

SB 136 STAFF MEASURE SUMMARY

House Committee On Health Care

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Meeting Dates: 4/16, 4/23

WHAT THE MEASURE DOES:

Removes 10-day supply limitation on prescriptions for controlled substances in Schedules II, III, III N, IV, and V issued by certified registered nurse anesthetists (CRNAs) beginning January 1, 2020. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Legislative history with prescribing authority for nurse anesthetists
- Medication-assisted treatment for opioid use disorder (e.g., buprenorphine and methadone)
- Treatment and management of chronic pain requires more than a 10-day supply of medications
- Limited access to multimodal techniques to treat chronic pain in rural communities (i.e., one or more pain management methods, such as peripheral nerve block, acetaminophen, gabapentin/pregabalin, non-steroidal anti-inflammatory drugs, among other methods)
- National certification and pharmacology education requirements to obtain prescribing authority for nurse anesthetists
- Centers for Medicare and Medicaid Services reimbursement to treat opioid addiction
- Potential for an increase in opioid prescriptions

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

Senate Bill 136 (2013) granted certified registered nurse anesthetists (CRNA) limited prescriptive authority under parameters set by the Oregon State Board of Nursing. At the time, CRNAs were the only group of advance practice registered nurses (APRNs) who lacked prescriptive authority in Oregon.

Senate Bill 136 (2019) removes the 10-day supply limitation on certified registered nurse anesthetists' prescriptive authority, aligning it with the authority granted to certified nurse practitioners and certified nurse clinical specialists.

1st Chamber vote (Senate): Ayes, 19, Nays, 6. Excused, 5.