and location of the program.
- (4) Faculty names, titles, affiliations, degrees, and areas of expertise.
- (5) Schedule of program – title of subject, lecturer and time allocated.
- (6) Total number of hours requested.
- (7) Method of certifying and assuring attendance, and draft of certificate of attendance to be provided to course participants.

- (8) Course objectives.
  - (9) Target audience.
  - (10) Core subjects.
  - (11) Program coordinator.
  - (12) Instruction and evaluation methods.
  - (13) Other information requested by the Board.
- (bC) Upon approval of a course, the Board will assign a course number and determine the number of hours awarded. The provider shall place the course number on the certificate of attendance and shall provide CRNPs who successfully complete a course with a certificate of attendance.
- (eD) Courses will be approved only in the instructor's demonstrated areas of expertise. Expertise may be demonstrated by the instructor's certification in the specialty area to be presented.
- (dE) A separate application shall be submitted whenever a change is made to any information submitted under subsection (aB), except for information related to a

change in date or location, or both, of the program submitted under subsection (aB)(3).

**§ 21.337. CRNP responsibilities.**

(a) A CRNP ~~with prescriptive authority~~ is required to maintain documentation of completion of continuing education, including:

- (1) CRNP name.
- (2) Dates attended.
- (3) Continuing education hours.
- (4) Title of course.
- (5) Course provider.
- (6) Location of course.
- (7) Course number.

(b) Primary responsibility for documenting completion of the continuing education requirements rests with the CRNP. A CRNP SEEKING TO RENEW CERTIFICATION OR PRESCRIPTIVE AUTHORITY SHALL VERIFY COMPLIANCE WITH

CONTINUING EDUCATION REQUIRMENTS. ~~Documentation must be submitted with the biennial renewal application by those CRNPs with prescriptive authority seeking to renew their prescriptive authority. The evidence to support fulfillment of those requirements~~ DOCUMENTATION OF COMPLETION OF CONTINUING EDUCATION REQUIREMENTS shall be maintained for 5 years after the completion of educational courses. The certificate issued by the course provider under ~~§ 21.334(b)(e) or (e) (relating to sources of continuing education)~~ shall be acceptable documentation. Acceptable documentation of hours obtained through §§21.334(dC) or (fE) shall be the Board approval letter sent to the applicant.

- (c) Falsification of information required under this section or failure to complete the CONTINUING EDUCATION requirements of ~~§21.332 (relating to requirement of continuing education)~~ by those who continue to PRACTICE AS A CRNP OR TO prescribe, may result in the ~~withdrawal of prescriptive authority, the suspension or revocation of certification as a nurse practitioner, the suspension or revocation of any nursing license held by the licensee, and the imposition of a civil penalty~~ INSTITUTION OF FORMAL DISCIPLINARY ACTION.



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS  
STATE BOARD OF NURSING

Post Office Box 2649  
Harrisburg, Pennsylvania 17105-2649  
(717) 783-7142

January 6, 2004

The Honorable John R. McGinley, Jr., Chairman  
INDEPENDENT REGULATORY REVIEW COMMISSION  
14<sup>th</sup> Floor, Harristown 2, 333 Market Street  
Harrisburg, Pennsylvania 17101

Re: Final Regulation  
State Board of Nursing  
16A-5117:Continuing Education for Certified Registered Nurse Practitioners

Dear Chairman McGinley:

Enclosed is a copy of a final rulemaking package of the State Board of Nursing pertaining to continuing education for certified registered nurse practitioners.

The Board will be pleased to provide whatever information the Commission may require during the course of its review of the rulemaking.

Sincerely,

*Janet Hunter Shields, MSN, CRNP, CS*

Janet Hunter Shields, MSN, CRNP, CS, Chairperson  
State Board of Nursing

JHS:TLM:kmh

Enclosure

cc: Basil L. Merenda, Acting Commissioner  
Bureau of Professional and Occupational Affairs  
Andrew Sislo, Chief Counsel  
Department of State  
Joyce McKeever, Deputy Chief Counsel  
Department of State  
Cynthia Montgomery, Regulatory Counsel  
Department of State  
Herbert Abramson, Senior Counsel in Charge  
Department of State  
Teresa Lazo-Miller, Counsel  
State Board of Nursing  
State Board of Nursing

**TRANSMITTAL SHEET FOR REGULATIONS SUBJECT TO THE  
REGULATORY REVIEW ACT**

I.D. NUMBER: 16A-5117

SUBJECT: Continuing Education for Certified Registered Nurse Practitioners

AGENCY: DEPARTMENT OF STATE

**TYPE OF REGULATION**

Proposed Regulation

X Final Regulation

Final Regulation with Notice of Proposed Rulemaking Omitted

120-day Emergency Certification of the Attorney General

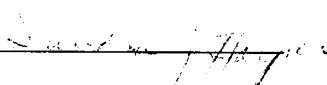
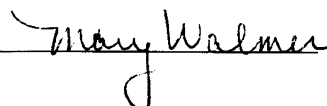
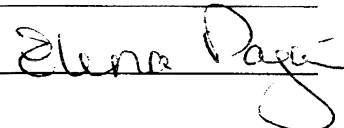
120-day Emergency Certification of the Governor

Delivery of Tolled Regulation

a. With Revisions                      b. Without Revisions

RECEIVED  
2004 JAN -6 AM 11:00  
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REGULATORY  
REVIEW COMMISSION

**FILING OF REGULATION**

DATE	SIGNATURE	DESIGNATION
1/16/04		HOUSE COMMITTEE ON PROFESSIONAL LICENSURE
1/16/04		SENATE COMMITTEE ON CONSUMER PROTECTION & PROFESSIONAL LICENSURE
1/16/04		INDEPENDENT REGULATORY REVIEW COMMISSION
_____	_____	ATTORNEY GENERAL (for Final Omitted only)
_____	_____	LEGISLATIVE REFERENCE BUREAU (for Proposed only)