## **101ST GENERAL ASSEMBLY**

# State of Illinois

# 2019 and 2020

#### SB1683

Introduced 2/15/2019, by Sen. Emil Jones, III

## SYNOPSIS AS INTRODUCED:

225 ILCS	65/65-35	was	225	ILCS	65/15-15
225 ILCS	65/65-43				
225 ILCS	65/65-45	was	225	ILCS	65/15-25

Amends the Nurse Practice Act. Provides that collaboration does not require an employment relationship between the collaborating physician, podiatric physician, or dentist and the advanced practice registered nurse. Provides that, in the case of anesthesia services provided by a certified registered nurse anesthetist, an anesthesiologist, a physician, a dentist, or a podiatric physician must participate through discussion of and agreement with the anesthesia plan and remain available (rather than remain physically present and available on the premises during the delivery of anesthesia services) for diagnosis, consultation, and treatment of emergency medical conditions. Makes changes concerning the written collaborative agreements between a certified registered nurse anesthetist and a dentist. Changes provisions concerning full practice authority to apply them to certified registered nurse anesthetists. Requires that during the delivery of anesthesia by a certified registered nurse anesthetists, the attestation for completion of clinical experience must be attested to by the collaborating physician or physicians, podiatrists, or dentists, and the certified registered nurse anesthetist. Makes other changes. Effective immediately.

LRB101 07977 RAB 53033 b

1

AN ACT concerning regulation.

# Be it enacted by the People of the State of Illinois, represented in the General Assembly:

Section 5. The Nurse Practice Act is amended by changing
Sections 65-35, 65-43, and 65-45 as follows:

6 (225 ILCS 65/65-35) (was 225 ILCS 65/15-15)

7 (Section scheduled to be repealed on January 1, 2028)

8 Sec. 65-35. Written collaborative agreements.

9 (a) A written collaborative agreement is required for all 10 advanced practice registered nurses engaged in clinical 11 practice prior to meeting the requirements of Section 65-43, 12 except for advanced practice registered nurses who are 13 privileged to practice in a hospital, hospital affiliate, or 14 ambulatory surgical treatment center.

(a-5) If an advanced practice registered nurse engages in clinical practice outside of a hospital, hospital affiliate, or ambulatory surgical treatment center in which he or she is privileged to practice, the advanced practice registered nurse must have a written collaborative agreement, except as set forth in Section 65-43.

(b) A written collaborative agreement shall describe the relationship of the advanced practice registered nurse with the collaborating physician and shall describe the categories of - 2 - LRB101 07977 RAB 53033 b

care, treatment, or procedures to be provided by the advanced 1 2 practice registered nurse. A collaborative agreement with a podiatric physician must be in accordance with subsection (c-5) 3 or (c-15) of this Section. A collaborative agreement with a 4 5 dentist must be in accordance with subsection (c-5) (c-10) of 6 this Section. <del>A collaborative agreement with a podiatric</del> 7 physician must be in accordance with subsection (c 5) of this 8 Section. Collaboration does not require an employment 9 relationship between the collaborating physician, podiatric 10 physician, or dentist and the advanced practice registered 11 nurse.

12 The collaborative relationship under an agreement shall 13 not be construed to require the personal presence of a 14 collaborating physician at the place where services are 15 rendered, except for the delivery of anesthesia in accordance with subsection (c-5) of this Section. Methods of communication 16 17 shall be available for consultation with the collaborating physician in person or by telecommunications or electronic 18 communications as set forth in the written agreement. 19

20 (b-5) Absent an employment relationship, a written 21 collaborative agreement may not (1) restrict the categories of 22 patients of an advanced practice registered nurse within the 23 scope of the advanced practice registered nurses training and 24 experience, (2) limit third party payors or government health 25 programs, such as the medical assistance program or Medicare 26 with which the advanced practice registered nurse contracts, or

(3) limit the geographic area or practice location of the
 advanced practice registered nurse in this State.

3 (c) In the case of anesthesia services provided by a 4 certified registered nurse anesthetist, an anesthesiologist, a 5 physician, a dentist, or a podiatric physician must participate 6 through discussion of and agreement with the anesthesia plan 7 and remain <del>physically present and</del> available <del>on the premises</del> 8 <del>during the delivery of anesthesia services</del> for diagnosis, 9 consultation, and treatment of emergency medical conditions.

10 (c-5)A certified registered nurse anesthetist, who 11 provides anesthesia services outside of a hospital or 12 ambulatory surgical treatment center shall enter into a written 13 collaborative agreement with an anesthesiologist or the 14 physician licensed to practice medicine in all its branches, or the podiatric physician, or the dentist who has the appropriate 15 16 permit under the Illinois Dental Practice Act performing the 17 procedure. Outside of a hospital or ambulatory surgical treatment center, the certified registered nurse anesthetist 18 may provide only those services that the collaborating 19 20 podiatric physician or dentist is authorized to provide pursuant to the Podiatric Medical Practice Act of 1987 or the 21 22 Illinois Dental Practice Act and rules adopted under those Acts 23 thereunder. A certified registered nurse anesthetist may select, order, and administer medication, including controlled 24 25 substances, and apply appropriate medical devices for delivery 26 of anesthesia services under the anesthesia plan agreed with by

- SB1683
- 1

2

the anesthesiologist or the operating physician or operating podiatric physician.

(c-10) (Blank). A certified registered nurse anesthetist 3 who provides anesthesia services in a dental office shall enter 4 5 into a written collaborative agreement with an anesthesiologist or the physician licensed to practice 6 medicine in all its branches or the operating dentist 7 performing the procedure. The agreement shall describe the 8 working relationship of the certified registered nurse 9 anesthetist and dentist and shall authorize the categories of 10 11 care, treatment, or procedures to be performed by the certified 12 registered nurse anesthetist. In a collaborating dentist's office, the certified registered nurse anesthetist may only 13 provide those services that the operating dentist with the 14 appropriate permit is authorized to provide pursuant to the 15 16 Illinois Dental Practice Act and rules adopted thereunder. For 17 anesthesia services, an anesthesiologist, physician, or operating dentist shall participate through discussion of and 18 agreement with the anesthesia plan and shall remain physically 19 20 present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment 21 22 of emergency medical conditions. A certified registered nurse 23 anesthetist may select, order, and administer medication, including controlled substances, and apply appropriate medical 24 25 devices for delivery of anesthesia services under the 26 anesthesia plan agreed with by the operating dentist.

- 5 - LRB101 07977 RAB 53033 b

(c-15) An advanced practice registered nurse certified as a 1 2 nurse practitioner, clinical nurse specialist, or certified nurse midwife who had a written collaborative agreement with a 3 podiatric physician immediately before the effective date of 4 5 Public Act 100-513 may continue in that collaborative 6 relationship or enter into a new written collaborative 7 relationship with a podiatric physician under the requirements of this Section and Section 65-40, as those Sections existed 8 9 immediately before the amendment of those Sections by Public 10 Act 100-513 with regard to a written collaborative agreement 11 between an advanced practice registered nurse and a podiatric 12 physician.

13 (d) A copy of the signed, written collaborative agreement 14 must be available to the Department upon request from both the 15 advanced practice registered nurse and the collaborating 16 physician, dentist, or podiatric physician.

17 (e) Nothing in this Act shall be construed to limit the delegation of tasks or duties by a physician to a licensed 18 practical nurse, a registered professional nurse, or other 19 20 persons in accordance with Section 54.2 of the Medical Practice Act of 1987. Nothing in this Act shall be construed to limit 21 22 the method of delegation that may be authorized by any means, 23 including, but not limited to, oral, written, electronic, standing orders, protocols, guidelines, or verbal orders. 24

(e-5) Nothing in this Act shall be construed to authorizean advanced practice registered nurse to provide health care

services required by law or rule to be performed by a
 physician, including those acts to be performed by a physician
 in Section 3.1 of the Illinois Abortion Law of 1975.

4 (f) An advanced practice registered nurse shall inform each
5 collaborating physician, dentist, or podiatric physician of
6 all collaborative agreements he or she has signed and provide a
7 copy of these to any collaborating physician, dentist, or
8 podiatric physician upon request.

9 (g) (Blank).

10 (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18;
11 100-577, eff. 1-26-18; 100-1096, eff. 8-26-18.)

12 (225 ILCS 65/65-43)

13 (Section scheduled to be repealed on January 1, 2028)

14 Sec. 65-43. Full practice authority.

15 (a) An Illinois-licensed advanced practice registered 16 nurse <del>certified as a nurse practitioner, nurse midwife, or</del> 17 <del>clinical nurse specialist</del> shall be deemed by law to possess the 18 ability to practice without a written collaborative agreement 19 as set forth in this Section.

(b) An advanced practice registered nurse certified as a nurse midwife, clinical nurse specialist, or nurse practitioner who files with the Department a notarized attestation of completion of at least 250 hours of continuing education or training and at least 4,000 hours of clinical experience after first attaining national certification shall

not require a written collaborative agreement, except as 1 2 specified in subsection (c). Documentation of successful 3 completion shall be provided to the Department upon request.

Continuing education or training hours required by 4 5 subsection (b) shall be in the advanced practice registered nurse's area of certification as set forth by Department rule. 6

7 The clinical experience must be in the advanced practice 8 registered nurse's area of certification. The clinical 9 experience shall be in collaboration with a physician or 10 physicians. Completion of the clinical experience must be 11 attested to by the collaborating physician or physicians and 12 the advanced practice registered nurse. For the delivery of 13 anesthesia provided by a certified registered nurse 14 anesthetist, the attestation for completion of clinical 15 experience must be attested to by the collaborating physician or physicians, podiatrists, or dentists and the certified 16 17 registered nurse anesthetist.

The scope of practice of an advanced practice 18 (C) 19 registered nurse with full practice authority includes:

20

(1) all matters included in subsection (c) of Section 21 65-30 of this Act;

22 (2)practicing without a written collaborative 23 agreement in all practice settings consistent with national certification; 24

25 (3) authority to prescribe both legend drugs and 26 through V controlled substances; Schedule ΙI this

authority includes prescription of, selection of, orders 1 2 for, administration of, storage of, acceptance of samples 3 of, and dispensing over the counter medications, legend drugs, and controlled substances categorized as 4 anv 5 Schedule II through V controlled substances, as defined in 6 Article II of the Illinois Controlled Substances Act, and other preparations, including, but 7 not limited to, 8 botanical and herbal remedies;

9 prescribing benzodiazepines Schedule (4) or ΙI narcotic drugs, such as opioids, only in a consultation 10 11 relationship with physician; this consultation а 12 relationship shall be recorded in the Prescription Monitoring Program website, pursuant to Section 316 of the 13 14 Illinois Controlled Substances Act, by the physician and 15 advanced practice registered nurse with full practice 16 authority and is not required to be filed with the Department; the specific Schedule II narcotic drug must be 17 identified by either brand name or generic name; the 18 19 specific Schedule II narcotic drug, such as an opioid, may 20 be administered by oral dosage or topical or transdermal 21 application; delivery by injection or other route of 22 administration is not permitted; at least monthly, the 23 advanced practice registered nurse and the physician must 24 discuss the condition of any patients for whom a 25 benzodiazepine or opioid is prescribed; nothing in this 26 subsection shall be construed to require a prescription by

- 9 - LRB101 07977 RAB 53033 b

an advanced practice registered nurse with full practice
 authority to require a physician name;

3 (5) authority to obtain an Illinois controlled
4 substance license and a federal Drug Enforcement
5 Administration number; and

6 (6) use of only local anesthetic<u>, except for the</u> 7 <u>delivery of anesthesia services by a certified registered</u> 8 <u>nurse anesthetist</u>.

9 The scope of practice of an advanced practice registered 10 nurse does not include operative surgery.

(d) The Department may adopt rules necessary to administer this Section, including, but not limited to, requiring the completion of forms and the payment of fees.

(e) Nothing in this Act shall be construed to authorize an advanced practice registered nurse with full practice authority to provide health care services required by law or rule to be performed by a physician, including, but not limited to, those acts to be performed by a physician in Section 3.1 of the Illinois Abortion Law of 1975.

20 (Source: P.A. 100-513, eff. 1-1-18.)

21 (225 ILCS 65/65-45) (was 225 ILCS 65/15-25)

22 (Section scheduled to be repealed on January 1, 2028)

23 Sec. 65-45. Advanced practice registered nursing in 24 hospitals, hospital affiliates, or ambulatory surgical 25 treatment centers.

An advanced practice registered nurse may provide 1 (a) 2 services in a hospital or a hospital affiliate as those terms are defined in the Hospital Licensing Act or the University of 3 Illinois Hospital Act or a licensed ambulatory surgical 4 5 treatment center without a written collaborative agreement pursuant to Section 65-35 of this Act. An advanced practice 6 7 registered nurse must possess clinical privileges recommended 8 by the hospital medical staff and granted by the hospital or 9 the consulting medical staff committee and ambulatory surgical 10 treatment center in order to provide services. The medical 11 staff or consulting medical staff committee shall periodically 12 review the services of all advanced practice registered nurses 13 granted clinical privileges, including any care provided in a hospital affiliate. Authority may also be granted when 14 15 recommended by the hospital medical staff and granted by the 16 hospital or recommended by the consulting medical staff 17 ambulatory surgical treatment committee and center to individual advanced practice registered nurses to select, 18 order, and administer medications, including controlled 19 substances, to provide delineated care. In a hospital, hospital 20 affiliate, or ambulatory surgical treatment center, the 21 22 attending physician shall determine an advanced practice 23 registered nurse's role in providing care for his or her patients, except as otherwise provided in the medical staff 24 25 bylaws or consulting committee policies.

26

(a-2) An advanced practice registered nurse privileged to

order medications, including controlled substances, may complete discharge prescriptions provided the prescription is in the name of the advanced practice registered nurse and the attending or discharging physician.

5 (a-3) Advanced practice registered nurses practicing in a 6 hospital or an ambulatory surgical treatment center are not 7 required to obtain a mid-level controlled substance license to 8 order controlled substances under Section 303.05 of the 9 Illinois Controlled Substances Act.

10 (a-4) An advanced practice registered nurse <u>certified as a</u> 11 <u>nurse practitioner, clinical nurse specialist, or certified</u> 12 <u>nurse midwife</u> meeting the requirements of Section 65-43 may be 13 privileged to complete discharge orders and prescriptions 14 under the advanced practice registered nurse's name.

15 (a-5) For anesthesia services provided by a certified 16 registered nurse anesthetist, an anesthesiologist, physician, 17 dentist, or podiatric physician shall participate through discussion of and agreement with the anesthesia plan and shall 18 19 remain physically present and be available on the premises 20 during the delivery of anesthesia services for diagnosis, 21 consultation, and treatment of emergency medical conditions, 22 unless hospital policy adopted pursuant to clause (B) of 23 subdivision (3) of Section 10.7 of the Hospital Licensing Act 24 ambulatory surgical treatment center policy adopted or 25 pursuant to clause (B) of subdivision (3) of Section 6.5 of the 26 Ambulatory Surgical Treatment Center Act provides otherwise. A

1 certified registered nurse anesthetist may select, order, and 2 administer medication for anesthesia services under the 3 anesthesia plan agreed to by the anesthesiologist or the 4 physician, in accordance with hospital alternative policy or <u>in</u> 5 <u>accordance with</u> the medical staff consulting committee 6 policies of a licensed ambulatory surgical treatment center.

7 (b) An advanced practice registered nurse who provides 8 services in a hospital shall do so in accordance with Section 9 10.7 of the Hospital Licensing Act and, in an ambulatory 10 surgical treatment center, in accordance with Section 6.5 of 11 the Ambulatory Surgical Treatment Center Act. Nothing in this 12 Act shall be construed to require an advanced practice registered nurse to have a collaborative agreement to practice 13 14 in a hospital, hospital affiliate, or ambulatory surgical 15 treatment center.

16 (c) Advanced practice registered nurses certified as nurse 17 practitioners, nurse midwives, or clinical nurse specialists practicing in a hospital affiliate may be, but are not required 18 19 to be, privileged to prescribe Schedule II through V controlled 20 substances when such authority is recommended by the appropriate physician committee of the hospital affiliate and 21 22 granted by the hospital affiliate. This authority may, but is 23 not required to, include prescription of, selection of, orders for, administration of, storage of, acceptance of samples of, 24 25 and dispensing over-the-counter medications, legend drugs, 26 medical gases, and controlled substances categorized as

Schedule II through V controlled substances, as defined in
 Article II of the Illinois Controlled Substances Act, and other
 preparations, including, but not limited to, botanical and
 herbal remedies.

5 To prescribe controlled substances under this subsection 6 (c), an advanced practice registered nurse certified as a nurse 7 practitioner, nurse midwife, or clinical nurse specialist must 8 obtain a controlled substance license. Medication orders shall 9 be reviewed periodically by the appropriate hospital affiliate 10 physicians committee or its physician designee.

11 The hospital affiliate shall file with the Department 12 notice of a grant of prescriptive authority consistent with 13 this subsection (c) and termination of such a grant of authority, in accordance with rules of the Department. Upon 14 15 receipt of this notice of grant of authority to prescribe any 16 Schedule II through V controlled substances, the licensed 17 advanced practice registered nurse certified as a nurse practitioner, nurse midwife, or clinical nurse specialist may 18 register for a mid-level practitioner controlled substance 19 20 license under Section 303.05 of the Illinois Controlled Substances Act. 21

In addition, a hospital affiliate may, but is not required to, privilege an advanced practice registered nurse certified as a nurse practitioner, nurse midwife, or clinical nurse specialist to prescribe any Schedule II controlled substances, if all of the following conditions apply:

(1) specific Schedule II controlled substances by oral 1 2 dosage or topical or transdermal application may be 3 designated, provided that the designated Schedule ΙI controlled substances are routinely prescribed by advanced 4 5 practice registered nurses in their area of certification; the privileging documents must identify the specific 6 7 Schedule II controlled substances by either brand name or 8 generic name; privileges to prescribe or dispense Schedule 9 II controlled substances to be delivered by injection or 10 other route of administration may not be granted;

11 (2) any privileges must be controlled substances 12 limited to the practice of the advanced practice registered 13 nurse;

14 (3) any prescription must be limited to no more than a15 30-day supply;

16 (4) the advanced practice registered nurse must 17 discuss the condition of any patients for whom a controlled 18 substance is prescribed monthly with the appropriate 19 physician committee of the hospital affiliate or its 20 physician designee; and

(5) the advanced practice registered nurse must meet
the education requirements of Section 303.05 of the
Illinois Controlled Substances Act.

(d) An advanced practice registered nurse meeting the
 requirements of Section 65-43 may be privileged to prescribe
 controlled substances categorized as Schedule II through V in

SB1683 - 15 - LRB101 07977 RAB 53033 b

- 1 accordance with Section 65-43.
- 2 (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18.)
- 3 Section 99. Effective date. This Act takes effect upon4 becoming law.