

The Senate Committee on Regulated Industries and Utilities offered the following substitute to HB 1046:

A BILL TO BE ENTITLED
AN ACT

1 To amend Code Section 31-10-15 and Chapter 34 of Title 43 of the Official Code of Georgia
2 Annotated, relating to death certificates and physicians, physician assistants, and others,
3 respectively, so as to revise regulations concerning advanced practice registered nurses and
4 physician assistants; to authorize advanced practice registered nurses and physician assistants
5 to sign death certificates; to revise provisions relating to the number of advanced practice
6 registered nurses and physician assistants that a physician can authorize and supervise at any
7 one time; to provide for related matters; to provide for effective dates; to repeal conflicting
8 laws; and for other purposes.

9 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

10 **PART I**
11 **SECTION 1-1.**

12 Code Section 31-10-15 of the Official Code of Georgia Annotated, relating to death
13 certificates, filing, medical certification, forwarding death certificate to decedent's county of
14 residence, and purging voter registration list, is amended by revising subsections (c) and (e)
15 as follows:

16 "(c)(1) The medical certification as to the cause and circumstances of death shall be
17 completed, signed, and returned to the funeral director or person acting as such within 72
18 hours after death by the physician, or advanced practice registered nurse acting pursuant
19 to the authority of Code Sections 43-34-23 and 43-34-25 or licensed physician assistant
20 acting pursuant to the authority of Code Sections 43-34-23 and 43-34-103, who is in
21 charge of the patient's care for the illness or condition which resulted in death, except
22 when inquiry is required by Article 2 of Chapter 16 of Title 45, the 'Georgia Death
23 Investigation Act.' In the absence of said physician, advanced practice registered nurse,
24 or licensed physician assistant or with that physician's approval, the certificate may be
25 completed and signed by an associate physician, the chief medical officer of the
26 institution in which death occurred, or the physician who performed an autopsy upon the
27 decedent, provided that such individual has access to the medical history of the case,
28 views the deceased at or after death, and death is due to natural causes. If, 30 days after
29 a death, the physician, or advanced practice registered nurse acting pursuant to the
30 authority of Code Sections 43-34-23 and 43-34-25 or licensed physician assistant acting
31 pursuant to the authority of Code Sections 43-34-23 and 43-34-103, who is in charge of
32 the patient's care for the illness or condition which resulted in death has failed to
33 complete, sign, and return the medical certification as to the cause and circumstances of
34 death to the funeral director or person acting as such, the funeral director or person acting
35 as such shall be authorized to report such physician, advanced practice registered nurse,
36 or licensed physician assistant to their respective licensing boards for disciplinary action
37 ~~to the Georgia Composite Medical Board for discipline pursuant to Code~~
38 ~~Section 43-34-8.~~

39 (2) In any area in this state which is in a state of emergency as declared by the Governor
40 due to an influenza pandemic, in addition to any other person authorized by law to
41 complete and sign a death certificate, any registered professional nurse employed by a
42 long-term care facility, ~~advanced practice nurse, physician assistant,~~ registered nurse

43 employed by a home health agency, or nursing supervisor employed by a hospital shall
44 be authorized to complete and sign the death certificate, provided that such person has
45 access to the medical history of the case, such person views the deceased at or after death,
46 the death is due to natural causes, and an inquiry is not required under Article 2 of
47 Chapter 16 of Title 45, the 'Georgia Death Investigation Act.' In such a state of
48 emergency, the death certificate shall be filed by the funeral director in accordance with
49 subsection (b) of this Code section; or, if the certificate is not completed and signed by
50 an appropriate physician, advanced practice registered nurse acting pursuant to the
51 authority of Code Sections 43-34-23 and 43-34-25, licensed physician assistant acting
52 pursuant to the authority of Code Sections 43-34-23 and 43-34-103, or coroner, the public
53 health director of preparedness shall cause the death certificate to be completed, signed,
54 and filed by some other authorized person within ten days after death.

55 (3) An authorized individual completing and signing a death certificate in good faith and
56 in accordance with this subsection shall be immune from civil liability for any acts or
57 omissions relating to the medical certification, absent wanton misconduct or intentional
58 wrongdoing. This immunity is in addition to any other legal immunity from liability to
59 which such individuals may be entitled."

60 "(e) If the cause of death cannot be determined within 48 hours after death, the medical
61 certification shall be completed as provided by regulation. The attending physician,
62 advanced practice registered nurse acting pursuant to the authority of Code
63 Sections 43-34-23 and 43-34-25, licensed physician assistant acting pursuant to the
64 authority of Code Sections 43-34-23 and 43-34-103, or coroner shall give the funeral
65 director or person acting as such notice of the reason for the delay, and final disposition of
66 the body shall not be made until authorized by the attending physician, coroner, or medical
67 examiner."

SECTION 1-2.

68

69 Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians,
70 physician assistants, and others, is amended by revising subparagraph (b)(1)(B) of Code
71 Section 43-34-23, relating to delegation of authority to nurse or physician assistant, as
72 follows:

73 "(B) A physician may delegate to those ~~health-care~~ healthcare professionals identified
74 in subparagraph (A) of this paragraph:

75 (i) The authority to order controlled substances selected from a formulary of such
76 drugs established by the board and the authority to order dangerous drugs, medical
77 treatments, and diagnostic studies;

78 (ii) The authority to request, receive, and sign for professional samples and to
79 distribute professional samples to patients. The office or facility at which the ~~health~~
80 ~~care~~ healthcare professional identified in subparagraph (A) of this paragraph is
81 working shall maintain a general list of the professional samples approved by the
82 delegating physician for request, receipt, and distribution by the ~~health-care~~ healthcare
83 professional identified in subparagraph (A) of this paragraph as well as a complete list
84 of the specific number and dosage of each professional sample and medication
85 voucher received. Professional samples that are distributed by a ~~health-care~~
86 healthcare professional identified in subparagraph (A) of this paragraph shall be so
87 noted in the patient's medical record. In addition to the requirements of this Code
88 section, all professional samples shall be maintained as required by applicable state
89 and federal laws and regulations; and

90 (iii) The authority to sign, certify, and endorse all documents relating to ~~health-care~~
91 healthcare provided to a patient within his or her scope of authorized practice,
92 including, but not limited to, documents relating to physical examination forms of all
93 state agencies and verification and evaluation forms of the Department of Human
94 Services, the State Board of Education, local boards of education, the Department of

95 Community Health, and the Department of Corrections; provided, however, that a
96 ~~health care~~ healthcare professional identified in subparagraph (A) of this paragraph
97 shall not have the authority to ~~sign death certificates~~ or assign a percentage of a
98 disability rating.

99 Healthcare professionals identified in subparagraph (A) of this paragraph must
100 complete biennial continuing education regarding the recognition and documentation
101 of the causes of death and appropriate execution of death certificates, as approved by
102 the board."

103 **SECTION 1-3.**

104 Said chapter is further amended by revising subsections (b) and (e.1) of Code
105 Section 43-34-25, relating to delegation of certain medical acts to advanced practice
106 registered nurse, construction and limitations of such delegation, definitions, conditions of
107 nurse protocol, and issuance of prescription drug orders, as follows:

108 "(b) In addition to and without limiting the authority granted pursuant to Code
109 Section 43-34-23, a physician may delegate to an advanced practice registered nurse in
110 accordance with a nurse protocol agreement the authority to order drugs, medical devices,
111 medical treatments, diagnostic studies, or radiographic imaging tests or to sign death
112 certificates. A selection box shall be added to death certificates to be checked off by
113 nonphysicians completing the form."

114 "(e.1) Except for ~~death certificates~~ and assigning a percentage of a disability rating, an
115 advanced practice registered nurse may be delegated the authority to sign, certify, and
116 endorse all documents relating to ~~health care~~ healthcare provided to a patient within his or
117 her scope of authorized practice, including, but not limited to, documents relating to
118 physical examination forms of all state agencies and verification and evaluation forms of
119 the Department of Human Services, the State Board of Education, local boards of
120 education, the Department of Community Health, and the Department of Corrections."

121 **SECTION 1-4.**

122 Said chapter is further amended by revising subsections (j) and (l) of Code
123 Section 43-34-103, relating to application for licensure as a physician assistant, authorized
124 delegated authority, and prohibited acts, as follows:

125 "(j) A physician assistant shall be allowed to make a pronouncement of death pursuant to
126 authority delegated by the supervising physician of the physician assistant and to certify
127 such pronouncement in the same manner as a physician, including by signing death
128 certificates. A selection box shall be added to death certificates to be checked off by
129 nonphysicians completing the form."

130 "(l) Except for ~~death certificates~~ and assigning a percentage of a disability rating, a
131 physician assistant may be delegated the authority to sign, certify, and endorse all
132 documents relating to health care provided to a patient within his or her scope of authorized
133 practice, including, but not limited to, documents relating to physical examination forms
134 of all state agencies and verification and evaluation forms of the Department of Human
135 Services, the State Board of Education, local boards of education, the Department of
136 Community Health, and the Department of Corrections."

137 **PART II**138 **SECTION 2-1.**

139 Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians,
140 acupuncture, physician assistants, and others, is amended in Code Section 43-34-25, relating
141 to delegation of certain medical acts to advanced practice registered nurse, construction and
142 limitations of such delegation, definitions, conditions of nurse protocol, and issuance of
143 prescription drug orders, by revising subsections (g), (g.1), and (g.2) as follows:

144 "(g) Except as otherwise provided in subsection (g.1) or (g.2) of this Code section, a
145 delegating physician may not enter into a nurse protocol agreement pursuant to this Code

146 section or enter into a job description with a physician assistant pursuant to Code
147 Section 43-34-103 with more than ~~four~~ the combined equivalent of eight advanced practice
148 registered nurses or physician assistants at any one time, except this limitation shall not
149 apply to an advanced practice registered nurse who is practicing:

- 150 (1) In a hospital licensed under Title 31;
- 151 (2) In any college or university as defined in Code Section 20-8-1;
- 152 (3) In the Department of Public Health;
- 153 (4) In any county board of health;
- 154 (4.1) In any community service board;
- 155 (5) In any free health clinic;
- 156 (6) In a birthing center;
- 157 (7) In any entity:
 - 158 (A) Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal
159 Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or
160 indigent Medicaid and ~~medicare~~ Medicare patients; or
 - 161 (B) Which has been established under the authority of or is receiving funds pursuant
162 to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act;
- 163 (8) In any local board of education which has a school nurse program;
- 164 (9) In a health maintenance organization that has an exclusive contract with a medical
165 group practice and arranges for the provision of substantially all physician services to
166 enrollees in health benefits of the health maintenance organization; or
- 167 (10) In any emergency medical services system operated by, or on behalf of, any county,
168 municipality, or hospital authority with a full-time physician medical director and who
169 does not order drugs, except that he or she may order up to a 14 day supply of drugs as
170 necessary in an emergency situation, excluding Schedule II controlled substances and
171 benzodiazepines; provided, however, that an advanced practice registered nurse shall not
172 order radiographic imaging, diagnostic studies, or medical devices pursuant to this

173 paragraph; and provided, further, that a patient shall be referred to a physician, a dentist,
174 or a federally qualified health center.

175 (g.1) A delegating physician may not enter into a nurse protocol agreement pursuant to this
176 Code section or enter into a job description with a physician assistant pursuant to Code
177 Section 43-34-103 with more than the combined equivalent of eight advanced practice
178 registered nurses or physician assistants at any one time, may not supervise more than ~~four~~
179 the combined equivalent of eight advanced practice registered nurses or physician
180 assistants at any one time pursuant to nurse protocol agreements or job descriptions, and
181 shall not be required to conduct any meetings, observations, or review of medical records
182 except as otherwise provided in this subsection, if the advanced practice registered nurses
183 practice at a location that:

184 (1) Maintains evidence based clinical practice guidelines;

185 (2) Is accredited by an accrediting body, approved by the board, such as the Joint
186 Commission or a nationally recognized accrediting organization with comparable
187 standards;

188 (3) Requires the delegating physician to document and maintain a record of review of
189 at least 10 percent of the advanced practice registered nurses' medical records to monitor
190 quality of care being provided to patients, which may be conducted electronically or on
191 site;

192 (4) Requires the delegating physician and advanced practice registered nurse to
193 participate in and maintain documentation of quarterly clinical collaboration meetings,
194 either by telephone, in person, or on site, for purposes of monitoring care being provided
195 to patients; and

196 (5) Requires the delegating physician's name, contact information, and record of the visit
197 to be provided to the patient's primary care provider of choice with the patient's consent
198 within 24 hours of the visit.

199 (g.2) A delegating physician may not enter into a nurse protocol agreement pursuant to this
200 Code section or enter into a job description with a physician assistant pursuant to Code
201 Section 43-34-103 with more than the combined equivalent of eight advanced practice
202 registered nurses or physician assistants at any one time or supervise more than ~~four~~ the
203 combined equivalent of eight advanced practice registered nurses or physician assistants
204 at any one time in any emergency medical services system operated by, or on behalf of, any
205 county, municipality, or hospital authority with a full-time medical director."

206

SECTION 2-2.

207 Said chapter is further amended in Code Section 43-34-103, relating to application for
208 licensure as a physician assistant, authorized delegated authority, and prohibited acts, by
209 revising subsection (b) as follows:

210 "(b)(1) No primary supervising physician shall enter into a job description with a
211 physician assistant pursuant to this Code section or a nurse protocol agreement with an
212 advanced practice registered nurse pursuant to Code Section 43-34-25 with more than the
213 combined equivalent of eight physician assistants or advanced practice registered nurses
214 or supervise more than ~~four~~ the combined equivalent of eight physician assistants or
215 advanced practice registered nurses at a time except as provided in paragraph (3) or (4)
216 of this subsection.

217 (2) A primary supervising physician shall designate in writing to the board such other
218 physicians who may serve as an alternate supervising physician for each physician
219 assistant with which such primary supervising physician has entered into a job
220 description. The board shall have authority to approve or deny such designations in
221 whole or in part; provided, however, that a physician may be listed as an alternate
222 supervising physician for any number of physician assistants so long as he or she only
223 supervises as many physician assistants at any one time as allowed by paragraphs (1)
224 and (3) of this subsection.

225 (3) No primary supervising physician shall have more than eight physician assistants
226 who have completed a board approved anesthesiologist assistant program licensed to him
227 or her at a time or supervise more than four physician assistants who have completed a
228 board approved anesthesiologist assistant program at any one time.

229 (4) Except for physician assistants who have completed a board approved
230 anesthesiologist assistant program, the limitation in paragraph (1) of this subsection shall
231 not apply to a physician assistant who is practicing:

232 (A) In a hospital licensed under Title 31;

233 (B) In any college or university as defined in Code Section 20-8-1;

234 (C) In the Department of Public Health;

235 (D) In any county board of health;

236 (E) In any community service board;

237 (F) In any free health clinic;

238 (G) In a birthing center;

239 (H) In any entity:

240 (i) Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal
241 Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or
242 indigent Medicaid and Medicare patients; or

243 (ii) Which has been established under the authority of or is receiving funds pursuant
244 to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act; or

245 (I) In a health maintenance organization that has an exclusive contract with a medical
246 group practice and arranges for the provision of substantially all physician services to
247 enrollees in health benefits of the health maintenance organization."

248

PART III

249

SECTION 3-1.

250 (a) Except as provided in subsection (b) of this section, this Act shall become effective on
251 the first day of the month following the month in which it is approved by the Governor or
252 becomes law without such approval.

253 (b) Part I of this Act shall become effective on July 1, 2024.

254

SECTION 3-2.

255 All laws and parts of laws in conflict with this Act are repealed.