

House Bill 1046 (AS PASSED HOUSE AND SENATE)

By: Representatives Clark of the 100<sup>th</sup>, Jones of the 47<sup>th</sup>, Powell of the 33<sup>rd</sup>, Barrett of the 24<sup>th</sup>, Mathiak of the 74<sup>th</sup>, and others

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 amend Chapter 2A of Title 31, Chapter 16 of Title 40, and Chapter 16 of Title  
8 50 of the Official Code of Georgia Annotated, relating to the Department of Public Health,  
9 the Department of Driver Services, and public property relative to state government,  
10 respectively, so as to improve government efficiency by creating one commission and  
11 repealing provisions relating to two inactive groups; to create the Georgia Commission on  
12 Maternal and Infant Health; to provide for its composition, membership, duties, and  
13 responsibilities; to provide for a definition; to provide for funding; to provide for automatic  
14 repeal; to repeal provisions establishing the Governor's Commercial Transportation Advisory  
15 Committee; to repeal provisions creating the Commission on the Preservation of the State  
16 Capitol; to provide for related matters; to provide for effective dates; to repeal conflicting  
17 laws; and for other purposes.

18 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

19 **PART I**  
20 **SECTION 1-1.**

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

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

43 death to the funeral director or person acting as such, the funeral director or person acting  
44 as such shall be authorized to report such physician, advanced practice registered nurse,  
45 or licensed physician assistant to their respective licensing boards for disciplinary action  
46 ~~to the Georgia Composite Medical Board for discipline pursuant to Code~~  
47 ~~Section 43-34-8.~~

48 (2) In any area in this state which is in a state of emergency as declared by the Governor  
49 due to an influenza pandemic, in addition to any other person authorized by law to  
50 complete and sign a death certificate, any registered professional nurse employed by a  
51 long-term care facility, ~~advanced practice nurse, physician assistant,~~ registered nurse  
52 employed by a home health agency, or nursing supervisor employed by a hospital shall  
53 be authorized to complete and sign the death certificate, provided that such person has  
54 access to the medical history of the case, such person views the deceased at or after death,  
55 the death is due to natural causes, and an inquiry is not required under Article 2 of  
56 Chapter 16 of Title 45, the 'Georgia Death Investigation Act.' In such a state of  
57 emergency, the death certificate shall be filed by the funeral director in accordance with  
58 subsection (b) of this Code section; or, if the certificate is not completed and signed by  
59 an appropriate physician, advanced practice registered nurse acting pursuant to the  
60 authority of Code Sections 43-34-23 and 43-34-25, licensed physician assistant acting  
61 pursuant to the authority of Code Sections 43-34-23 and 43-34-103, or coroner, the public  
62 health director of preparedness shall cause the death certificate to be completed, signed,  
63 and filed by some other authorized person within ten days after death.

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

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

### 77 SECTION 1-2.

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

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

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

87 (ii) The authority to request, receive, and sign for professional samples and to  
88 distribute professional samples to patients. The office or facility at which the ~~health~~  
89 ~~care~~ healthcare professional identified in subparagraph (A) of this paragraph is  
90 working shall maintain a general list of the professional samples approved by the  
91 delegating physician for request, receipt, and distribution by the ~~health care~~ healthcare  
92 professional identified in subparagraph (A) of this paragraph as well as a complete list  
93 of the specific number and dosage of each professional sample and medication  
94 voucher received. Professional samples that are distributed by a ~~health care~~

95 healthcare professional identified in subparagraph (A) of this paragraph shall be so  
96 noted in the patient's medical record. In addition to the requirements of this Code  
97 section, all professional samples shall be maintained as required by applicable state  
98 and federal laws and regulations; and

99 (iii) The authority to sign, certify, and endorse all documents relating to ~~health care~~  
100 healthcare provided to a patient within his or her scope of authorized practice,  
101 including, but not limited to, documents relating to physical examination forms of all  
102 state agencies and verification and evaluation forms of the Department of Human  
103 Services, the State Board of Education, local boards of education, the Department of  
104 Community Health, and the Department of Corrections; provided, however, that a  
105 ~~health care~~ healthcare professional identified in subparagraph (A) of this paragraph  
106 shall not have the authority to ~~sign death certificates~~ or assign a percentage of a  
107 disability rating.

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

### 112 **SECTION 1-3.**

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

117 "(b) In addition to and without limiting the authority granted pursuant to Code  
118 Section 43-34-23, a physician may delegate to an advanced practice registered nurse in  
119 accordance with a nurse protocol agreement the authority to order drugs, medical devices,  
120 medical treatments, diagnostic studies, or radiographic imaging tests or to sign death

121 certificates. A selection box shall be added to death certificates to be checked off by  
122 nonphysicians completing the form."

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

130 **SECTION 1-4.**

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

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

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

146

**PART II**

147

**SECTION 2-1.**

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

153 "(g) Except as otherwise provided in subsection (g.1) or (g.2) of this Code section, a  
 154 delegating physician may not enter into a nurse protocol agreement pursuant to this Code  
 155 section or enter into a job description with a physician assistant pursuant to Code  
 156 Section 43-34-103 with more than ~~four~~ the combined equivalent of eight advanced practice  
 157 registered nurses or physician assistants at any one time, except this limitation shall not  
 158 apply to an advanced practice registered nurse who is practicing:

159 (1) In a hospital licensed under Title 31;

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

161 (3) In the Department of Public Health;

162 (4) In any county board of health;

163 (4.1) In any community service board;

164 (5) In any free health clinic;

165 (6) In a birthing center;

166 (7) In any entity:

167 (A) Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal  
 168 Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or  
 169 indigent Medicaid and ~~medicare~~ Medicare patients; or

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

- 172 (8) In any local board of education which has a school nurse program;
- 173 (9) In a health maintenance organization that has an exclusive contract with a medical  
174 group practice and arranges for the provision of substantially all physician services to  
175 enrollees in health benefits of the health maintenance organization; or
- 176 (10) In any emergency medical services system operated by, or on behalf of, any county,  
177 municipality, or hospital authority with a full-time physician medical director and who  
178 does not order drugs, except that he or she may order up to a 14 day supply of drugs as  
179 necessary in an emergency situation, excluding Schedule II controlled substances and  
180 benzodiazepines; provided, however, that an advanced practice registered nurse shall not  
181 order radiographic imaging, diagnostic studies, or medical devices pursuant to this  
182 paragraph; and provided, further, that a patient shall be referred to a physician, a dentist,  
183 or a federally qualified health center.
- 184 (g.1) A delegating physician may not enter into a nurse protocol agreement pursuant to this  
185 Code section or enter into a job description with a physician assistant pursuant to Code  
186 Section 43-34-103 with more than the combined equivalent of eight advanced practice  
187 registered nurses or physician assistants at any one time, may not supervise more than ~~four~~  
188 the combined equivalent of eight advanced practice registered nurses or physician  
189 assistants at any one time pursuant to nurse protocol agreements or job descriptions, and  
190 shall not be required to conduct any meetings, observations, or review of medical records  
191 except as otherwise provided in this subsection, if the advanced practice registered nurses  
192 practice at a location that:
- 193 (1) Maintains evidence based clinical practice guidelines;
- 194 (2) Is accredited by an accrediting body, approved by the board, such as the Joint  
195 Commission or a nationally recognized accrediting organization with comparable  
196 standards;
- 197 (3) Requires the delegating physician to document and maintain a record of review of  
198 at least 10 percent of the advanced practice registered nurses' medical records to monitor

199 quality of care being provided to patients, which may be conducted electronically or on  
200 site;

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

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

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

215 **SECTION 2-2.**

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

219 "(b)(1) No primary supervising physician shall enter into a job description with a  
220 physician assistant pursuant to this Code section or a nurse protocol agreement with an  
221 advanced practice registered nurse pursuant to Code Section 43-34-25 with more than the  
222 combined equivalent of eight physician assistants or advanced practice registered nurses  
223 or supervise more than ~~four~~ the combined equivalent of eight physician assistants or

224 advanced practice registered nurses at a time except as provided in paragraph (3) or (4)  
225 of this subsection.

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

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

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

- 241 (A) In a hospital licensed under Title 31;
- 242 (B) In any college or university as defined in Code Section 20-8-1;
- 243 (C) In the Department of Public Health;
- 244 (D) In any county board of health;
- 245 (E) In any community service board;
- 246 (F) In any free health clinic;
- 247 (G) In a birthing center;
- 248 (H) In any entity:

- 249 (i) Which is exempt from federal taxes pursuant to Section 501(c)(3) of the Internal  
250 Revenue Code, as defined in Code Section 48-1-2, and primarily serves uninsured or  
251 indigent Medicaid and Medicare patients; or
- 252 (ii) Which has been established under the authority of or is receiving funds pursuant  
253 to 42 U.S.C. Section 254b or 254c of the United States Public Health Service Act; or
- 254 (I) In a health maintenance organization that has an exclusive contract with a medical  
255 group practice and arranges for the provision of substantially all physician services to  
256 enrollees in health benefits of the health maintenance organization."

257 **PART III**

258 **SECTION 3-1.**

259 Chapter 2A of Title 31 of the Official Code of Georgia Annotated, relating to the Department  
260 of Public Health, is amended in Article 1, relating to general provisions, by revising Code  
261 Section 31-2A-12, which is reserved, as follows:

262 "31-2A-12.

263 (a) As used in this Code section, the term 'perinatal care' means maternal and infant health  
264 improvement services and ancillary services that are appropriate for women and infants  
265 during the perinatal period, which begins before conception and ends on the infant's first  
266 birthday.

267 (b) There is created the Georgia Commission on Maternal and Infant Health to be assigned  
268 to the Department of Public Health for administrative purposes only as prescribed in Code  
269 Section 50-4-3. The commission shall consist of 14 members, who shall be appointed as  
270 follows:

271 (1) Six members shall be appointed by the Governor. The Governor shall include among  
272 his or her appointees an obstetrician, either a pediatrician or neonatologist, a nurse  
273 midwife, either a family practice or general practice physician, and a representative of a  
274 perinatal facility;

275 (2) Three members of the Senate shall be appointed by the Lieutenant Governor,  
276 provided that at least one member shall be of the minority party; and

277 (3) Three members of the House of Representatives shall be appointed by the Speaker  
278 of the House of Representatives, provided that at least one member shall be of the  
279 minority party.

280 The commissioner or his or her designee and the chief executive officer of the Georgia  
281 Research Alliance or his or her designee shall serve as members of the commission. The  
282 Governor shall appoint one member to serve as the chairperson of the commission.

283 (c) Members of the commission shall receive no compensation for their services but shall  
284 be allowed actual and necessary expenses in the performance of their duties. Any  
285 legislative members of the council shall receive the allowances provided for in Code  
286 Section 28-1-8. Citizen members shall be entitled to receive reimbursement for per diem  
287 and travel expenses as provided in Code Section 45-7-21.

288 (d) The commission shall meet at least four times per year at the call of the chairperson or  
289 upon the request of at least seven of its members.

290 (e) The commission shall have the following duties and responsibilities:

291 (1) To solicit the views of perinatal facilities, healthcare providers, and related  
292 professional associations on the state of perinatal care in Georgia and give due  
293 consideration to the current recommendations of medical and scientific organizations in  
294 the field of perinatal care;

295 (2) To make policy recommendations regarding programs of perinatal care with local  
296 communities, their physicians and perinatal facilities, and the general public;

297 (3) To establish indices to measure the quality and determine the effectiveness of  
298 perinatal care in Georgia;

299 (4) To make available to the public the records of all meetings of the commission and  
300 all business transacted by the commission;

- 301 (5) To employ such staff and to enter into such contracts as may be necessary to fulfill  
302 its duties and responsibilities under this chapter subject to funding by the General  
303 Assembly;
- 304 (6) To consult with and advise the department on matters related to the establishment,  
305 maintenance, operation, and outcomes evaluation of perinatal care initiatives in this state;  
306 and
- 307 (7) To make state-wide policy recommendations based on its findings.
- 308 (f) The commission may request additional funding from any additional source including,  
309 but not limited to, federal and private grants.
- 310 (g) No later than June 30, 2026, the commission shall submit a detailed written report on  
311 its findings and recommendations to the Governor and the General Assembly.
- 312 (h) This Code section shall stand automatically repealed on July 1, 2026. Reserved."

313 **SECTION 3-2.**

314 Chapter 16 of Title 40 of the Official Code of Georgia Annotated, relating to the Department  
315 of Driver Services, is amended by repealing Code 40-16-8, relating to the Governor's  
316 Commercial Transportation Advisory Committee, and designating said Code section as  
317 reserved.

318 **SECTION 3-3.**

319 Chapter 16 of Title 50 of the Official Code of Georgia Annotated, relating to public property  
320 relative to state government, is amended by repealing Code Section 50-16-5.1, relating to the  
321 Commission on the Preservation of the State Capitol.

322

**PART IV**

323

**SECTION 4-1.**

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

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

328

**SECTION 4-2.**

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