

Review of Legislation for APRNs and Strategies
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Recap: 2018 Nurse Practice ACT law say?????
Brief Synopsis

- Removes physician supervision over NPs, CNM, CNS
- Collaborate with MD
- Physicians must be actively licensed by SC
- Physicians must be in SC and available for consultation and advice
- No more mileage constraints



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Recap Nurse Practice SOP? 2018 and 2019

- Removes delegated act terms and replaces with medical acts
- Can engage in telehealth
- Authorizes you to prescribe C2-5,
 - C2 non-narcotics for 30 days, and for each renewal in all settings
 - C2 for 30 days and each renewal in hospice, LTC, and palliative care settings/service
 - C2 narcotics for 5 days in other settings such as primary care or specialty care but can have another 5 days but must document in note that you consulted with MD



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Current law

- Ratio of 3 to 6 at any given time
- Can order PT, sign patients into Hospice, sign handicapped placards, order home health
- Sign homebound forms, can dispense meds at free clinics (not controlled though)

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Current law



- Must have collaborative written practice agreement
- Physicians who collaborate must have training, education, or experience in area of NP focus or vice versa: Example: Work with neurosurgeon, do neurosurgery stuff, not prenatal care!!!!
- Physicians must assure quality assurance with the NP by doing meetings or chart review, etc. with APRNs (face to face or electronically, audits, etc.)

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CWPA

Must be signed annually by NP and MD



If you change your practice setting, discontinue practice setting, or change/add physicians YOU shall notify the board of the change within fifteen business days.

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MD review of NP charts

- It is a requirement that MD audit PA charts
- It is **NOT** a requirement that MD audit NP charts
- WCPA must contain measures for QA.



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Current law

- Must see underserved populations in Urban or Rural areas
- Question the BON licensee renewal

Say YES unless you are NOT seeing underserved!!

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Telemedicine



Changes in the Nurse Practice Act 2018 practice Act and updates 2019, 2024 APRNs can engage in telemedicine pursuant to the written practice agreement.

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Telehealth 2023-2024 updated law

- Signed into law March 2024
- House bill 4159
- https://www.scstatehouse.gov/sess125_2023-2024/bills/4159.htm

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What does updated 2024 telehealth law say?

- (4) "Scope of practice" means the extent of a licensee's authority to provide health care. The term includes a condition on authority imposed by the licensee's practice act or licensing board, including but not limited to the requirement to perform telehealth pursuant to a practice agreement as defined in Section 40-33-20(45) (for APRN) or within written scope of practice guidelines under physician supervision pursuant to Section 40-47-935 (for PA).
- (5) "Telehealth" means the use of electronic communications, information technology, or other means to deliver clinical health care, patient and professional health-related education, public health, or health administration between a licensee in one location and a patient in another location with or without an intervening licensee.

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What does it say for APRNs?

- **Advanced practice registered nurses, telemedicine and telehealth services**
- SECTION 5. Section 40-33-34(1)(2) of the S.C. Code is amended to read:
- (2) An APRN may perform medical acts via telemedicine and telehealth pursuant to a practice agreement as defined in Section 40-33-20(45) without having to be licensed to practice medicine in this State as otherwise required in Section 40-47-37(A)(4).

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What can APRNs prescribe?

- **(5) only prescribe:**
 - (a) if specifically authorized by his respective practice act;
 - (b) within his scope of practice; and
 - (c) in accordance with federal and state laws, rules, standards provided in the practice act and, if applicable, any practice agreement or scope of practice guidelines.

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What does updated law 2024 say for all providers who prescribe?

(b) Schedule II-narcotic and Schedule III-narcotic prescriptions are not permitted except in the following instances:

- (i) when the practice of telemedicine is being conducted while the patient is physically located in a hospital and being treated by a practitioner acting in the usual course of professional practice;
- (ii) those Schedule II and Schedule III medications used specifically for patients actively enrolled in a Medication-Assisted Treatment (MAT) program with a provider who has an established physician-patient relationship when buprenorphine is being prescribed as a medication for opioid use disorder;
- (iii) patients enrolled in palliative care or hospice;

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What does updated Telehealth law say?

- **Cannot prescribe:**
 - (c) prescribing abortion inducing drugs is not permitted; as used in this chapter "abortion inducing drug"

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Fed DEA issued a statement about waivers Dec 2022

On December 29, 2022, with the signing of the Consolidated Appropriations Act of 2023 (the Act), Congress eliminated the "DATA-X Waiver Program."

"At DEA, our goal is simple: we want medication for opioid use disorder to be readily and safely available to anyone in the country who needs it. The elimination of the X-Waiver will increase access to buprenorphine for those in need".

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Fed DEA announcement

- All DEA registrants should be aware of the following:
- A DATA-Waiver registration is no longer required to treat patients with buprenorphine for opioid use disorder.
- Going forward, all prescriptions for buprenorphine only require a standard DEA registration number. The previously used DATA-Waiver registration numbers are no longer needed for any prescription.
- There are no longer any limits or patient caps on the number of patients a prescriber may treat for opioid use disorder with buprenorphine.
- The Act does not supersede existing state laws or regulations that may be applicable.

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Senate Bill 464 and House Bill 3821. Passed May 2019



NPs Write for DNRDHEC amended the DNR Forms

NPs can order C2 for chronic pain management in LTC settings/Hospice for 30 days and for each renewal

NPs Sign Death Certificates on-line and declare manner of death, Web-death through DHEC. MUST BE REGISTERED at DHEC

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DHEC and TB Forms

- Apparently DHEC (now called DPH) listed only physicians to sign TB forms (form 1420) for school employees.
- Working on getting that resolved. IT is new bill for FPA, S 45 and H 3580



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**JUA Bill:
House Bill
3760:
Passed May
2019**

- This will allow MDs/APRNs to get liability insurance if they cannot get liability insurance somewhere else.
- SCNA has a seat on the new Board of Insurance, formerly called the JUA and PCF Boards: composed of MDs, NP, Insurance Agents
- Original bill passed May 2019
- New Board Convened Jan 2020
- Remains active, SCNA rep reappointed 2024-2028.

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**Preceptor
Bill
Passed with
updates
2024**

- This bill will give tax credits up to \$1,000 to NP/MD/PA Preceptors who precept NP/PA/Med Students in the Clinical area who attend SC public universities.
- Senate Bill 969. Bill passed May 2024 July
- Original Bill passed 2019
- Kudos to Dr. Deb Hopla for taking the lead

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Preceptor Bill updated 2024

- 1. **Includes a minimum of one hundred sixty hours of preceptor instruction in one of the following clinical settings**
 - a. Family Medicine
 - b. Internal Medicine
 - c. Pediatrics
 - d. Obstetrics and Gynecology
 - e. Emergency Medicine
 - f. Psychiatry
 - g. General Surgery
 - h. Specialty Care including but limited to: Dermatology, hematology, neurology, and oncology

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Updated 2024 Preceptor Bill

- Provide supervision during clinical rotation
- Cannot be compensated otherwise
- 2 clinical rotations per year
- \$1000 tax credit per student, up to \$4000 per year



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POST

- **An advanced practice registered nurse (APRN) may create, execute, and sign a POST form if authorized to do so by his or her practice agreement.**
- **The POST form must be for a patient of the APRN, the physician with whom the APRN has entered into a practice agreement, or both.**
- **Advanced Care Planning...99457 CPT CODE, 16 minutes**
- **Passed May 2019**

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What's happened in SC for bills 2021

- Even though the federal bill passed June 2020 to authorize NPs to order home health, we had to amend the SC laws to order home health.
- Home Health Bill: SC Senate bill 503
- Passed May 2021, effective July 17

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Link to the Home Health Bill

- https://www.scstatehouse.gov/sess124_2021-2022/bills/503.htm

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Delegating to CMA

- Senate Bill 613
- https://scstatehouse.gov/sess124_2021-2022/bills/613.htm
- Passed May 2022
- Allows NPs to delegate the administration of meds to CMA.
- Must be in WCPA: DO NOT SEND LLR WPA unless requested by the BON
- Cannot delegate certain meds or tasks to CMA
- Cannot delegate admin of meds to EMT or Paramedic working in facilities

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Senate Bill 613: Delegating to CMA

- What cannot be delegated to CMA?
 - Administration of controlled meds, IV meds, contrast agents, or chemo
 - Injecting neurotoxins or tissue fillers
 - Using lasers
 - Suturing
 - Taking X-rays or using any ionized radiation
 - Analyzing, interpreting, or dg symptoms or tests
 - Triaging
 - Performing a clinical decision by means of telehealth

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UAP: Passed 2022

- UAPs
 - Unlicensed assistant persons
 - Can provide meds, must have documented med training and skill competency evaluation
 - Can do this in intermediate care facilities with intellectual disabilities and LTC.
 - SCDHHS will develop training program and create the registry of UAP

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Consent for ECT

- Allows other persons to make decisions for patients to consent for ECT
- Passed 2022



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E-RX and 2022 and 2023 and 2024

- Rarely, pharmacies are asking for ERX to contain both MD and NP signature.
- NO law requires that and LLR has confirmed with Pharm Association that NP name is only required on ERX. If handwritten, both are required
- If you are asked by pharmacy to give your Collaborative Md name, let me know ASAP. Just had an incident with Publix, CVS, and Walgreens but now resolved for most part



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Senate Bill 45 and House Bill 3580

- FPA for APRNs (NP, CNM, CNS)
- Filed Dec 2024 for 2025 Session
- Senator Davis sponsor in Senate
- Rep Mark Smith sponsor in House

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**New Senate and House Bill for 2025.
Senate Bill 45 and House Bill 3580**

- Transition to practice for new grads, 4000 hours
- BON regulates APRNs
- FPA based on education and certification
- NO practice agreement for experienced APRNs
- Deletes all references to physician collaborator and practice agreements.



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FPA BILL links

House bill

3580 https://www.scstatehouse.gov/sess126_2025-2026/bills/3580.htm

Senate Bill

45 https://www.scstatehouse.gov/sess126_2025-2026/bills/45

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FPA Bills

- Hospital policies can determine what a provider can and cannot do.
- 4000 hours Post graduation for FPA



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Senate Bill 669

- Introduced by Senator Verdin on last day of session May 2025
- BAD BILL.
- https://www.scstatehouse.gov/query.php?search=DOC&searchtext=669&category=LEGISLATION&session=126&conid=55553878&result_pos=0&keyval=1260669&numrows=10



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What does 669 do?

- Can't call yourself "Dr." unless you document that you told the patient who you are.
- You have to appear before a BME committee to seek approval to practice, even if you have your own practice.



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What can you do?

- Call Verdin's office to express your concern and opposition
 - Write letter and give testimony
 - SHOW UP FOR APRN LEGISLATIVE DAY
 - Feb 26, 2026
- Columbia Address**
412 Gressette Bldg.
Columbia 29201
- Business Phone** (803) 212-6250
- Home Address**
P.O. Box 272
Laurens 29360
- Business Phone** (864) 984-4129

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SC Facts

- **THE HEALTH CARE PROBLEM:**
 - South Carolina ranks "F" in the nation in the United Health Foundation's health report card.
 - South Carolina is in crisis as we face a critical shortage of primary health care providers. ACCORDING TO AHEC, NPs are maintaining Primary CARE in Nonmetropolitan areas
 - Folks use the ER for Primary Care, not very efficient and very costly....
 - Top 15 reasons Medicaid folks sought the ER in 2017-2018 were for PRIMARY CARE!!
 - Top 10 reasons folks sought the ER in 2024 were for PRIMARY CARE!!

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SC Facts

- The American Association of Medical Colleges Center for Workforce Studies predicted that a shortage of about PC 63,000 physicians by 2015, and 130,600 by 2025. SC rank 43th in PC MD supply (we were 40th)
- SC has 17 counties with NO psychiatrists

Parts or all of 46 counties in South Carolina are designated as medically underserved by the South Carolina Department of Health and Human Services.

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What about other stats in SC

- 22 counties with fewer than 3 family practice physicians
- 15 counties with NO OB-GYNs
- 10 counties with no Pediatricians
- 27 counties with fewer than 3 psychiatrists
- Rank 43 in nation in primary care physician supply (were 40th)
- Projecting shortage of 3000 physicians by 2026 in SC
- Projecting a shortage of 815 primary care physicians by 2030 in SC

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Other stats?

- SC ranks 8th in nation in maternal health deaths
- 40th in nation in infant mortality
- 44th in nation for preterm births
 - Preterm birth costs \$64,815
 - Normal birth costs \$6697 to \$17,684



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SC Facts

- South Carolina ranked 42nd in the nation in the United Health Foundation's health report card for 2021. States with NP scope of practice restrictions rate the poorest health rankings.
- BUT as one influencing factor after the scope of practice for NPs changed in 2018, access to primary care improved from 41 to 37
- AHEC Data Workforce indicates that NPs are maintaining primary care in non-metropolitan areas!!!! (2022, 2024)

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SC FACTS

- South Carolina ranks 43rd in the nation for primary care physician supply as we face a continued critical shortage of primary and mental health care physicians.
- Parts or all of 46 counties in South Carolina are designated as medically underserved by the South Carolina Department of Health and Human Services and DHEC.
- 99-100% of Nurse Practitioners provide care to underserved populations, required for re-licensure

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SC FACTS

- According to the 2021, 2024 SC Health Professions Data Book
 - 40 counties are served by 5 or more active NPs per 10,000 population.
 - NPS are maintaining Primary CARE IN SC

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Find your legislator

- www.scstatehouse.gov
- Find on the bottom of the page icon "find your legislator"
- Type your address in.
- When that pops up, you will see who your state legislators are and how to contact them.
- Make an appt to go see your legislator in person

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What is your assignment?

- Get your LEGISLATOR to OPPOSE S 669
- GET YOUR LEGISLATOR TO CO-SPONSOR and SUPPORT
 - House bill 3580
 - Senate Bill 45
- Visit your legislator. See attached talking points and data sheets
- GET YOUR ORGANIZATION and Physician to write a letter of support and email to me: scburgess@aol.com

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Coalition for Access to Healthcare

• <https://www.coalitionforaccesstohealthcare.com>



- At the top of the page, click donate
- Pay Pal acct or you can write me a BIG FAT CHECK! Make it out to the Coalition for Access to Healthcare.

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Senate 45 and House Bill 3580



- **NEED ALL THE SUPPORT WE CAN GARNER!!**
- Business
- Physicians
- Practices
- Facilities
- Prof Associations
- Hospital Association

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PUT UP OR SHUT UP!!

On the Menu or at the Table?

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APRN Legislative Day 2025

- February 6, 2025, Thursday
- Cost \$10.00
- 8-12 noon
- SC Statehouse grounds, Blatt Building, First Floor large Conference Room
- 300 SHOWED UP!!! Wear your lab coat with your name pin
- Room was packed.

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Legislative Day 2026

- **February 26, 2026 THURSDAY**
- **PUT THIS DATE ON YOUR CALENDAR!!**
- **Wear your lab coat and name pin**

SC Statehouse Grounds 8-12 noon. Columbia, SC

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Legislative Day 2026



SC Nurse Legislative Day at the Statehouse February 26, 2026



2/26/2026	
When:	Thursday, February 26, 2026 8:00 AM - 12:00 PM
Where:	Blatt Building, Large Conference Room, 1st Floor 1105 Pendleton St Columbia, South Carolina 29201 United States

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Legislative Day 2026

- **ATTENTION: SC NURSES LEGISLATIVE DAY February 26, 2026**
- Wear your lab coat and name pin!
- Click here to see the SCNA Icon to register:
<https://www.scnurses.org/events/EventDetails.aspx?id=2006771&group=>
- Or go directly to this page to register:
<https://www.scnurses.org/events/register.aspx?id=2006771&itemid=34547463-77e2-4372-867d-db6c78c723e5>
- The cost is \$15.00 and free to Pre-licensure Nursing Students.

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Strategies to influence

- Go to the Coalition website and download talking points tool kit
- <https://www.coalitionforaccesstohealthcare.com/legislation>
- Make an appointment to see your legislator to discuss
- www.scstatehouse.gov

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SC SOARS with FPA

- Save money
- Improve outcomes
- Increase access
- Reduce regulations that impede patient care and access
- APRNs are safe providers

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See attached for working sheets for you

National Council of State Legislatures: State by State Map Practice Environment: 37 states, VA and 2 territories

- Information on Board of Nursing Disciplinary Cases against APRNs
- AMA "Scope Creep" (2 of these)
- JAMA Article on NPs

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See attached for working sheets for you

- APRN FPA 4 pager
- Myth document
- Answering objections about FPA
- Summary changes for FPA bills
- Pointers for Presenting Testimony
- Sample Support Letters (organization, physician, patients, etc)
 - Send to me scburgess@aol.com

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See attached for working sheets for you

- Concierge Medicine
- Syleste Davis Op Ed to Post and Courier about Team Based Medicine Jan 2026
- A response to her Op Ed
- FTC letter to support FPA Senate bill 45 and House bill 3580 Sept 2025

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Questions and thank you!



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