

Board of Nursing Occupational Licenses

Application License Name	Required Education Level	Required Experience/Qualifications	Statutory Citation	Fees
Advanced Unlicensed Assistant (AUA)	200 contact hours of training in a program approved by the Oklahoma Board of Nursing or equivalent training.	Training or experience as a nursing assistant	59 O.S. §567.6a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$20.00 Renewal = \$25.00 Reinstatement = \$65.00
Licensed Practical Nurse (LPN) Single State License (SSL)	Completion of a state-approved practical nurse program Areas of study include nursing courses, body structure and function, basic nutrition, and personal/vocational relationships. Supervised clinical experience in care of adults, care of children, and maternal-newborn nursing.	Meet criteria for admission into a practical nursing education program.	59 O.S. §567.3a.4, 59 O.S. §567.6, 59 O.S. §567.7, 59 O.S. §567.18	Initial = \$85.00 Renewal = \$75.00 Reinstatement = \$115.00 Testing - \$200
Registered Nurse (RN) Single State License (SSL)	Associate or Bachelor's Degree in nursing from a state-Board-approved nursing education program Possible areas of study include biological and physical sciences, social and behavioral sciences, in addition to nursing courses. Supervised clinical experience in care of adults, care of children, maternal-newborn nursing, and psychiatric-mental health nursing	Meet criteria for admission into a college or university	59 O.S. §567.3a.3, 59 O.S. §567.5, 59 O.S. §567.7, 59 O.S. §567.18	Initial = \$85.00 Renewal = \$75.00 Reinstatement = \$115.00 Testing - \$200

Multistate (MSL) Registered Nurse (RN) or Licensed Practical Nurse (LPN) license	Must meet the requirements for licensure or renewal of licensure as required for SSL RN and SSL LPN, as well as the following Uniform Licensure Requirements: Has graduated or is eligible to graduate from a licensing-board-approved RN or LPN/Vocational Nurse (VN) prelicensure education program; or has graduated from a foreign RN or LPN/VN prelicensure education program that (a) has been approved by the authorized accrediting body in the applicable country and (b) has been verified by an independent credentials review agency to be comparable to a licensing-board-approved prelicensure education program; has, if a graduate of a foreign prelicensure education program, not taught in English or if English is not the individual's native language, successfully passed an English proficiency examination that includes the components of reading, speaking, writing and listening.	Meets qualifications for identified nursing education program.	59 O.S. §567.21. Article III (Nurse Licensure Compact)	Application and license fee = \$150; Renewal fee = \$125 Testing Service - \$200
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Advanced Practice Registered Nurse (APRN)- Certified Nurse Practitioner (CNP)	Completion of a formal educational nurse practitioner program accredited by Accreditation Commission for Education in Nursing or the Commission on Collegiate Nursing Education. Possible knowledge areas include communication, interviewing, basic physical exam, pathophysiology, health maintenance, management of chronic illness, and health teaching and counseling. Supervised clinical experience in health facilities. Completion of licensing requirements for a registered nurse. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition by the Oklahoma Board of Nursing	59 O.S. §567.3a.6 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00 Application - \$70
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Advanced Practice Registered Nurse (APRN) - Clinical Nurse Specialist (CNS)	· Master's Degree or higher with clinical specialization preparation · Specialty certification by a national certifying body · Supervised clinical experience in health facilities · Completion of licensing requirements for registered nurse Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Effective January 1, 2016, completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition from the Oklahoma Board of Nursing	59 O.S. §567.3a.7 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00
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Advanced Practice Registered Nurse (APRN) - Clinical Nurse Midwife (CNM)	Completion of a program of nurse midwifery accredited by the Accreditation Commission for Midwifery Education Possible areas of study include anatomy, physiology, chemistry, labor and delivery, family planning and gynecology, postpartum, and newborn and professional issues. Completion of licensing requirements for a registered nurse. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition from the Oklahoma Board of Nursing	59 O.S. §567.3a.8, 9 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00
Advanced Practice Registered Nurse (APRN) -Certified Registered Nurse Anesthetist (CRNA)	Completion of an educational program of a school of nurse anesthetists accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs/Schools Possible areas of study include anatomy, physiology, microbiology, chemistry, nutrition, psychology, and behavioral science. Supervised clinical experience in health facilities Completion of licensing requirements for a registered nurse Effective January 1, 2016, the applicant for initial licensure or licensure by endorsement as a CRNA must hold a graduate-level degree from a program preparing the graduate for certification as a nurse anesthetist accredited by the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs.	Current Oklahoma license to practice registered nursing. Certification in the specialty area by a national certifying body Current certificate of recognition from Oklahoma Board of Nursing	59 O.S. §567.3a.10 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00

Occupational Regulation Blueprint

License Details

What is the license? Advanced Unlicensed Assistant (AUA) Certification¹

As of May 15, 2019, there were 504 Advanced Unlicensed Assistants actively certified in Oklahoma.

What does the license cover? Authority for unlicensed individuals who have successfully completed a Board-approved certified training program education program and certification testing to perform specified technical skills on patients in acute care settings under the direction and supervision of the Registered Nurse and Licensed Practical Nurse. [59 O.S. §567.3a(13)]

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1996.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

The Advanced Unlicensed Assistant (AUA) skill set includes multiple selected invasive procedures which require advanced training and competency assessment through written and skill testing. Should this certification go away, the AUA skill set would then be performed by an individual with a higher level of licensure.

Least Restrictive Means

What means is used to protect the public interest? A government certification

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4)? No. Private certification may be an option, but currently is not available.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board²

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

¹ 59 O.S. §§567.3a(13), 567.6a, and OAC 485:10-10

² The tasks performed by AUAs are delegated by higher levels of nursing licensure. The higher levels of licensure are members of the Board.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Licensed Practical Nurse – Single State License¹

As of May 15, 2019 there were 16,077 single-state Licensed Practical Nurses actively licensed in Oklahoma.

What does the license cover? In Oklahoma, there are three pathways to licensure as a Licensed Practical Nurse (LPN):

(1) Licensure authority for individuals who have successfully completed a Board-approved practical nursing education program that meets the requirements of OAC 485:10-5-6(e)(1) and (2), and showing the diploma or degree and date conferred; or

(2) Licensure authority for an individual who has completed equivalent courses through a state approved registered nursing education program of nursing with a minimum overall grade point average of 2.0 and a grade of a “C” or higher in all nursing courses; or

(3) Licensure authority for an individual who has completed a registered nursing education program in a foreign country and meets through equivalent courses the requirements of OAC 485:10-9-2(d).

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate licensed practical nursing, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements. Enhanced Nurse Licensure Compact information is presented in greater detail in the “Multistate Registered Nurse or Licensed Practical Nurse Blueprint”.

Individuals obtaining licensure through equivalency as described in (2) and (3) above may not be recognized as LPNs in other surrounding states, as they have not completed a state-approved nursing education program. In addition, licensees granted licensure through equivalency in (2) above are not eligible for a multistate license as they do not meet the Uniform Core Licensure Requirement of having graduated from a licensing-board-approved RN or LPN prelicensure education program [59 O.S. §567.21, Article III(c)(2)].

Effective May 25, 2015, a Veteran who has completed Basic Medical Technician Corpsman Program (Navy/Air Force), Air Force Independent Duty Medical Technician, or Army Health Care Specialist training may participate in the Medic Veteran to Licensed Practical Nurse Bridge Course. Veterans with such prior military medical training and experience may transition into practical nursing education programs through advanced placement procedures [59 O.S. §567.20]. The process of transition shall include the provisions of Section 4100.3 of Title 59 of the Oklahoma Statutes. The Medic Veteran to

¹ 59 O.S. §§567.3a(4), 567.6, and OAC 485:10-9

Licensed Practical Nurse Bridge Course guidelines can be accessed at:
<http://nursing.ok.gov/medicveteranbridgegl.pdf>.

In addition, individuals who have successfully completed the Army Practical Nursing Program and the Community College of the Air Force (practical nursing) are eligible to apply for LPN licensure.

Licensed Practical Nursing is the practice nursing under the supervision or direction of a registered nurse, licensed physician or dentist [59 O.S. §567.3a(4)].

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1953.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The Licensed Practical Nurse directed scope of practice of nursing includes contribution to the assessment of the health status of individuals, participates in the development and modification of the nursing plan of care, implements the appropriate aspects of the plan of care, delegates tasks as may be safely performed by others, provides safe and effective nursing care, participates in the evaluation of responses to interventions, teaches basic nursing skills and related principles, performs additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and delegates defined nursing tasks to Advanced Unlicensed Assistants.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. Licensed Practical Nurses are licensed in all 50 states and District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board²

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Three.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

² The tasks performed by LPNs may be delegated by higher levels of nursing licensure. The higher levels of licensure are members of the Board.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Registered Nurse - Single State License¹

As of May 15, 2019, there were 44,160 Registered Nurses actively licensed in Oklahoma.

What does the license cover? In Oklahoma, there are two pathways to licensure as a Registered Nurse (RN):

(1) Licensure by Examination: Licensure authority for individuals who have successfully completed a Board-approved registered nursing education program that meets the requirements of OAC 485:10-5-6(d)(1, (2) and (3); and showing the diploma or degree and date conferred; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure by examination, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-7-2(a)(6) and (7). Licensure authority exists for an individual who has graduated from a government-approved post-secondary nursing education program in a foreign country and meets the requirements of OAC 485:10-7-2(d).

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate registered nursing license, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements. Enhanced Nurse Licensure Compact information is presented in greater detail in the "Multistate Registered Nurse or Licensed Practical Nurse Blueprint".

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1910.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The Registered Nurse scope of practice of nursing includes assessing the health status of individuals, analyzing assessment data in determining nursing care needs, establishing goals to meet identified health care needs; planning the strategy of nursing care; prioritizing nursing interventions; implementing the strategy of care; delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Nursing Practice Act; providing safe and effective care directly or indirectly; evaluating responses to interventions; teaching the principles and practice of nursing; managing and supervising the practice of nursing; collaborating with other health professionals in the management of health care; performing

¹ 59 O.S. §§567.3a(3), 567.5, and OAC 485:10-7

additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and delegates defined nursing tasks to Advanced Unlicensed Assistants.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. Registered Nurses are licensed in all 50 states and the District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Six.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Multistate Registered Nurse or Licensed Practical Nurse License¹

As of May 15, 2019, there were 4,661 Registered Nurses and 944 Licensed Practical Nurses actively licensed with a multistate license in Oklahoma.

What does the license cover? In Oklahoma, there are two pathways to multistate licensure as a Registered Nurse (RN) and a Licensed Practical Nurse (LPN):

(1) Licensure by Examination: Licensure authority for individuals who have successfully completed a Board-approved registered nursing education program that meets the requirements of OAC 485:10-5-6(d)(1), (2) and (3); and showing the diploma or degree and date conferred; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure by examination, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-7-2(a)(6) and (7) for RNs and OAC 485:10-9-2(a)(5) and (6) for LPNs. Licensure authority exists for an individual who has graduated from a government-approved post-secondary nursing education program in a foreign country and meets the requirements of OAC 485:10-7-2(d) for RNs and OAC 485: 10-9-2(d) for LPNs .

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate licensed practical nursing or registered nursing license, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements as identified in the eNLC (59 OS §567.21, Article III, c).

As identified in 59 O.S. §567.21, Article I,b, the general purposes of the enhanced Nurse Licensure Compact are to facilitate the states' responsibility to protect the public's health and safety; ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation; facilitate the exchanges of information among party states in the areas of nurse regulation, investigation and adverse actions; promote compliance with the laws governing the practice of nursing in each jurisdiction; invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party-state licenses; decrease redundancies in the consideration and issuance of nurse licenses; and provide opportunities for interstate practice by nurses (RNs and LPNs) who meet the uniform license requirements.

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? The eNLC was nationally implemented in January 2018.

¹ 59 O.S. §§567.20, 567.5, and 567.6; OAC 485:10-7 and OAC 485:10-9

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes.

The Multistate Registered Nurse and Licensed Practical Nurse scopes of practice are consistent with the scopes of practice noted on the Registered Nurse and Licensed Practical Nurse Single State Occupational Regulation Blueprints.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. 33 states have enacted the enhanced Nurse Licensure Compact (eNLC), which increases access to care while maintaining public protection at the state level. Under the eNLC, licensed registered nurses and licensed practical nurses can practice in other eNLC party states without having to obtain licensure.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Six RNs and three LPNs.

Is the Board controlled by these active market participants (see Annex, item 6)? Yes.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Nurse Practitioner¹

As of May 15, 2019, there were 3,332 Advanced Practice Registered Nurse – Certified Nurse Practitioners actively licensed in Oklahoma; of the 3,332 individuals, 2,698 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Nurse Practitioner (CNP):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse practitioner education program meeting the educational requirements of OAC 485:10-15-6; hold national APRN-CNP national certification that is congruent with the advanced education in a specialty area recognized by the Board (12 current and 6 retired national certifications) [59 OS § 567.5a; OAC485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1980.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNP scope of practice of nursing includes providing comprehensive health care to clients in a specific population focus consistent with advanced educational preparation as a Certified Nurse Practitioner and national certification including promotion and maintenance of health; prevention of illness and disability; diagnosis; and, under the supervision by a physician licensed in Oklahoma, prescription of medications, treatments, and devices for acute and chronic conditions and diseases; guidance and counseling services; consultation and/or collaboration with other health care providers and community resources; and referral to other health care providers and community resources [OAC 485:10-15-6(b)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNPs are regulated in 50 states and the District of Columbia.

¹ 59 O.S. §§567.3a(6), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Clinical Nurse Specialist¹

As of May 15, 2019, there were 285 Advanced Practice Registered Nurse – Clinical Nurse Specialists actively licensed in Oklahoma; of the 285 individuals, 184 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Clinical Nurse Specialist (CNS):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing clinical nurse specialist education program meeting the educational requirements of OAC 485:10-15-7; hold national APRN-CNS national certification that is congruent with the advanced education in a specialty area recognized by the Board (4 current and 34 retired national certifications) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1991.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNS accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the scope of practice/role definition statements for the Clinical Nurse Specialist. The scope of practice of nursing includes practicing as an expert clinician in the provision of direct nursing care to a selected population of patients or clients in any setting, including private practice; managing the care of patients or clients with complex nursing problems; enhancing patient or client care by integrating the competencies of clinical practice, education, consultation, and research; and referring patients or clients to other services [59 O.S. §567.3a(7)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNSs are regulated in 47 states and the District of Columbia.

¹ 59 O.S. §§567.3a(7), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Two.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Nurse Midwife¹

As of May 15, 2019, there were 64 Certified Nurse Midwives actively licensed in Oklahoma; of the 64 individuals, 44 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Nurse Midwife (CNM):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse midwifery education program meeting the educational preparation requirements of OAC 485:10-15-8; hold national certification according to the requirements of the American College of Nurse-Midwives (one current national certification) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1980.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNM accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the scope of practice/role definition statements for the Certified Nurse Midwife. The scope of practice of nursing includes providing management of care of normal newborns and women, antepartally, intrapartally, postpartally and gynecologically, occurring within a health care system which provides for medical consultation, medical management or referral, and is in accord with standards for nurse-midwifery as defined by the American College of Nurse-Midwives [59 O.S. §567.3a(9)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNMs are regulated in 50 states and the District of Columbia.

¹ 59 O.S. §§567.3a(8), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Registered Nurse Anesthetist¹

As of May 15, 2019, there were 711 Advanced Practice Registered Nurse – Certified Registered Nurse Anesthetists (CRNA) actively licensed in Oklahoma; of the 711 CRNAs, 480 have authority to select, order, obtain and administer drugs (prescriptive authority).

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Registered Nurse Anesthetist (CRNA):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse anesthesia education program meeting the educational preparation requirements of OAC 485:10-15-9; hold national certification by the National Board of Certification and Recertification for Nurse Anesthetists that is congruent with the advanced education in a specialty area recognized by the Board (one current national certification) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1976.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. A CRNA, administers anesthesia under the supervision of a medical doctor, osteopathic physician, podiatric physician or dentist licensed in this state, and under conditions in which timely, on-site consultation by such medical doctor, osteopathic physician, podiatric physician or dentist is available [59 O.S. §567.3a(10)(a)(2)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CRNAs are regulated in 48 states and the District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

¹ 59 O.S. §§567.3a(10), 567.5a and OAC 485:10-15

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? One.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Oklahoma Board of Nursing

I. Fees/Expenditures

1. Fee Schedule in Oklahoma Administrative Code – as below:

485:10-1-3. Fees

(a) Fee schedule.

(1) **Initial applications.** The following fees shall be charged by the Board of Nursing for initial applications:

- (A) Registered Nurse/Licensed Practical Nurse
 - (i) Licensure examination fee - \$85.00
 - (ii) Endorsement fee - \$85.00
 - (iii) Education equivalence evaluation fee - \$40.00
 - (iv) Cost of national examination
 - (v) R.N. examination challenge of results fee - \$200.00
 - (vi) LPN examination challenge of results fee - \$125.00
 - (vii) Examination review fee - \$90.00
 - (viii) Temporary license fee - \$10.00
- (B) Advanced Unlicensed Assistant
 - (i) Certification examination fee - \$20.00
 - (ii) Cost of examination
- (C) Advanced Practice Registered Nurses
 - (i) Licensure fee - \$70.00
 - (ii) Prescriptive authority fee - \$85.00
 - (iii) Authority to order, select, obtain and administer drugs - \$85.00

(2) **Renewal.** The following fees shall be charged in accordance to the biennial licensure/certificate/recognition renewal schedule established by the Board:

- (A) Registered Nurse/Licensed Practical Nurse license - \$75.00
- (B) Advanced Unlicensed Assistant certificate - \$25.00
- (C) Advanced Practice Registered Nurse licensure - \$40.00
- (D) Prescriptive authority - \$40.00
- (E) Authority to order, select, obtain and administer drugs - \$40.00
- (F) Reinstatement of lapsed license/ certificate/recognition - renewal fee(s) + \$40.00
- (G) Return to active - renewal fee(s) + \$40.00

(3) **Miscellaneous fees.** The following miscellaneous fees shall be charged by the Board:

- (A) Transcripts from closed schools of nursing - \$15.00
- (B) Duplication or modification of license/certificate/recognition - \$25.00
- (C) Certified verification of license/ certificate/recognition - \$40.00
- (D) Written verification of status of license/certificate/recognition - \$10.00 per name
- (E) Supervisory Physician change request - \$10.00
- (F) Requested review of contact hours for Prescriptive Authority - \$70.00
- (G) Corporation certificate - \$15.00
- (H) Certificate for framing - \$15.00
- (I) Insufficient funds processing fee - \$25.00
- (J) Facsimile (Fax) fee (per page) - \$1.00
- (K) Oklahoma Nursing Practice Act, Rules - \$15.00
- (L) Full survey visit to a nursing education program - \$500.00
- (M) Consultative visit to a nursing education program - \$250.00

(4) **Public access, open records.** The following public access, open record fees shall be charged by the Board:

- (A) Certification of public records (per page) - \$1.00
- (B) Duplication of public records (per page) - \$0.25
- (C) Computer address list - \$0.01/record + \$4.50/1000 labels + postage, \$40.00 minimum charge
- (D) Staff research time, when available (per hour) - \$20.00
- (E) Computer research time, when available (per hour) - \$100.00

2. Statute Authority for cost of Multistate license and renewal

59 OS Section 567.7 (D): The application fee for a multistate license issued pursuant to Section 5 of this act shall be One Hundred Fifty Dollars (\$150.00). The biennial multistate license renewal fee shall be One Hundred Twenty-five Dollars (\$125.00)

3. Statute Authority for Administrative Penalty and Recovery Costs:

59 OS Section 567.8 (J)

1. Any person who has been determined by the Board to have violated any provisions of the Oklahoma Nursing Practice Act or any rule or order issued pursuant thereto shall be liable for an administrative penalty not to exceed Five Hundred Dollars (\$500.00) for each count for which any holder of a certificate or license has been determined to be in violation of the Oklahoma Nursing Practice Act or any rule promulgated or order issued pursuant thereto.
2. The amount of the penalty shall be assessed by the Board pursuant to the provisions of this section, after notice and an opportunity for hearing is given to the accused. In determining the amount of the penalty, the Board shall include, but not be limited to, consideration of the nature, circumstances, and gravity of the violation and, with respect to the person found to have committed the violation, the degree of culpability, the effect on ability of the person to continue to practice, and any show of good faith in attempting to achieve compliance with the provisions of the Oklahoma Nursing Practice Act.

59 OS Section 567.8 (M) In the event disciplinary action is imposed in an administrative proceeding, the Board shall have the authority to recover the monies expended by the Board in pursuing any disciplinary action, including but not limited to costs of investigation, probation or monitoring fees, administrative costs, witness fees, attorney fees and court costs.

4. FY2018 Revenue	Amount	Percent
Fees	\$ 3,785,966.72	95.4%
Less 10% to State General Revenue Fund	(\$ 378,594.69)	
Administrative Penalties	\$ 178,000.00	4.5%
Recovery Costs	\$ 4,328.74	0.1%
Total Revenue	\$ 3,589,700.77	

5. FY 2018 Expenditures \$3,393.045.98

Agency is a non-appropriated agency, with revenue utilized during FY 2018 to fund payroll and operational expenditures for the statute directive to:

A. Regulate licensed nurses and advanced unlicensed assistant certifications

Licenses/Recognitions/Certifications	FY2018 Number
Registered Nurses	56,388
Licensed Practical Nurses	18,871
Advanced Practice Registered Nurses	4,034
Prescriptive Authority Recognitions	3,204
Advanced Unlicensed Assistant Certifications	539
Total Licenses/Recognitions/Certifications	83,036

B. Regulate nursing education programs.

Type of Program	Number of Programs/Campuses
Advanced Unlicensed Assistant	7 programs
Licensed Practical Nurse	29 programs/49 campuses
Registered Nurse	29 programs/51 campuses
Advanced Practice Registered Nurse	4 programs

C. Provide initial licensure (exam or endorsement), biennial renewal, multistate licensure to existing licensees, and reinstatement of licensure of duly qualified applicants; process licensure modifications; issue licensure verifications.

Total Applications Received	Average Processing Time	% Received Online
51,511	1.37 business days	99%

D. Investigate alleged violations of the nursing practice act; conduct administrative settlement conferences and/or licensure hearings upon allegations of violations; issue corrective action or disciplinary action; monitor compliance.

Number of alleged violations received	2,172
Number of alleged violations requiring an investigative case be opened	562
Number of settlement conferences	238
Number of administrative hearings	92
Number of corrective action orders issued	70
Number of nurses disciplined	309
Rate of nurses disciplined to total number of licensees regulated	0.4%
Number of compliance cases monitored	277
Average number of months for incident/case resolution	2.5 months

- E. Maintain a Peer Assistance Program for nurses who competencies may be compromised by substance use.

Number of Participants	% Successful in Program	Relapse Rate
205	85%	4%

- F. Maintain records of all licensed nurses and advanced unlicensed assistants; provide records under the provisions of the Open Records Act.

Number of Licensure Records Maintained	Number of Open Record Requests
181,970	2,471

II. Implementation of New Laws

1. HB1373 Legislation related to felony convictions

The Board formed a subcommittee to work on this legislative concept in November 2018. The subcommittee has reviewed 178 criminal offenses in the Oklahoma statutes. The subcommittee plans to present to the full Board at the July 2019 Board Meeting, a list of felony convictions that substantially relate to the practice of nursing and poses a reasonable threat to public safety that would prevent licensure. During the September 2019 Board Meeting, the Board will review and adopt emergency rules for submission to Governor to implement the provisions of HB1373 by November 1, 2019.

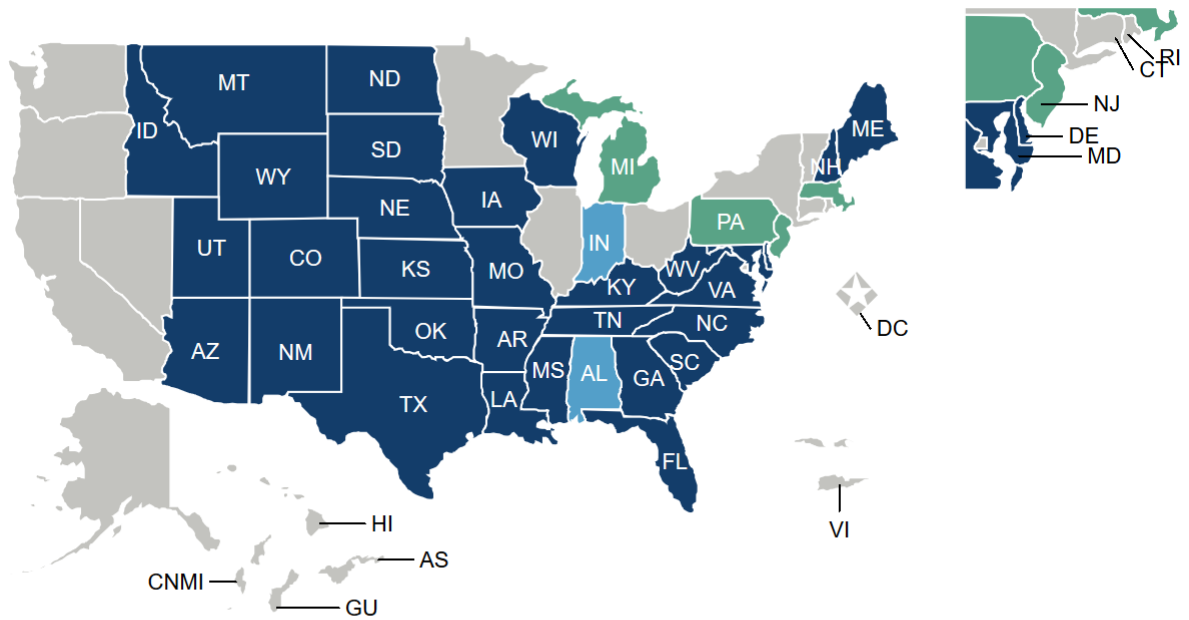
2. SB 670 Legislation related to military member/spouse reciprocity

Board staff drafted new language to be placed in all endorsement applications to readily identify applicants who are active duty military or the spouse of an active duty military individual. In addition, Board staff are working with the Office of Management and Enterprise Services and Oklahoma Interactive in developing a process in which these online applications will be accepted without payment, ensuring that the fee for the first period of license issuance is waived.

III. Implementation of HB 2933, codified at 59 O.S. § 4003

The Board is exempt from this statute, see 59 O.S. § 4003 (A).

States in the Nurse Licensure Compact



State with pending NLC legislation NLC State NLC enacted: Awaiting implementation.

Board of Nursing Occupational Licenses

Application License Name	Required Education Level	Required Experience/Qualifications	Statutory Citation	Fees
Advanced Unlicensed Assistant (AUA)	200 contact hours of training in a program approved by the Oklahoma Board of Nursing or equivalent training.	Training or experience as a nursing assistant	59 O.S. §567.6a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$20.00 Renewal = \$25.00 Reinstatement = \$65.00
Licensed Practical Nurse (LPN) Single State License (SSL)	Completion of a state-approved practical nurse program Areas of study include nursing courses, body structure and function, basic nutrition, and personal/vocational relationships. Supervised clinical experience in care of adults, care of children, and maternal-newborn nursing.	Meet criteria for admission into a practical nursing education program.	59 O.S. §567.3a.4, 59 O.S. §567.6, 59 O.S. §567.7, 59 O.S. §567.18	Initial = \$85.00 Renewal = \$75.00 Reinstatement = \$115.00 Testing - \$200
Registered Nurse (RN) Single State License (SSL)	Associate or Bachelor's Degree in nursing from a state-Board-approved nursing education program Possible areas of study include biological and physical sciences, social and behavioral sciences, in addition to nursing courses. Supervised clinical experience in care of adults, care of children, maternal-newborn nursing, and psychiatric-mental health nursing	Meet criteria for admission into a college or university	59 O.S. §567.3a.3, 59 O.S. §567.5, 59 O.S. §567.7, 59 O.S. §567.18	Initial = \$85.00 Renewal = \$75.00 Reinstatement = \$115.00 Testing - \$200

Multistate (MSL) Registered Nurse (RN) or Licensed Practical Nurse (LPN) license	Must meet the requirements for licensure or renewal of licensure as required for SSL RN and SSL LPN, as well as the following Uniform Licensure Requirements: Has graduated or is eligible to graduate from a licensing-board-approved RN or LPN/Vocational Nurse (VN) prelicensure education program; or has graduated from a foreign RN or LPN/VN prelicensure education program that (a) has been approved by the authorized accrediting body in the applicable country and (b) has been verified by an independent credentials review agency to be comparable to a licensing-board-approved prelicensure education program; has, if a graduate of a foreign prelicensure education program, not taught in English or if English is not the individual's native language, successfully passed an English proficiency examination that includes the components of reading, speaking, writing and listening.	Meets qualifications for identified nursing education program.	59 O.S. §567.21. Article III (Nurse Licensure Compact)	Application and license fee = \$150; Renewal fee = \$125 Testing Service - \$200
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Advanced Practice Registered Nurse (APRN)- Certified Nurse Practitioner (CNP)	Completion of a formal educational nurse practitioner program accredited by Accreditation Commission for Education in Nursing or the Commission on Collegiate Nursing Education. Possible knowledge areas include communication, interviewing, basic physical exam, pathophysiology, health maintenance, management of chronic illness, and health teaching and counseling. Supervised clinical experience in health facilities. Completion of licensing requirements for a registered nurse. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition by the Oklahoma Board of Nursing	59 O.S. §567.3a.6 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00 Application - \$70
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Advanced Practice Registered Nurse (APRN) - Clinical Nurse Specialist (CNS)	· Master's Degree or higher with clinical specialization preparation · Specialty certification by a national certifying body · Supervised clinical experience in health facilities · Completion of licensing requirements for registered nurse Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Effective January 1, 2016, completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition from the Oklahoma Board of Nursing	59 O.S. §567.3a.7 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00
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Advanced Practice Registered Nurse (APRN) - Clinical Nurse Midwife (CNM)	Completion of a program of nurse midwifery accredited by the Accreditation Commission for Midwifery Education Possible areas of study include anatomy, physiology, chemistry, labor and delivery, family planning and gynecology, postpartum, and newborn and professional issues. Completion of licensing requirements for a registered nurse. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology (acute and/or primary), neonatal, pediatrics (acute and/or primary), women's health/gender related, or psychiatric/mental health. Completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic management and didactic and clinical preparation for prescribing incorporated throughout the program.	Current license to practice registered nursing in Oklahoma Certification in the specialty area by a national certifying body Current certificate of recognition from the Oklahoma Board of Nursing	59 O.S. §567.3a.8, 9 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00
Advanced Practice Registered Nurse (APRN) -Certified Registered Nurse Anesthetist (CRNA)	Completion of an educational program of a school of nurse anesthetists accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs/Schools Possible areas of study include anatomy, physiology, microbiology, chemistry, nutrition, psychology, and behavioral science. Supervised clinical experience in health facilities Completion of licensing requirements for a registered nurse Effective January 1, 2016, the applicant for initial licensure or licensure by endorsement as a CRNA must hold a graduate-level degree from a program preparing the graduate for certification as a nurse anesthetist accredited by the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs.	Current Oklahoma license to practice registered nursing. Certification in the specialty area by a national certifying body Current certificate of recognition from Oklahoma Board of Nursing	59 O.S. §567.3a.10 59 O.S. §567.5a 59 O.S. §567.7 59 O.S. §567.18	Initial = \$70.00 Renewal = \$40.00 Reinstatement = \$80.00

Occupational Regulation Blueprint

License Details

What is the license? Advanced Unlicensed Assistant (AUA) Certification¹

As of May 15, 2019, there were 504 Advanced Unlicensed Assistants actively certified in Oklahoma.

What does the license cover? Authority for unlicensed individuals who have successfully completed a Board-approved certified training program education program and certification testing to perform specified technical skills on patients in acute care settings under the direction and supervision of the Registered Nurse and Licensed Practical Nurse. [59 O.S. §567.3a(13)]

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1996.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

The Advanced Unlicensed Assistant (AUA) skill set includes multiple selected invasive procedures which require advanced training and competency assessment through written and skill testing. Should this certification go away, the AUA skill set would then be performed by an individual with a higher level of licensure.

Least Restrictive Means

What means is used to protect the public interest? A government certification

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4)? No. Private certification may be an option, but currently is not available.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board²

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

¹ 59 O.S. §§567.3a(13), 567.6a, and OAC 485:10-10

² The tasks performed by AUAs are delegated by higher levels of nursing licensure. The higher levels of licensure are members of the Board.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Licensed Practical Nurse – Single State License¹

As of May 15, 2019 there were 16,077 single-state Licensed Practical Nurses actively licensed in Oklahoma.

What does the license cover? In Oklahoma, there are three pathways to licensure as a Licensed Practical Nurse (LPN):

(1) Licensure authority for individuals who have successfully completed a Board-approved practical nursing education program that meets the requirements of OAC 485:10-5-6(e)(1) and (2), and showing the diploma or degree and date conferred; or

(2) Licensure authority for an individual who has completed equivalent courses through a state approved registered nursing education program of nursing with a minimum overall grade point average of 2.0 and a grade of a “C” or higher in all nursing courses; or

(3) Licensure authority for an individual who has completed a registered nursing education program in a foreign country and meets through equivalent courses the requirements of OAC 485:10-9-2(d).

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate licensed practical nursing, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements. Enhanced Nurse Licensure Compact information is presented in greater detail in the “Multistate Registered Nurse or Licensed Practical Nurse Blueprint”.

Individuals obtaining licensure through equivalency as described in (2) and (3) above may not be recognized as LPNs in other surrounding states, as they have not completed a state-approved nursing education program. In addition, licensees granted licensure through equivalency in (2) above are not eligible for a multistate license as they do not meet the Uniform Core Licensure Requirement of having graduated from a licensing-board-approved RN or LPN prelicensure education program [59 O.S. §567.21, Article III(c)(2)].

Effective May 25, 2015, a Veteran who has completed Basic Medical Technician Corpsman Program (Navy/Air Force), Air Force Independent Duty Medical Technician, or Army Health Care Specialist training may participate in the Medic Veteran to Licensed Practical Nurse Bridge Course. Veterans with such prior military medical training and experience may transition into practical nursing education programs through advanced placement procedures [59 O.S. §567.20]. The process of transition shall include the provisions of Section 4100.3 of Title 59 of the Oklahoma Statutes. The Medic Veteran to

¹ 59 O.S. §§567.3a(4), 567.6, and OAC 485:10-9

Licensed Practical Nurse Bridge Course guidelines can be accessed at:
<http://nursing.ok.gov/medicveteranbridgegl.pdf> .

In addition, individuals who have successfully completed the Army Practical Nursing Program and the Community College of the Air Force (practical nursing) are eligible to apply for LPN licensure.

Licensed Practical Nursing is the practice nursing under the supervision or direction of a registered nurse, licensed physician or dentist [59 O.S. §567.3a(4)].

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1953.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The Licensed Practical Nurse directed scope of practice of nursing includes contribution to the assessment of the health status of individuals, participates in the development and modification of the nursing plan of care, implements the appropriate aspects of the plan of care, delegates tasks as may be safely performed by others, provides safe and effective nursing care, participates in the evaluation of responses to interventions, teaches basic nursing skills and related principles, performs additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and delegates defined nursing tasks to Advanced Unlicensed Assistants.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. Licensed Practical Nurses are licensed in all 50 states and District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board²

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Three.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

² The tasks performed by LPNs may be delegated by higher levels of nursing licensure. The higher levels of licensure are members of the Board.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Registered Nurse - Single State License¹

As of May 15, 2019, there were 44,160 Registered Nurses actively licensed in Oklahoma.

What does the license cover? In Oklahoma, there are two pathways to licensure as a Registered Nurse (RN):

(1) Licensure by Examination: Licensure authority for individuals who have successfully completed a Board-approved registered nursing education program that meets the requirements of OAC 485:10-5-6(d)(1, (2) and (3); and showing the diploma or degree and date conferred; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure by examination, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-7-2(a)(6) and (7). Licensure authority exists for an individual who has graduated from a government-approved post-secondary nursing education program in a foreign country and meets the requirements of OAC 485:10-7-2(d).

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate registered nursing license, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements. Enhanced Nurse Licensure Compact information is presented in greater detail in the "Multistate Registered Nurse or Licensed Practical Nurse Blueprint".

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1910.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The Registered Nurse scope of practice of nursing includes assessing the health status of individuals, analyzing assessment data in determining nursing care needs, establishing goals to meet identified health care needs; planning the strategy of nursing care; prioritizing nursing interventions; implementing the strategy of care; delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Nursing Practice Act; providing safe and effective care directly or indirectly; evaluating responses to interventions; teaching the principles and practice of nursing; managing and supervising the practice of nursing; collaborating with other health professionals in the management of health care; performing

¹ 59 O.S. §§567.3a(3), 567.5, and OAC 485:10-7

additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and delegates defined nursing tasks to Advanced Unlicensed Assistants.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. Registered Nurses are licensed in all 50 states and the District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Six.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Multistate Registered Nurse or Licensed Practical Nurse License¹

As of May 15, 2019, there were 4,661 Registered Nurses and 944 Licensed Practical Nurses actively licensed with a multistate license in Oklahoma.

What does the license cover? In Oklahoma, there are two pathways to multistate licensure as a Registered Nurse (RN) and a Licensed Practical Nurse (LPN):

(1) Licensure by Examination: Licensure authority for individuals who have successfully completed a Board-approved registered nursing education program that meets the requirements of OAC 485:10-5-6(d)(1), (2) and (3); and showing the diploma or degree and date conferred; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure by examination, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-7-2(a)(6) and (7) for RNs and OAC 485:10-9-2(a)(5) and (6) for LPNs. Licensure authority exists for an individual who has graduated from a government-approved post-secondary nursing education program in a foreign country and meets the requirements of OAC 485:10-7-2(d) for RNs and OAC 485: 10-9-2(d) for LPNs .

Effective January 19, 2018, with the implementation of the enhanced Nurse Licensure Compact (eNLC), individuals could apply for a multistate licensed practical nursing or registered nursing license, allowing the multistate licensees to practice in person or via telehealth in both Oklahoma and other eNLC party states. Thus far, thirty-three states have enacted eNLC legislation. All applicants for a multistate license through the eNLC are required to meet the same Uniform Licensure Requirements as identified in the eNLC (59 OS §567.21, Article III, c).

As identified in 59 O.S. §567.21, Article I,b, the general purposes of the enhanced Nurse Licensure Compact are to facilitate the states' responsibility to protect the public's health and safety; ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation; facilitate the exchanges of information among party states in the areas of nurse regulation, investigation and adverse actions; promote compliance with the laws governing the practice of nursing in each jurisdiction; invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party-state licenses; decrease redundancies in the consideration and issuance of nurse licenses; and provide opportunities for interstate practice by nurses (RNs and LPNs) who meet the uniform license requirements.

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? The eNLC was nationally implemented in January 2018.

¹ 59 O.S. §§567.20, 567.5, and 567.6; OAC 485:10-7 and OAC 485:10-9

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes.

The Multistate Registered Nurse and Licensed Practical Nurse scopes of practice are consistent with the scopes of practice noted on the Registered Nurse and Licensed Practical Nurse Single State Occupational Regulation Blueprints.

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. 33 states have enacted the enhanced Nurse Licensure Compact (eNLC), which increases access to care while maintaining public protection at the state level. Under the eNLC, licensed registered nurses and licensed practical nurses can practice in other eNLC party states without having to obtain licensure.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Six RNs and three LPNs.

Is the Board controlled by these active market participants (see Annex, item 6)? Yes.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Nurse Practitioner¹

As of May 15, 2019, there were 3,332 Advanced Practice Registered Nurse – Certified Nurse Practitioners actively licensed in Oklahoma; of the 3,332 individuals, 2,698 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Nurse Practitioner (CNP):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse practitioner education program meeting the educational requirements of OAC 485:10-15-6; hold national APRN-CNP national certification that is congruent with the advanced education in a specialty area recognized by the Board (12 current and 6 retired national certifications) [59 OS § 567.5a; OAC485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1980.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNP scope of practice of nursing includes providing comprehensive health care to clients in a specific population focus consistent with advanced educational preparation as a Certified Nurse Practitioner and national certification including promotion and maintenance of health; prevention of illness and disability; diagnosis; and, under the supervision by a physician licensed in Oklahoma, prescription of medications, treatments, and devices for acute and chronic conditions and diseases; guidance and counseling services; consultation and/or collaboration with other health care providers and community resources; and referral to other health care providers and community resources [OAC 485:10-15-6(b)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNPs are regulated in 50 states and the District of Columbia.

¹ 59 O.S. §§567.3a(6), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Clinical Nurse Specialist¹

As of May 15, 2019, there were 285 Advanced Practice Registered Nurse – Clinical Nurse Specialists actively licensed in Oklahoma; of the 285 individuals, 184 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Clinical Nurse Specialist (CNS):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing clinical nurse specialist education program meeting the educational requirements of OAC 485:10-15-7; hold national APRN-CNS national certification that is congruent with the advanced education in a specialty area recognized by the Board (4 current and 34 retired national certifications) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1991.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNS accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the scope of practice/role definition statements for the Clinical Nurse Specialist. The scope of practice of nursing includes practicing as an expert clinician in the provision of direct nursing care to a selected population of patients or clients in any setting, including private practice; managing the care of patients or clients with complex nursing problems; enhancing patient or client care by integrating the competencies of clinical practice, education, consultation, and research; and referring patients or clients to other services [59 O.S. §567.3a(7)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNSs are regulated in 47 states and the District of Columbia.

¹ 59 O.S. §§567.3a(7), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? Two.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Nurse Midwife¹

As of May 15, 2019, there were 64 Certified Nurse Midwives actively licensed in Oklahoma; of the 64 individuals, 44 have prescriptive authority.

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Nurse Midwife (CNM):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse midwifery education program meeting the educational preparation requirements of OAC 485:10-15-8; hold national certification according to the requirements of the American College of Nurse-Midwives (one current national certification) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1980.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. The APRN-CNM accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the scope of practice/role definition statements for the Certified Nurse Midwife. The scope of practice of nursing includes providing management of care of normal newborns and women, antepartally, intrapartally, postpartally and gynecologically, occurring within a health care system which provides for medical consultation, medical management or referral, and is in accord with standards for nurse-midwifery as defined by the American College of Nurse-Midwives [59 O.S. §567.3a(9)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CNMs are regulated in 50 states and the District of Columbia.

¹ 59 O.S. §§567.3a(8), 567.5a and OAC 485:10-15

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? None.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Occupational Regulation Blueprint

License Details

What is the license? Advanced Practice Registered Nurse – Certified Registered Nurse Anesthetist¹

As of May 15, 2019, there were 711 Advanced Practice Registered Nurse – Certified Registered Nurse Anesthetists (CRNA) actively licensed in Oklahoma; of the 711 CRNAs, 480 have authority to select, order, obtain and administer drugs (prescriptive authority).

What does the license cover? In Oklahoma, there are two pathways to licensure as an Advanced Practice Registered Nurse (APRN) Certified Registered Nurse Anesthetist (CRNA):

(1) Licensure by Initial Application: Hold licensure to practice as a Registered Nurse in Oklahoma (single-state RN or multistate RN); completion of an accredited graduate level or higher advanced practice registered nursing nurse anesthesia education program meeting the educational preparation requirements of OAC 485:10-15-9; hold national certification by the National Board of Certification and Recertification for Nurse Anesthetists that is congruent with the advanced education in a specialty area recognized by the Board (one current national certification) [59 OS § 567.5a; OAC 485:10-15-4(a)]; or

(2) Licensure by Endorsement: In addition to meeting the requirements cited for licensure through initial application, the individual must demonstrate evidence of continued qualifications for practice through completion of at least one of the four options included in OAC 485:10-15-4(c)(2)(A-D).

What Board regulates the license? Oklahoma Board of Nursing.

How long has the occupation been regulated? Since 1976.

Compelling Public Interest

What is the compelling public interest (See Annex, item 1)? Public health and safety

Is this public interest a demonstrated, real, significant, and probable harm? (See Annex, item 2)

Yes. A CRNA, administers anesthesia under the supervision of a medical doctor, osteopathic physician, podiatric physician or dentist licensed in this state, and under conditions in which timely, on-site consultation by such medical doctor, osteopathic physician, podiatric physician or dentist is available [59 O.S. §567.3a(10)(a)(2)].

Least Restrictive Means

What means is used to protect the public interest? An occupational license.

Is it the least restrictive means (see Annex, item 3), which sufficiently protects the interest (see Annex, item 4) Yes. APRN-CRNAs are regulated in 48 states and the District of Columbia.

If the answer to the above question is “No”, then do not use that type of regulation to protect public interest.

¹ 59 O.S. §§567.3a(10), 567.5a and OAC 485:10-15

-----Continue only if Occupational Licensing was Used-----

Controlling Number of Market Participants on the Board

How many members are on the regulatory board? 11.

How many of them are active market participants (see Annex, item 5)? One.

Is the Board controlled by these active market participants (see Annex, item 6)? No.

-----Continue only if the Board is controlled by Market Participants-----

Active Supervision of the Board

Is there active state supervision of the Board (see Annex, item 7)? Yes, per Executive Order 2019-17, identified non-rulemaking actions proposed by the Board of Nursing are submitted to the Office of the Attorney General for review and written analysis, with deference to any recommendation made by the Office of the Attorney General.

If the answer to the above question is “No”, then board’s conduct may violate the Sherman Act and the board’s actions are not protected by state immunity.

Oklahoma Board of Nursing

I. Fees/Expenditures

1. Fee Schedule in Oklahoma Administrative Code – as below:

485:10-1-3. Fees

(a) Fee schedule.

(1) **Initial applications.** The following fees shall be charged by the Board of Nursing for initial applications:

- (A) Registered Nurse/Licensed Practical Nurse
 - (i) Licensure examination fee - \$85.00
 - (ii) Endorsement fee - \$85.00
 - (iii) Education equivalence evaluation fee - \$40.00
 - (iv) Cost of national examination
 - (v) R.N. examination challenge of results fee - \$200.00
 - (vi) LPN examination challenge of results fee - \$125.00
 - (vii) Examination review fee - \$90.00
 - (viii) Temporary license fee - \$10.00
- (B) Advanced Unlicensed Assistant
 - (i) Certification examination fee - \$20.00
 - (ii) Cost of examination
- (C) Advanced Practice Registered Nurses
 - (i) Licensure fee - \$70.00
 - (ii) Prescriptive authority fee - \$85.00
 - (iii) Authority to order, select, obtain and administer drugs - \$85.00

(2) **Renewal.** The following fees shall be charged in accordance to the biennial licensure/certificate/recognition renewal schedule established by the Board:

- (A) Registered Nurse/Licensed Practical Nurse license - \$75.00
- (B) Advanced Unlicensed Assistant certificate - \$25.00
- (C) Advanced Practice Registered Nurse licensure - \$40.00
- (D) Prescriptive authority - \$40.00
- (E) Authority to order, select, obtain and administer drugs - \$40.00
- (F) Reinstatement of lapsed license/ certificate/recognition - renewal fee(s) + \$40.00
- (G) Return to active - renewal fee(s) + \$40.00

(3) **Miscellaneous fees.** The following miscellaneous fees shall be charged by the Board:

- (A) Transcripts from closed schools of nursing - \$15.00
- (B) Duplication or modification of license/certificate/recognition - \$25.00
- (C) Certified verification of license/ certificate/recognition - \$40.00
- (D) Written verification of status of license/certificate/recognition - \$10.00 per name
- (E) Supervisory Physician change request - \$10.00
- (F) Requested review of contact hours for Prescriptive Authority - \$70.00
- (G) Corporation certificate - \$15.00
- (H) Certificate for framing - \$15.00
- (I) Insufficient funds processing fee - \$25.00
- (J) Facsimile (Fax) fee (per page) - \$1.00
- (K) Oklahoma Nursing Practice Act, Rules - \$15.00
- (L) Full survey visit to a nursing education program - \$500.00
- (M) Consultative visit to a nursing education program - \$250.00

(4) **Public access, open records.** The following public access, open record fees shall be charged by the Board:

- (A) Certification of public records (per page) - \$1.00
- (B) Duplication of public records (per page) - \$0.25
- (C) Computer address list - \$0.01/record + \$4.50/1000 labels + postage, \$40.00 minimum charge
- (D) Staff research time, when available (per hour) - \$20.00
- (E) Computer research time, when available (per hour) - \$100.00

2. Statute Authority for cost of Multistate license and renewal

59 OS Section 567.7 (D): The application fee for a multistate license issued pursuant to Section 5 of this act shall be One Hundred Fifty Dollars (\$150.00). The biennial multistate license renewal fee shall be One Hundred Twenty-five Dollars (\$125.00)

3. Statute Authority for Administrative Penalty and Recovery Costs:

59 OS Section 567.8 (J)

1. Any person who has been determined by the Board to have violated any provisions of the Oklahoma Nursing Practice Act or any rule or order issued pursuant thereto shall be liable for an administrative penalty not to exceed Five Hundred Dollars (\$500.00) for each count for which any holder of a certificate or license has been determined to be in violation of the Oklahoma Nursing Practice Act or any rule promulgated or order issued pursuant thereto.
2. The amount of the penalty shall be assessed by the Board pursuant to the provisions of this section, after notice and an opportunity for hearing is given to the accused. In determining the amount of the penalty, the Board shall include, but not be limited to, consideration of the nature, circumstances, and gravity of the violation and, with respect to the person found to have committed the violation, the degree of culpability, the effect on ability of the person to continue to practice, and any show of good faith in attempting to achieve compliance with the provisions of the Oklahoma Nursing Practice Act.

59 OS Section 567.8 (M) In the event disciplinary action is imposed in an administrative proceeding, the Board shall have the authority to recover the monies expended by the Board in pursuing any disciplinary action, including but not limited to costs of investigation, probation or monitoring fees, administrative costs, witness fees, attorney fees and court costs.

4. FY2018 Revenue	Amount	Percent
Fees	\$ 3,785,966.72	95.4%
Less 10% to State General Revenue Fund	(\$ 378,594.69)	
Administrative Penalties	\$ 178,000.00	4.5%
Recovery Costs	\$ 4,328.74	0.1%
Total Revenue	\$ 3,589,700.77	

5. FY 2018 Expenditures \$3,393.045.98

Agency is a non-appropriated agency, with revenue utilized during FY 2018 to fund payroll and operational expenditures for the statute directive to:

A. Regulate licensed nurses and advanced unlicensed assistant certifications

Licenses/Recognitions/Certifications	FY2018 Number
Registered Nurses	56,388
Licensed Practical Nurses	18,871
Advanced Practice Registered Nurses	4,034
Prescriptive Authority Recognitions	3,204
Advanced Unlicensed Assistant Certifications	539
Total Licenses/Recognitions/Certifications	83,036

B. Regulate nursing education programs.

Type of Program	Number of Programs/Campuses
Advanced Unlicensed Assistant	7 programs
Licensed Practical Nurse	29 programs/49 campuses
Registered Nurse	29 programs/51 campuses
Advanced Practice Registered Nurse	4 programs

C. Provide initial licensure (exam or endorsement), biennial renewal, multistate licensure to existing licensees, and reinstatement of licensure of duly qualified applicants; process licensure modifications; issue licensure verifications.

Total Applications Received	Average Processing Time	% Received Online
51,511	1.37 business days	99%

D. Investigate alleged violations of the nursing practice act; conduct administrative settlement conferences and/or licensure hearings upon allegations of violations; issue corrective action or disciplinary action; monitor compliance.

Number of alleged violations received	2,172
Number of alleged violations requiring an investigative case be opened	562
Number of settlement conferences	238
Number of administrative hearings	92
Number of corrective action orders issued	70
Number of nurses disciplined	309
Rate of nurses disciplined to total number of licensees regulated	0.4%
Number of compliance cases monitored	277
Average number of months for incident/case resolution	2.5 months

- E. Maintain a Peer Assistance Program for nurses who competencies may be compromised by substance use.

Number of Participants	% Successful in Program	Relapse Rate
205	85%	4%

- F. Maintain records of all licensed nurses and advanced unlicensed assistants; provide records under the provisions of the Open Records Act.

Number of Licensure Records Maintained	Number of Open Record Requests
181,970	2,471

II. Implementation of New Laws

1. HB1373 Legislation related to felony convictions

The Board formed a subcommittee to work on this legislative concept in November 2018. The subcommittee has reviewed 178 criminal offenses in the Oklahoma statutes. The subcommittee plans to present to the full Board at the July 2019 Board Meeting, a list of felony convictions that substantially relate to the practice of nursing and poses a reasonable threat to public safety that would prevent licensure. During the September 2019 Board Meeting, the Board will review and adopt emergency rules for submission to Governor to implement the provisions of HB1373 by November 1, 2019.

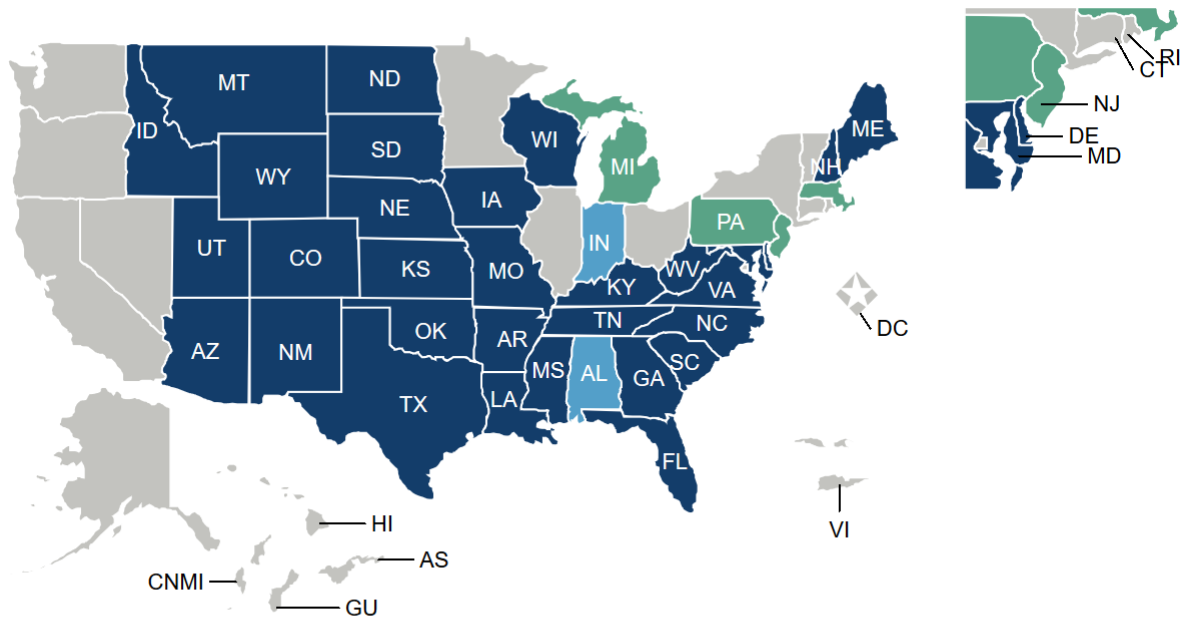
2. SB 670 Legislation related to military member/spouse reciprocity

Board staff drafted new language to be placed in all endorsement applications to readily identify applicants who are active duty military or the spouse of an active duty military individual. In addition, Board staff are working with the Office of Management and Enterprise Services and Oklahoma Interactive in developing a process in which these online applications will be accepted without payment, ensuring that the fee for the first period of license issuance is waived.

III. Implementation of HB 2933, codified at 59 O.S. § 4003

The Board is exempt from this statute, see 59 O.S. § 4003 (A).

States in the Nurse Licensure Compact



State with pending NLC legislation NLC State NLC enacted: Awaiting implementation.

Veterinary Medical Examiners, Board of Occupational Licenses

Application License Name	Required Education Level	Required Experience/Qualifications	Statutory Citation	Fees
Registered Veterinary Technician	Associate's Degree in Applied Science Possible areas of study include a basic core of English, history, and government. Subjects related to this field include physiology, nutrition, laboratory techniques, animal nursing, pharmacology, and radiology. Eight-week preceptor at a veterinary clinic under a licensed veterinarian.	State examination.	O.S. § 698.1	Application Fee - \$430 (for national exam and Application Fee total) Renewal fee - \$45
Veterinarians	Graduate from an accredited college with a Doctor of Veterinary Medicine Degree Possible areas of study include physical and biological sciences and veterinary medicine. Professional training includes considerable practical experience through rotations that provide experience in diagnosing and treating animal diseases, performing surgery, and performing laboratory work in anatomy, biochemistry, and other medical and scientific subjects.	Three recommendations must be submitted. The recommendations must be a representation of clinical skills and competence and authored by a colleague who is currently licensed in a state of the United States and in good standing with licensing jurisdiction of that state. Good moral character At least 21 years of age	O.S. § 698.1	Renewal fee - \$225 NAVLE - \$790 OSBE - \$150
Non Veterinary Equine Dental Technician	complete 80 hours of training from a Board accepted program or certification from International Association of Equine Dentistry or its equivalent approved by the Board	Not applicable	O.S. § 698.1	\$200/year Application fee - \$200

Non Veterinary Reproductive Service Technician	hold a Ph.D w/emphasis in animal reproductive physiology, or Master of Science w/emphasis in animal reproductive physiology in addition to having Board Certification from American Registry Professional Animal Scientists	Not applicable	O.S.§ 698.1	\$200/year Application fee - \$200
Faculty-Veterinarian	Doctor of Veterinary Medicine and have Faculty position at one of states institution of higher learning	Not applicable	O.S.§ 698.1	Application fee - \$125 Renewal fee - \$175
Certified Animal Euthanasia Technician	High school diploma or GED	Training and passing of state examination	O.S.§ 698.1	Certification fee - \$200 Renewal fee is - \$40 per year



Oklahoma State Board of Veterinary Medical Examiners

2920 N. Lincoln Blvd., Suite C
Oklahoma City, OK 73105
Main (405) 522-8831 Fax (405) 522-8034

Occupational License Blueprint

License Details

Doctor of Veterinary Medicine (DVM) - a person who has received a degree in veterinary medicine or its equivalent from a school of veterinary medicine; “Licensed veterinarian” means any veterinarian who holds an active license to practice veterinary medicine in this state;

Faculty - veterinary faculty license issued to a veterinarian associated with one of the state’s institutions of higher learning and involved in the instructional program of either undergraduate or graduate veterinary medical students.

Non-veterinary equine dental care provider – individual that has completed at least eighty (80) hours of training in equine dentistry at the Texas Institute of Equine Dentistry, the Academy of Equine Dentistry or a similar program approved by the Board.

Non-veterinary reproductive services technician – individual who qualifies and passes a written certification examination approved by the Board and who holds a Ph.D. from an accredited college or university with emphasis in animal reproductive physiology, or a Master of Science degree from an accredited college or university with emphasis in animal reproductive physiology and Board Certification in animal physiology by the American Registry of Professional Animal Scientists.

Certified Euthanasia technician (CAET) - must be an employee of a law enforcement agency, an animal control agency, or animal shelter that is recognized and approved by the Board, who is certified by the Board and trained to administer sodium pentobarbital to euthanize injured, sick, homeless or unwanted domestic pets and other animals. Be at least eighteen years old, take and pass a written jurisprudence examination and a practical examination for euthanasia of animals.

What does the license cover after licensing and meeting qualifications

Doctor of Veterinary Medicine – a health professional who specializes in the causes and treatment of diseases and disorders of domestic and wild animals; allows diagnosing, surgery, treating, correcting, changing, relieving, physical or mental conditions including the prescribing

or administering of any drug, medicine, biologic, apparatus, application, anesthetic, telemedicine, animal chiropractic diagnosis and treatment, or other therapeutic diagnostic substance or technique; dentistry; complementary and alternative therapies; provides health care to the state's animal population, including, livestock, poultry, and pets.

Faculty veterinarian – same as a Doctor of Veterinary Medicine but can only practice at the state's institutions of higher learning - Oklahoma State University. This is considered a modified license.

Non-veterinary equine dental care provider – Allows the removal of enamel points and the smoothing, contouring and leveling of dental arcades and incisors of equine and other farm animals. It shall not include dental procedures on canines and felines.

Non-veterinary reproductive services technician – shall be limited to nonsurgical embryo transfer in ruminating animals including cattle, sheep, goats, farmed deer and other ruminating exotic animals such as those found in zoos, and may include basic ultrasonography of their ovaries to evaluate the response to embryo-transfer-associated procedures and of the uterus to determine pregnancy by the detection of a heartbeat within the transferred embryo at or greater than twenty-eight (28) days of gestation of such ruminating animals

Certified euthanasia technician - an employee of a law enforcement agency, an animal control agency, or animal shelter that is recognized and approved by the Board, who is certified by the Board and trained to administer sodium pentobarbital to euthanize injured, sick, homeless or unwanted domestic pets and other animals. Once certified by the Board they are allowed to obtain an Oklahoma Bureau of Narcotics and Dangerous Drug Registration as well as a Drug Enforcement Administration Registration to humanely euthanize animals.

What is the compelling public interest

Doctor of Veterinary Medicine - As licensed professionals overseeing and safeguarding the use of prescription drugs in animals, a veterinarian helps ensure the proper administration, dosage and usage of veterinary drugs, including drug withdrawal times for food animals. Without such safeguards drug diversion could occur that may be used for non-medicinal purposes or contaminated animal food sources could occur, thereby threatening public health and safety. The veterinarians are responsible for the safety of food of animal origin through animal inspections and certification and also checking for treating zoonotic (diseases that are spread from animals to people) and contagious diseases.

Faculty veterinarian – same as a Doctor of Veterinary Medicine but can only practice at the state's institutions of higher learning - Oklahoma State University.

Non-veterinary equine dental care provider – Being registered or holding a permit protects the public and animals from incompetent individuals. Contagious diseases, both to humans and to animals, can be spread by the services performed by unlicensed and untrained lay people.

Non-veterinary reproductive services technician - Being registered or holding a permit protects the public and animals from incompetent individuals. Contagious diseases, both to humans and to animals, can be spread by the services performed by unlicensed and untrained lay people. Furthermore, food animals treated by unlicensed individuals could have drug residues that go undetected and contaminate human food supplies.

Certified euthanasia technician - Once certified by the Board they are allowed to obtain an Oklahoma Bureau of Narcotics and Dangerous Drug Registration as well as a Drug Enforcement Administration Registration . The Board properly trains these individuals the pharmacology of, safe and humane administration of, and proper storage of controlled dangerous substances for animal sedation, tranquilization, and humane euthanasia. Also, euthanasia technicians are trained to humanely euthanize the state's population of unwanted, ill, or injured companion animals and some wildlife as necessary; without oversight by the Veterinary Board drug diversion could easily occur. The Board conducts an extensive background check (fingerprint cards) with the OK State Bureau of Investigations as well as the Federal Bureau of Investigations to ensure all individuals have not had any adverse events in their past.

Least restrictive means

This is the least restrictive means –the licensing/credentialing of veterinarians, non-veterinary technicians and euthanasia technicians is very crucial because of the potential risk of drug diversion by an unregulated individual. Research shows an unregulated person is more likely to divert a controlled substance (opioids) for their own use, friends, relatives or even selling them “on the street”. When an individual has nothing at stake such as a license they are more likely to divert an opioid, (they have nothing to lose). An individual that is licensed or credentialed will more often give up their family, friends but typically not their career.

Credentialing the non-veterinary group gains them credibility and raises the standard of those who perform equine dental floating and reproductive services; these individuals can assist veterinarians on the farms and ranches of Oklahoma by referring cases that enable veterinarians to detect and diagnose diseases in a more timely fashion and protect the herd health in Oklahoma. Statistics show that the credentialed non-veterinary group are more likely to partner with a licensed veterinarian.

Controlling number of market participants on the Board

6 Board members – 5 licensed veterinarians and 1 lay member
There is active supervision of the Board
Governor appoints members – Senate confirms

Actions of the Board have oversight by the Attorney General rendering an official opinion on the Board actions. The Board also contracts with the Attorney General – Legal Counsel section and has a part-time (20 hrs) Assistant Attorney General on staff to guide the Board.

Expand on the fees collected by your Agency/Board

Renewals of Licenses	\$498,000	<i>(DVM 2000) (RVT 565) (CAET 125) (Faculty 40)(Non-Vet 19)</i>
Fees for New Licenses	50,000	
SUB TOTAL	\$548,000	
10% PAYABLE	<u>-54,800</u>	
TOTAL	\$493,200	

How does your Agency/Board plan to implement new laws relating to felony convictions and military member/spouse reciprocity

We are proposing new statutes to be added to the Practice Act next year and the Board meets a minimum of 6 meetings per year, which will allow us to issue a license in a timely manner.

How your Agency/Board has, or will, implement provisions in last session's HB 2933, codified at 59 O.S. § 4003, which requires a one-time, one-year, fee waiver for low-income individuals.

The Bill has exception for health care profession licenses/certifications; we are a health care profession. (Veterinary Medical Examiners)