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AN ACT concerning the licensure of nurses.

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

ARTICLE 5

5 Section 1. Short title. This Article may be cited as 6 the Nurse Licensure Compact Act. In this Article any 7 reference to this Act means this Article.

8 Section 5-5. Nurse Licensure Compact. The State of 9 Illinois ratifies and approves the Nurse Licensure Compact 10 and enters into it with all other jurisdictions that legally 11 join in the compact, which is, in form, substantially as 12 follows:

13 ARTICLE I. Findings and Declaration of Purpose

14 (a) The party states find that:

15 (1) the health and safety of the public are 16 affected by the degree of compliance with and the 17 effectiveness of enforcement activities related to state 18 nurse licensure laws;

19 (2) violations of nurse licensure and other laws
 20 regulating the practice of nursing may result in injury
 21 or harm to the public;

(3) the expanded mobility of nurses and the use of advanced communication technologies as part of our nation's healthcare delivery system require greater coordination and cooperation among states in the areas of nurse licensure and regulation;

27 (4) new practice modalities and technology make
28 compliance with individual state nurse licensure laws
29 difficult and complex;

1 (5) the current system of duplicative licensure for 2 nurses practicing in multiple states is cumbersome and redundant to both nurses and states. 3 4 (b) The general purposes of this Compact are to: (1) facilitate the states' responsibility to 5 protect the public's health and safety; 6 7 (2) ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation; 8 9 (3) facilitate the exchange of information between party states in the areas of nurse regulation, 10 11 investigation and adverse actions; (4) promote compliance with the laws governing the 12 practice of nursing in each jurisdiction; 13 invest all party states with the authority to 14 (5) hold a nurse accountable for meeting all state practice 15 16 laws in the state in which the patient is located at the time care is rendered through the mutual recognition of 17 party state licenses. 18

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ARTICLE II. Definitions

20 As used in this Compact:

21 (a) "Adverse Action" means a home or remote state 22 action.

23 (b) "Alternative program" means a voluntary, 24 non-disciplinary monitoring program approved by a nurse 25 licensing board.

(c) "Coordinated licensure information system" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of and controlled by state nurse licensing boards.

32 (d) "Current significant investigative information" 33 means: 1 (1) investigative information that a licensing 2 board, after a preliminary inquiry that includes 3 notification and an opportunity for the nurse to respond 4 if required by state law, has reason to believe is not 5 groundless and, if proved true, would indicate more than 6 a minor infraction; or

7 (2) investigative information that indicates that
8 the nurse represents an immediate threat to public health
9 and safety regardless of whether the nurse has been
10 notified and had an opportunity to respond.

11 (e) "Home state" means the party state which is the 12 nurse's primary state of residence.

(f) "Home state action" means any administrative, civil, equitable or criminal action permitted by the home state's laws which are imposed on a nurse by the home state's licensing board or other authority including actions against an individual's license such as: revocation, suspension, probation or any other action which affects a nurse's authorization to practice.

20 (g) "Licensing board" means a party state's regulatory21 body responsible for issuing nurse licenses.

22 (h) "Multistate licensure privilege" means current, 23 official authority from a remote state permitting the practice of nursing as either a registered nurse or a 24 25 licensed practical/vocational nurse in such party state. All party states have the authority, in accordance with existing 26 27 state due process law, to take actions against the nurse's privilege such as: revocation, suspension, probation or any 28 29 other action which affects a nurse's authorization to 30 practice.

31 (i) "Nurse" means a registered nurse or licensed 32 practical/vocational nurse, as those terms are defined by 33 each party's state practice laws.

34 (j) "Party state" means any state that has adopted this

1 Compact.

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2 (k) "Remote state" means a party state, other than the3 home state,

4 (1) where the patient is located at the time 5 nursing care is provided, or,

6 (2) in the case of the practice of nursing not 7 involving a patient, in such party state where the 8 recipient of nursing practice is located.

9 (1) "Remote state action" means:

10 (1) any administrative, civil, equitable or 11 criminal action permitted by a remote state's laws which 12 are imposed on a nurse by the remote state's licensing 13 board or other authority including actions against an 14 individual's multistate licensure privilege to practice 15 in the remote state, and

16 (2) cease and desist and other injunctive or
17 equitable orders issued by remote states or the licensing
18 boards thereof.

19 (m) "State" means a state, territory, or possession of 20 the United States, the District of Columbia or the 21 Commonwealth of Puerto Rico.

(n) "State practice laws" means those individual party's 22 23 state laws and regulations that govern the practice of nursing, define the scope of nursing practice, and create the 24 25 methods and grounds for imposing discipline. "State practice laws" does not include the initial qualifications for 26 27 licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the 28 29 home state.

(a) A license to practice registered nursing issued by a
home state to a resident in that state will be recognized by
each party state as authorizing a multistate licensure

ARTICLE III. General Provisions and Jurisdiction

1 privilege to practice as a registered nurse in such party 2 state. A license to practice licensed practical/vocational nursing issued by a home state to a resident in that state 3 4 will be recognized by each party state as authorizing a 5 multistate licensure privilege to practice as a licensed practical/vocational nurse in such party state. In order to 6 7 obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as 8 9 well as all other applicable state laws.

Party states may, in accordance with state due 10 (b) 11 process laws, limit or revoke the multistate licensure 12 privilege of any nurse to practice in their state and may take any other actions under their applicable state laws 13 necessary to protect the health and safety of their citizens. 14 a party state takes such action, it shall promptly notify 15 Ιf 16 the administrator of the coordinated licensure information The administrator of the coordinated licensure 17 system. information system shall promptly notify the home state of 18 any such actions by remote states. 19

Every nurse practicing in a party state must comply 20 (C) 21 with the state practice laws of the state in which the 22 patient is located at the time care is rendered. In addition, 23 the practice of nursing is not limited to patient care, but shall include all nursing practice as defined by the state 24 25 practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing 26 board and the courts, as well as the laws, in that party 27 28 state.

This Compact does not affect additional requirements 29 (d) 30 imposed by states for advanced practice registered nursing. multistate licensure privilege to practice 31 However, a 32 registered nursing granted by a party state shall be recognized by other party states as a license to practice 33 registered nursing if one is required by state law as 34 а

precondition for qualifying for advanced practice registered
 nurse authorization.

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3 (e) Individuals not residing in a party state shall 4 continue to be able to apply for nurse licensure as provided 5 for under the laws of each party state. However, the license 6 granted to these individuals will not be recognized as 7 granting the privilege to practice nursing in any other party 8 state unless explicitly agreed to by that party state.

9 ARTICLE IV. Applications for Licensure in a Party State

10 (a) Upon application for a license, the licensing board 11 in a party state shall ascertain, through the coordinated 12 licensure information system, whether the applicant has ever 13 held, or is the holder of, a license issued by any other 14 state, whether there are any restrictions on the multistate 15 licensure privilege, and whether any other adverse action by 16 any state has been taken against the license.

17 (b) A nurse in a party state shall hold licensure in18 only one party state at a time, issued by the home state.

19 (c) A nurse who intends to change primary state of 20 residence may apply for licensure in the new home state in 21 advance of such change. However, new licenses will not be 22 issued by a party state until after a nurse provides evidence 23 of change in primary state of residence satisfactory to the 24 new home state's licensing board.

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(d) When a nurse changes primary state of residence by:

(1) moving between two party states, and obtains a
license from the new home state, the license from the
former home state is no longer valid;

(2) moving from a non-party state to a party state, and obtains a license from the new home state, the individual state license issued by the non-party state is not affected and will remain in full force if so provided by the laws of the non-party state; б

1 (3) moving from a party state to a non-party state, 2 the license issued by the prior home state converts to an 3 individual state license, valid only in the former home 4 state, without the multistate licensure privilege to 5 practice in other party states.

## ARTICLE V. Adverse Actions

7 In addition to the General Provisions described in8 Article III, the following provisions apply:

The licensing board of a remote state shall promptly 9 (a) report to the administrator of the coordinated licensure 10 11 information system any remote state actions including the factual and legal basis for such action, 12 if known. The licensing board of a remote state shall also promptly report 13 any significant current investigative information yet to 14 result in a remote state action. The administrator of the 15 coordinated licensure information system shall promptly 16 17 notify the home state of any such reports.

18 The licensing board of a party state shall have the (b) authority to complete any pending investigations for a nurse 19 20 who changes primary state of residence during the course of such investigations. It shall also have the authority to take 21 22 appropriate action(s), and shall promptly report the 23 conclusions of such investigations to the administrator of 24 the coordinated licensure information system. The 25 administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions. 26

(c) A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the license issued by the home state.

32 (d) For purposes of imposing adverse action, the33 licensing board of the home state shall give the same

1 priority and effect to reported conduct received from a 2 remote state as it would if such conduct had occurred within 3 the home state. In so doing, it shall apply its own state 4 laws to determine appropriate action.

5 (e) The home state may take adverse action based on the 6 factual findings of the remote state, so long as each state 7 follows its own procedures for imposing such adverse action.

8 (f) Nothing in this Compact shall override a party 9 state's decision that participation in an alternative program may be used in lieu of licensure action and that such 10 11 participation shall remain non-public if required by the party state's laws. Party states must require nurses who 12 enter any alternative programs to agree not to practice in 13 any other party state during the term of the alternative 14 15 program without prior authorization from such other party 16 state.

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# ARTICLE VI. Additional Authorities Invested in Party State Nurse Licensing Boards

19 Notwithstanding any other powers, party state nurse20 licensing boards shall have the authority to:

(a) if otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;

25 (b) issue subpoenas for both hearings and investigations which require the attendance and testimony of witnesses, and 26 27 the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and 28 testimony of witnesses, and/or the production of evidence 29 from another party state, shall be enforced in the latter 30 state by any court of competent jurisdiction, according to 31 32 the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The 33

1 issuing authority shall pay any witness fees, travel 2 expenses, mileage and other fees required by the service 3 statutes of the state where the witnesses and/or evidence are 4 located;

5 (c) issue cease and desist orders to limit or revoke a
6 nurse's authority to practice in their state;

7 (d) promulgate uniform rules and regulations as provided8 for in Article VIII(c).

9 ARTICLE VII. Coordinated Licensure Information System

10 (a) All party states shall participate in a cooperative 11 effort to create a coordinated data base of all licensed registered nurses and licensed practical/vocational nurses. 12 13 This system will include information on the licensure and disciplinary history of each nurse, as contributed by party 14 states, to assist in the coordination of nurse licensure and 15 enforcement efforts. 16

17 (b) Notwithstanding any other provision of law, all 18 party states' licensing boards shall promptly report adverse 19 actions, actions against multistate licensure privileges, any 20 current significant investigative information yet to result 21 in adverse action, denials of applications, and the reasons 22 for such denials, to the coordinated licensure information 23 system.

(c) Current significant investigative information shall
 be transmitted through the coordinated licensure information
 system only to party state licensing boards.

(d) Notwithstanding any other provision of law, all party states' licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with non-party states or disclosed to other entities or individuals without the express permission of the contributing state.

33 (e) Any personally identifiable information obtained by

1 a party states' licensing board from the coordinated 2 licensure information system may not be shared with non-party 3 states or disclosed to other entities or individuals except 4 to the extent permitted by the laws of the party state 5 contributing the information.

6 (f) Any information contributed to the coordinated 7 licensure information system that is subsequently required to 8 be expunged by the laws of the party state contributing that 9 information, shall also be expunged from the coordinated 10 licensure information system.

(g) The Compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection and exchange of information under this Compact.

16ARTICLE VIII. Compact Administration and17Interchange of Information

(a) The head of the nurse licensing board, or his/her
designee, of each party state shall be the administrator of
this Compact for his/her state.

(b) The Compact administrator of each party state shall furnish to the Compact administrator of each other party state any information and documents including, but not limited to, a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this Compact.

(c) Compact administrators shall have the authority to develop uniform rules to facilitate and coordinate implementation of this Compact. These uniform rules shall be adopted by party states, under the authority invested under Article VI(d).

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#### ARTICLE IX. Immunity

No party state or the officers or employees or agents of a party state's nurse licensing board who acts in accordance with the provisions of this Compact shall be liable on account of any act or omission in good faith while engaged in the performance of their duties under this Compact. Good faith in this article shall not include willful misconduct, gross negligence, or recklessness.

9 ARTICLE X. Entry into Force, Withdrawal and Amendment

10 (a) This Compact shall enter into force and become 11 effective as to any state when it has been enacted into the 12 laws of that state. Any party state may withdraw from this 13 Compact by enacting a statute repealing the same, but no such 14 withdrawal shall take effect until six months after the 15 withdrawing state has given notice of the withdrawal to the 16 executive heads of all other party states.

17 (b) No withdrawal shall affect the validity or 18 applicability by the licensing boards of states remaining 19 party to the Compact of any report of adverse action 20 occurring prior to the withdrawal.

(c) Nothing contained in this Compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this Compact.

(d) This Compact may be amended by the party states. No
amendment to this Compact shall become effective and binding
upon the party states unless and until it is enacted into the
laws of all party states.

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ARTICLE XI. Construction and Severability

31 (a) This Compact shall be liberally construed so as to

1 effectuate the purposes thereof. The provisions of this 2 Compact shall be severable and if any phrase, clause, sentence or provision of this Compact is declared to be 3 4 contrary to the constitution of any party state or of the United States or the applicability thereof to any government, 5 agency, person or circumstance is held invalid, the validity 6 of the remainder of this Compact and the applicability 7 8 thereof to any government, agency, person or circumstance 9 shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the 10 11 Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the 12 party state affected as to all severable matters. 13

14 (b) In the event party states find a need for settling15 disputes arising under this Compact:

16 (1) The party states may submit the issues in dispute to an arbitration panel which will be comprised 17 of an individual appointed by the Compact administrator 18 19 in the home state; an individual appointed by the Compact administrator in the remote state(s) involved; and an 20 individual mutually agreed 21 upon by the Compact administrators of all the party states involved in the 22 23 dispute.

24 (2) The decision of a majority of the arbitrators25 shall be final and binding.

Section 5-10. Compact administrator. The head of the nurse licensing board as used to define the compact administrator in Article VIII(a) of the Compact shall mean the Nursing Act Coordinator as defined under Section 10-15 of the Nursing and Advanced Practice Nursing Act.

31 Section 5-15. Compact Evaluation Initiative. Upon the 32 effective date of this Compact, the licensing board shall

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1 participate in a Compact Evaluation Initiative designed to 2 evaluate the effectiveness and operability of the Compact. Such Compact Evaluation Initiative shall be conducted by an 3 4 outside researcher. A component of the Evaluation shall include a remote state identification system through which 5 nurses shall designate those remote states in which the nurse 6 is practicing. A nurse's practice information in 7 such identification system shall be updated upon issuance and 8 renewal of the nurse license. The Evaluation shall continue 9 until the year 2005, after which time a report shall be 10 11 produced for comment by the participating licensing boards and shall be submitted to the General Assembly in the form of 12 a Nurse Licensure Compact evaluation report. 13

Section 5-20. Costs of investigation and disposition of cases. To facilitate cross-state enforcement efforts, the General Assembly finds that it is necessary for Illinois to have the power to recover from the affected nurse the costs of investigations and disposition of cases resulting from adverse actions taken by this State against that nurse.

20 Section 5-25. Statutory obligations. This Compact is 21 designed to facilitate the regulation of nurses and does not 22 relieve employers from complying with statutorily imposed 23 obligations.

24 Section 5-30. State labor laws. This Compact does not 25 supersede existing State labor laws.

## ARTICLE 10

27 Section 10-1. Short title. This Article may be cited as 28 the Advanced Practice Registered Nurse Compact Act. In this 29 Article, any reference to this Act means this Article.

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Section 10-5. Ratification and approval of compact. The advanced practice registered nurse compact is hereby enacted into law and entered into on behalf of this State with any state that legally joins therein in substantially the following form:

> ARTICLE I Findings and Declaration of Purpose

(a) The party states find that:

9 (1) The health and safety of the public are 10 affected by the degree of compliance with APRN 11 licensure/authority to practice requirements and the 12 effectiveness of enforcement activities related to state 13 APRN licensure/authority to practice laws;

14 (2) Violations of APRN licensure/authority to
15 practice and other laws regulating the practice of
16 nursing may result in injury or harm to the public;

17 (3) The expanded mobility of APRNs and the use of 18 advanced communication technologies as part of our 19 nation's health care delivery system require greater 20 coordination and cooperation among states in the areas of 21 APRN licensure/authority to practice and regulation;

(4) New practice modalities and technology make
compliance with individual state APRN licensure/authority
to practice laws difficult and complex;

25 (5) The current system of duplicative APRN 26 licensure/authority to practice for APRNs practicing in 27 multiple states is cumbersome and redundant to both APRNs 28 and states;

29 (6) Uniformity of APRN requirements throughout the
 30 states promotes public safety and public health benefits;
 31 and

32 (7) Access to APRN services increases the public's
 33 access to health care, particularly in rural and

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1 underserved areas.

(b) The general purposes of this Compact are to:

3 (1) Facilitate the states' responsibilities to
4 protect the public's health and safety;

5 (2) Ensure and encourage the cooperation of party 6 states in the areas of APRN licensure/authority to 7 practice and regulation including promotion of uniform 8 licensure requirements;

9 (3) Facilitate the exchange of information between 10 party states in the areas of APRN regulation, 11 investigation and adverse actions;

12 (4) Promote compliance with the laws governing APRN13 practice in each jurisdiction; and

14 (5) Invest all party states with the authority to
15 hold an APRN accountable for meeting all state practice
16 laws in the state in which the patient is located at the
17 time care is rendered through the mutual recognition of
18 party state licenses.

19 ARTICLE II

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21 As used in this Compact:

(a) "Advanced Practice Registered Nurse" or "APRN" means
a Nurse Anesthetist; Nurse Practitioner; Nurse Midwife; or
Clinical Nurse Specialist to the extent a party state
licenses or grants authority to practice in that APRN role
and title.

Definitions

27 (b) "Adverse Action" means a home or remote state 28 disciplinary action.

29 (c) "Alternative program" means a voluntary, 30 non-disciplinary monitoring program approved by a licensing 31 board.

32 (d) "APRN Licensure/Authority to Practice" means the33 regulatory mechanism used by a party state to grant legal

1 authority to practice as an APRN.

2 (e) "APRN Uniform Licensure/Authority to Practice 3 Requirements" means those agreed upon minimum uniform 4 licensure, education and examination requirements adopted by 5 licensing boards for the recognized APRN role and title.

6 (f) "Coordinated licensure information system" means an 7 integrated process for collecting, storing and sharing 8 information on APRN licensure/authority to practice and 9 enforcement activities related to APRN licensure/authority to 10 practice laws, which is administered by a non-profit 11 organization composed of and controlled by state licensing 12 boards.

13 (g) "Current significant investigative information"
14 means:

15 (1) Investigative information that a licensing 16 board, after a preliminary inquiry that includes 17 notification and an opportunity for the APRN to respond 18 if required by state law, has reason to believe is not 19 groundless and, if proved true, would indicate more than 20 a minor infraction; or

(2) Investigative information that indicates that
the APRN represents an immediate threat to public health
and safety regardless of whether the APRN has been
notified and had an opportunity to respond.

(h) "Home state" means the party state that is theAPRN's primary state of residence.

"Home state action" means any administrative, civil, 27 (i) equitable or criminal action permitted by the home state's 28 29 laws which are imposed on an APRN by the home state's 30 licensing board or other authority including actions against individual's license/authority to practice such as: 31 an 32 revocation, suspension, probation or any other action which 33 affects an APRN's authorization to practice.

34 (j) "Licensing board" means a party state's regulatory

1 body responsible for issuing APRN licensure/authority to 2 practice.

(k) "Multistate advanced practice privilege" means 3 4 current authority from a remote state permitting an APRN to practice in that state in the same role and title as the APRN 5 6 is licensed/authorized to practice in the home state to the 7 extent that the remote state laws recognize such APRN role 8 and title. A remote state has the authority, in accordance 9 with existing state due process laws, to take actions against the APRN's privilege, including revocation, suspension, 10 11 probation, or any other action that affects an APRN's 12 multistate privilege to practice.

13 (1) "Party state" means any state that has adopted this14 Compact.

15 (m) "Prescriptive authority" means the legal authority 16 to prescribe medications and devices as defined by party 17 state laws.

18 (n) "Remote state" means a party state, other than the19 home state,

20 (1) Where the patient is located at the time APRN21 care is provided, or

(2) In the case of APRN practice not involving a
patient, in such party state where the recipient of APRN
practice is located.

25 (o) "Remote state action" means:

26 (1) Any administrative, civil, equitable or
27 criminal action permitted by a remote state's laws which
28 are imposed on an APRN by the remote state's licensing
29 board or other authority including actions against an
30 individual's multistate advanced practice privilege in
31 the remote state, and

32 (2) Cease and desist and other injunctive or
33 equitable orders issued by remote states or the licensing
34 boards thereof.

(p) "State" means a state, territory, or possession of
 the United States.

(q) "State practice laws" means a party state's laws and 3 4 regulations that govern APRN practice, define the scope of advanced nursing practice including prescriptive authority, 5 6 and create the methods and grounds for imposing discipline. 7 State practice laws do not include the requirements necessary 8 to obtain and retain APRN licensure/authority to practice as 9 an APRN, except for qualifications or requirements of the home state. 10

11 (r) "Unencumbered" means that a state has no current 12 disciplinary action against an APRN's license/authority to 13 practice.

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ARTICLE III

## General Provisions and Jurisdiction

16 (a) All party states shall participate in the Nurse 17 Licensure Compact for registered nurses and licensed 18 practical/vocational nurses in order to enter into the APRN 19 Compact.

(b) No state shall enter the APRN Compact until the state adopts, at a minimum, the APRN Uniform Licensure/Authority to Practice Requirements for each APRN role and title recognized by the state seeking to enter the APRN Compact.

25 (c) APRN Licensure/Authority to practice issued by a home state to a resident in that state will be recognized by 26 27 each party state as authorizing a multistate advanced practice privilege to the extent that the role and title are 28 recognized by each party state. To obtain or retain APRN 29 licensure/authority to practice as an APRN, an applicant must 30 31 meet the home state's qualifications for authority or renewal 32 of authority as well as all other applicable state laws.

33 (d) The APRN multistate advanced practice privilege does

not include prescriptive authority, and does not affect any requirements imposed by states to grant to an APRN initial and continuing prescriptive authority according to state practice laws. However, a party state may grant prescriptive authority to an individual on the basis of a multistate advanced practice privilege to the extent permitted by state practice laws.

8 (e) A party state may, in accordance with state due 9 limit or revoke the multistate advanced process laws, 10 practice privilege in the party state and may take any other 11 necessary actions under the party state's applicable laws to protect the health and safety of the party state's citizens. 12 If a party state takes action, the party state shall promptly 13 administrator of the coordinated licensure 14 notify the 15 information system. The administrator of the coordinated 16 licensure information system shall promptly notify the home state of any such actions by remote states. 17

An APRN practicing in a party state must comply with 18 (f) 19 the state practice laws of the state in which the patient is located at the time care is provided. The APRN practice 20 includes patient care and all advanced nursing practice 21 22 defined by the party state's practice laws. The APRN 23 practice will subject an APRN to the jurisdiction of the licensing board, the courts, and the laws of the party state. 24

(g) Individuals not residing in a party state may apply for APRN licensure/authority to practice as an APRN under the laws of a party state. However, the authority to practice granted to these individuals will not be recognized as granting the privilege to practice as an APRN in any other party state unless explicitly agreed to by that party state.

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#### ARTICLE IV

32 Applications for APRN Licensure/Authority33 to Practice in a Party State

(a) Once an application for APRN licensure/authority to
 practice is submitted, a party state shall ascertain, through
 the Coordinated Licensure Information System, whether:

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4 (1) The applicant has held or is the holder of a 5 nursing license/authority to practice issued by another 6 state;

7 (2) The applicant has had a history of previous
8 disciplinary action by any state;

9 (3) An encumbrance exists on any license/authority 10 to practice; and

11 (4) Any other adverse action by any other state has
12 been taken against a license/authority to practice.

13 This information may be used in approving or denying an 14 application for APRN licensure/authority to practice.

(b) An APRN in a party state shall hold APRN licensure/authority to practice in only one party state at a time, issued by the home state.

18 (c) An APRN who intends to change primary state of 19 residence may apply for APRN licensure/authority to practice 20 in the new home state in advance of such change. However, 21 new licensure/authority to practice will not be issued by a 22 party state until after an APRN provides evidence of change 23 in primary state of residence satisfactory to the new home 24 state's licensing board.

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(d) When an APRN changes primary state of residence by:

26 (1) Moving between two party states, and obtains
27 APRN licensure/authority to practice from the new home
28 state, the APRN licensure/authority to practice from the
29 former home state is no longer valid;

30 (2) Moving from a non-party state to a party state, 31 and obtains APRN licensure/authority to practice from the 32 new home state, the individual state license issued by 33 the non-party state is not affected and will remain in 34 full force if so provided by the laws of the non-party 1 state;

2 (3) Moving from a party state to a non-party state, 3 the APRN licensure/authority to practice issued by the 4 prior home state converts to an individual state license, 5 valid only in the former home state, without the 6 multistate licensure privilege to practice in other party 7 states.

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## ARTICLE V

## Adverse Actions

10 In addition to the General Provisions described in 11 Article III, the following provisions apply:

The licensing board of a remote state shall promptly 12 (a) report to the administrator of the coordinated licensure 13 information system any remote state actions including the 14 factual and legal basis for such action, if known. 15 The licensing board of a remote state shall also promptly report 16 17 any significant current investigative information yet to 18 result in a remote state action. The administrator of the coordinated licensure information system shall promptly 19 20 notify the home state of any such reports.

(b) The licensing board of a party state shall have the 21 22 authority to complete any pending investigations for an APRN who changes primary state of residence during the course of 23 such investigations. It shall also have the authority to take 24 25 appropriate action(s), and shall promptly report the conclusions of such investigations to the administrator of 26 27 the coordinated licensure information system. The administrator of the coordinated licensure information system 28 shall promptly notify the new home state of any such actions. 29

30 (c) A remote state may take adverse action affecting the 31 multistate advanced practice privilege to practice within 32 that party state. However, only the home state shall have the 33 power to impose adverse action against the APRN

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licensure/authority to practice issued by the home state.

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2 (d) For purposes of imposing adverse action, the 3 licensing board of the home state shall give the same 4 priority and effect to reported conduct received from a 5 remote state as it would if such conduct had occurred within 6 the home state. In so doing, it shall apply its own state 7 laws to determine appropriate action.

8 (e) The home state may take adverse action based on the 9 factual findings of the remote state, so long as each state 10 follows its own procedures for imposing such adverse action.

11 (f) Nothing in this Compact shall override a party state's decision that participation in an alternative program 12 may be used in lieu of adverse action and that such 13 participation shall remain non-public if required by the 14 15 party state's laws. Party states must require APRNs who enter 16 any alternative programs to agree not to practice in any other party state during the term of the alternative program 17 without prior authorization from such other party state. 18

19 (g) All home state licensing board disciplinary orders, agreed or otherwise, which limit the scope of the APRN's 20 21 practice or require monitoring of the APRN as a condition of the order shall include the requirements that the APRN will 22 23 limit her or his practice to the home state during the pendency of the order. This requirement may allow the APRN to 24 states 25 in other with prior written practice party authorization from both the home state and party state 26 licensing boards. 27

28 ARTICLE VI
29 Additional Authorities Invested in Party State
30 Licensing Boards
31 Notwithstanding any other powers, party state licensing
32 boards shall have the authority to:

33 (a) If otherwise permitted by state law, recover from

1 the affected APRN the costs of investigations and disposition 2 of cases resulting from any adverse action taken against that 3 APRN;

4 Issue for both (b) subpoenas hearings and 5 investigations, which require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued 6 7 by a licensing board in a party state for the attendance and 8 testimony of witnesses, and/or the production of evidence 9 from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to 10 11 the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The 12 issuing authority shall pay any witness fees, travel 13 expenses, mileage and other fees required by the service 14 15 statutes of the state where the witnesses and/or evidence are 16 located;

17 (c) Issue cease and desist orders to limit or revoke an 18 APRN's privilege or licensure/authority to practice in their 19 state; and

20 (d) Promulgate uniform rules and regulations as provided21 for in Article VIII(c).

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ARTICLE VII

23 Coordinated Licensure Information System

24 (a) All party states shall participate in a cooperative 25 effort to create a coordinated database of all APRNs. This include information 26 system will on the APRN 27 licensure/authority to practice and disciplinary history of each APRN, as contributed by party states, to assist in the 28 coordination of APRN licensure/authority to practice and 29 enforcement efforts. 30

31 (b) Notwithstanding any other provision of law, all 32 party states' licensing boards shall promptly report adverse 33 actions, actions against multistate advanced practice

privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials, to the coordinated licensure information system.

5 (c) Current significant investigative information shall
6 be transmitted through the coordinated licensure information
7 system only to party state licensing boards.

8 (d) Notwithstanding any other provision of law, all 9 party states' licensing boards contributing information to 10 the coordinated licensure information system may designate 11 information that may not be shared with non-party states or 12 disclosed to other entities or individuals without the 13 express permission of the contributing state.

(e) Any personally identifiable information obtained by
a party states' licensing board from the coordinated
licensure information system may not be shared with non-party
states or disclosed to other entities or individuals except
to the extent permitted by the laws of the party state
contributing the information.

20 (f) Any information contributed to the coordinated 21 licensure information system that is subsequently required to 22 be expunged by the laws of the party state contributing that 23 information, shall also be expunged from the coordinated 24 licensure information system.

(g) The Compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection and exchange of information under this Compact.

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#### ARTICLE VIII

31 Compact Administration and Interchange of Information

32 (a) The head of the licensing board, or his/her33 designee, of each party state shall be the administrator of

1 this Compact for his/her state.

2 (b) The Compact administrator of each party state shall furnish to the Compact administrator of each other party 3 4 state any information and documents including, but not 5 limited to, a uniform data set of investigations, identifying 6 information, licensure data, and disclosable alternative 7 participation information to facilitate program the 8 administration of this Compact.

9 (c) Compact administrators shall have the authority to 10 develop uniform rules to facilitate and coordinate 11 implementation of this Compact. These uniform rules shall be 12 adopted by party states, under the authority invested under 13 Article VI(d).

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## ARTICLE IX

## Immunity

No party state or the officers or employees or agents of a party state's licensing board who acts in accordance with the provisions of this Compact shall be liable on account of any act or omission in good faith while engaged in the performance of their duties under this Compact. Good faith in this article shall not include willful misconduct, gross negligence, or recklessness.

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#### ARTICLE X

Entry into Force, Withdrawal and Amendment

(a) This Compact shall enter into force and become
effective as to any state when it has been enacted into the
laws of that state. Any party state may withdraw from this
Compact by enacting a statute repealing the same, but no such
withdrawal shall take effect until six months after the
withdrawing state has given notice of the withdrawal to the
executive heads of all other party states.

1 (b) No withdrawal shall affect the validity or 2 applicability by the licensing boards of states remaining 3 party to the Compact of any report of adverse action 4 occurring prior to the withdrawal.

5 (c) Nothing contained in this Compact shall be construed 6 to invalidate or prevent any APRN licensure/authority to 7 practice agreement or other cooperative arrangement between a 8 party state and a non-party state that is made in accordance 9 with the other provisions of this Compact.

10 (d) This Compact may be amended by the party states. No 11 amendment to this Compact shall become effective and binding 12 upon the party states unless and until it is enacted into the 13 laws of all party states.

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#### ARTICLE XI

## Construction and Severability

This Compact shall be liberally construed so as to 16 (a) 17 effectuate the purposes thereof. The provisions of this 18 Compact shall be severable and if any phrase, clause, sentence or provision of this Compact is declared to be 19 20 contrary to the constitution of any party state or of the United States or the applicability thereof to any government, 21 22 agency, person or circumstance is held invalid, the validity 23 of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance 24 25 shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the 26 27 Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the 28 party state affected as to all severable matters. 29

30 (b) In the event party states find a need for settling31 disputes arising under this Compact:

32 (1) The party states may submit the issues in33 dispute to an arbitration panel which will be comprised

of an individual appointed by the Compact administrator in the home state; an individual appointed by the Compact administrator in the remote state(s) involved; and an individual mutually agreed upon by the Compact administrators of all the party states involved in the dispute.

7 (2) The decision of a majority of the arbitrators8 shall be final and binding.

9 Section 10. Compact administrator; expenses.

10 (a) The Director of Professional Regulation shall serve 11 as the compact administrator for this State and any expenses 12 he or she incurs in so serving shall be paid from the 13 appropriation for the ordinary and contingent expenses of the 14 Department of Professional Regulation.

15 (b) The Director shall terminate Illinois' participation in the compact if the APRN Uniform Licensure/Authority to 16 17 Practice Requirements are substantially changed after the effective date of this Act. A substantial change is anything 18 significantly alters the individual professional 19 that 20 qualifications for participation in the compact such as no 21 longer requiring either certification by a national 22 accreditation body in the APRN's specialty appropriate to educational preparation or completion of a graduate level 23 24 APRN educational program accredited by a national accreditation body. If the Director terminates Illinois' 25 participation in the compact, then the Director shall provide 26 all APRNs practicing in Illinois under the compact at the 27 time 60 days written notice of the termination. 28

(c) All APRNs practicing in Illinois under the compact at the time of registration with the Department of Professional Regulation shall be required to sign a notarized statement of understanding and agreement to practice within the scope of practice requirements for advanced practice

nurses in Illinois under the Nursing and Advanced Practice
 Nursing Act. The Department shall prepare the form to be
 used.

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## ARTICLE 90

5 Section 90-5. The Nursing and Advanced Practice Nursing 6 Act is amended by changing Sections 5-10, 5-15, and 10-30 as 7 follows:

8 (225 ILCS 65/5-10)

(Section scheduled to be repealed on January 1, 2008)

10 Sec. 5-10. Definitions. Each of the following terms, 11 when used in this Act, shall have the meaning ascribed to it 12 in this Section, except where the context clearly indicates 13 otherwise:

14 (a) "Department" means the Department of Professional15 Regulation.

16 (b) "Director" means the Director of Professional 17 Regulation.

18 (c) "Board" means the Board of Nursing appointed by the19 Director.

(d) "Academic year" means the customary annual schedule
of courses at a college, university, or approved school,
customarily regarded as the school year as distinguished from
the calendar year.

(e) "Approved program of professional nursing education"
and "approved program of practical nursing education" are
programs of professional or practical nursing, respectively,
approved by the Department under the provisions of this Act.

(f) "Nursing Act Coordinator" means a registered professional nurse appointed by the Director to carry out the administrative policies of the Department.

31 (g) "Assistant Nursing Act Coordinator" means a

registered professional nurse appointed by the Director to
 assist in carrying out the administrative policies of the
 Department.

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(h) "Registered" is the equivalent of "licensed".

5 "Practical nurse" or "licensed practical nurse" (i) б means a person who is licensed as a practical nurse under 7 this Act or holds the privilege to practice under this Act 8 and practices practical nursing as defined in paragraph (j) 9 of this Section. Only a practical nurse licensed or granted the privilege to practice under this Act is entitled to use 10 11 the title "licensed practical nurse" and the abbreviation "L.P.N.". 12

(j) "Practical nursing" means the performance of nursing 13 acts requiring the basic nursing knowledge, judgement, and 14 acquired by means of completion of an approved 15 skill 16 practical nursing education program. Practical nursing includes assisting in the nursing process as delegated by and 17 under the direction of a registered professional nurse. 18 The 19 practical nurse may work under the direction of a licensed physician, dentist, podiatrist, or other health care 20 21 professional determined by the Department.

22 (k) "Registered Nurse" or "Registered Professional 23 Nurse" means a person who is licensed as a professional nurse under this Act or holds the privilege to practice under this 24 25 Act and practices nursing as defined in paragraph (1) of this 26 Section. Only a registered nurse licensed or granted the privilege to practice under this Act is entitled to use the 27 titles "registered nurse" and "registered professional nurse" 28 and the abbreviation, "R.N.". 29

30 (1) "Registered professional nursing practice" includes 31 all nursing specialities and means the performance of any 32 nursing act based upon professional knowledge, judgment, and 33 skills acquired by means of completion of an approved 34 registered professional nursing education program. A

1 registered professional nurse provides nursing care 2 the importance of the whole emphasizing and the interdependence of its parts through the nursing process to 3 4 individuals, groups, families, or communities, that includes 5 but is not limited to: (1) the assessment of healthcare 6 needs, nursing diagnosis, planning, implementation, and 7 nursing evaluation; (2) the promotion, maintenance, and 8 restoration of health; (3) counseling, patient education, 9 health education, and patient advocacy; (4) the administration of medications and treatments as prescribed by 10 11 a physician licensed to practice medicine in all of its branches, a licensed dentist, a licensed podiatrist, or a 12 13 licensed optometrist or as prescribed by а physician assistant in accordance with written guidelines required 14 under the Physician Assistant Practice Act of 1987 or by 15 an 16 advanced practice nurse in accordance with a written collaborative agreement required under the Nursing 17 and Advanced Practice Nursing Act; (5) the coordination and 18 19 management of the nursing plan of care; (6) the delegation to and supervision of individuals who assist the registered 20 21 professional nurse implementing the plan of care; and (7) teaching and supervision of nursing students. The foregoing 22 23 shall not be deemed to include those acts of medical or prescription of therapeutic or corrective 24 diagnosis 25 measures that are properly performed only by physicians licensed in the State of Illinois. 26

"Current nursing practice update course" means a 27 (m) planned nursing education curriculum 28 approved by the Department consisting of activities that have educational 29 30 objectives, instructional methods, content or subject matter, clinical practice, and evaluation methods, related to basic 31 32 review and updating content and specifically planned for those nurses previously licensed in the United States or its 33 territories and preparing for reentry into nursing practice. 34

1 (n) "Professional assistance program for nurses" means a 2 professional assistance program that meets criteria established by the Board of Nursing and approved by the 3 4 Director, which provides a non-disciplinary treatment approach for nurses licensed under this Act whose ability to 5 practice is compromised by alcohol or chemical substance 6 7 addiction.

8 <u>(o)</u> "Privilege to practice" means the authorization to 9 practice as a practical nurse or a registered nurse in the 10 State under the Nurse Licensure Compact.

11 (p) "License" or "licensed" means the permission granted
12 a person to practice nursing under this Act, including the
13 privilege to practice.

14 (q) "Licensee" means a person who has been issued a
 15 license to practice nursing in the state or who holds the
 16 privilege to practice nursing in this State.

17 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98; 18 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

19 (225 ILCS 65/5-15)

20 (Section scheduled to be repealed on January 1, 2008) 21 Sec. 5-15. Policy; application of Act. For the protection 22 life and the promotion of health, and the prevention of of illness and communicable diseases, any person practicing or 23 24 offering to practice professional and practical nursing in Illinois shall submit evidence that he or she is qualified to 25 practice, and shall be licensed or hold the privilege to 26 practice as provided under this Act. No person shall 27 28 practice or offer to practice professional or practical nursing in Illinois or use any title, sign, card or device to 29 30 indicate that such a person is practicing professional or practical nursing unless such person has been licensed or 31 32 holds the privilege to practice under the provisions of this 33 Act.

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This Act does not prohibit the following:

(a) The practice of nursing in Federal employment
in the discharge of the employee's duties by a person who
is employed by the United States government or any
bureau, division or agency thereof and is a legally
qualified and licensed nurse of another state or
territory and not in conflict with Sections 10-5, 10-30,
and 10-45 of this Act.

9 (b) Nursing that is included in their program of 10 study by students enrolled in programs of nursing or in 11 current nurse practice update courses approved by the 12 Department.

13 (c) The furnishing of nursing assistance in an 14 emergency.

15 (d) The practice of nursing by a nurse who holds an
16 active license in another state when providing services
17 to patients in Illinois during a bonafide emergency or in
18 immediate preparation for or during interstate transit.

(e) The incidental care of the sick by members of
the family, domestic servants or housekeepers, or care of
the sick where treatment is by prayer or spiritual means.

(f) Persons from being employed as nursing aides,
attendants, orderlies, and other auxiliary workers in
private homes, long term care facilities, nurseries,
hospitals or other institutions.

(g) The practice of practical nursing by one who 26 has applied in writing to the Department in form and 27 substance satisfactory to the Department, for a license 28 as a licensed practical nurse and who has complied with 29 30 all the provisions under Section 10-30, except the passing of an examination to be eligible to receive such 31 license, until: the decision of the Department that the 32 applicant has failed to pass the next available 33 34 examination authorized by the Department or has failed,

1 without an approved excuse, to take the next available 2 examination authorized by the Department or until the withdrawal of the application, but not to exceed 3 3 4 months. No applicant for licensure practicing under the 5 provisions of this paragraph shall practice practical nursing except under the direct supervision of 6 а 7 registered professional nurse licensed under this Act or 8 a licensed physician, dentist or podiatrist. In no 9 instance shall any such applicant practice or be employed in any supervisory capacity. 10

11 (h) The practice of practical nursing by one who is a licensed practical nurse under the laws of another U.S. 12 13 jurisdiction and has applied in writing to the Department, in form and substance satisfactory to 14 the 15 Department, for a license as a licensed practical nurse 16 and who is qualified to receive such license under Section 10-30, until (1) the expiration of 6 months after 17 filing of such written application, (2) the 18 the withdrawal of such application, or (3) the denial of such 19 20 application by the Department.

21 (i) The practice of professional nursing by one who 22 has applied in writing to the Department in form and 23 substance satisfactory to the Department for a license as a registered professional nurse and has complied with all 24 25 the provisions under Section 10-30 except the passing of an examination to be eligible to receive such license, 26 the decision of the Department that the applicant 27 until failed to pass the next available 28 has examination 29 authorized by the Department or has failed, without an approved excuse, to take the next available examination 30 authorized by the Department or until the withdrawal of 31 the application, but not to exceed 3 months. 32 No applicant for licensure practicing under the provisions 33 of this paragraph shall practice professional nursing 34

except under the direct supervision of a registered
 professional nurse licensed under this Act. In no
 instance shall any such applicant practice or be employed
 in any supervisory capacity.

(j) The practice of professional nursing by one who 5 is a registered professional nurse under the laws of 6 7 another state, territory of the United States or country 8 and has applied in writing to the Department, in form and 9 substance satisfactory to the Department, for a license as a registered professional nurse and who is qualified 10 11 to receive such license under Section 10-30, until (1) the expiration of 6 months after the filing of such 12 the withdrawal of written application, (2) 13 such application, or (3) the denial of such application by the 14 15 Department.

16 (k) The practice of professional nursing that is included in a program of study by one who is a registered 17 professional nurse under the laws of another state or 18 territory of the United States or foreign country, 19 20 territory or province and who is enrolled in a graduate 21 nursing education program or a program for the completion 22 of a baccalaureate nursing degree in this State, which 23 includes clinical supervision by faculty as determined by the educational institution offering the program and the 24 health care organization where the practice of nursing 25 The educational institution will file with the occurs. 26 Department each academic term a list of the names and 27 origin of license of all professional nurses practicing 28 29 nursing as part of their programs under this provision.

30 (1) Any person licensed in this State under any
31 other Act from engaging in the practice for which she or
32 he is licensed.

33 (m) Delegation to authorized direct care staff
 34 trained under Section 15.4 of the Mental Health and

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Developmental Disabilities Administrative Act.

An applicant for license practicing under the exceptions set forth in subparagraphs (g), (h), (i), and (j) of this Section shall use the title R.N. Lic. Pend. or L.P.N. Lic. Pend. respectively and no other.

6 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98; 7 90-655, eff. 7-30-98; 90-742, eff. 8-13-98; 91-630, eff. 8 8-19-99.)

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(225 ILCS 65/10-30)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 10-30. Qualifications for licensure.

12 (a) Each applicant who successfully meets the 13 requirements of this Section shall be entitled to licensure 14 as a Registered Nurse or Licensed Practical Nurse, whichever 15 is applicable.

16 (b) An applicant for licensure by examination to 17 practice as a registered nurse or licensed practical nurse 18 shall:

19 (1) submit a completed written application, on
20 forms provided by the Department and fees as established
21 by the Department;

(2) for registered nurse licensure, have graduated
from a professional nursing education program approved by
the Department;

(2.5) for licensed practical nurse licensure, have
graduate from a practical nursing education program
approved by the Department;

(3) have not violated the provisions of Section 10-45 of this Act. The Department may take into consideration any felony conviction of the applicant, but such a conviction shall not operate as an absolute bar to licensure;

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(4) meet all other requirements as established by

1 rule;

2 (5) pay, either to the Department or its designated testing service, a fee covering the cost of providing the 3 4 examination. Failure to appear for the examination on the scheduled date at the time and place specified after the 5 applicant's application for examination has been received 6 7 and acknowledged by the Department or the designated testing service shall result in the forfeiture of the 8 9 examination fee.

10 If an applicant neglects, fails, or refuses to take an 11 examination or fails to pass an examination for a license 12 under this Act within 3 years after filing the application, 13 the application shall be denied. However, the applicant may 14 make a new application accompanied by the required fee and 15 provide evidence of meeting the requirements in force at the 16 time of the new application.

An applicant may take and successfully complete 17 а Department-approved examination in another jurisdiction. 18 19 However, an applicant who has never been licensed previously in any jurisdiction that utilizes a Department-approved 20 21 examination and who has taken and failed to pass the examination within 3 years after filing the application must 22 23 submit proof of successful completion of а 24 Department-authorized nursing education program or recompletion of an approved registered nursing program or 25 26 licensed practical nursing program, as appropriate, prior to 27 re-application.

28 An applicant shall have one year from the date of 29 notification of successful completion of the examination to 30 apply to the Department for a license. If an applicant fails 31 to apply within one year, the applicant shall be required to 32 again take and pass the examination unless licensed in 33 another jurisdiction of the United States within one year of 34 passing the examination.

1 (c) An applicant for licensure by endorsement who is a 2 registered professional nurse or a licensed practical nurse 3 licensed by examination under the laws of another state or 4 territory of the United States or a foreign country, 5 jurisdiction, territory, or province shall:

6 (1) submit a completed written application, on 7 forms supplied by the Department, and fees as established 8 by the Department;

9 (2) for registered nurse licensure, have graduated 10 from a professional nursing education program approved by 11 the Department;

12 (2.5) for licensed practical nurse licensure, have 13 graduated from a practical nursing education program 14 approved by the Department;

15 (3) submit verification of licensure status 16 directly from the United States jurisdiction of 17 licensure, if applicable, as defined by rule;

18 (4) have passed the examination authorized by the19 Department;

20 (5) meet all other requirements as established by21 rule.

22 (d) All applicants for registered nurse licensure 23 pursuant to item (2) of subsection (b) and item (2) of subsection (c) of this Section who are graduates of nursing 24 25 educational programs in a country other than the United States or its territories must submit to the Department 26 certification of successful completion of the Commission of 27 Graduates of Foreign Nursing Schools (CGFNS) examination. An 28 applicant who is unable to provide appropriate documentation 29 30 to satisfy CGFNS of her or his educational qualifications for examination shall be required to pass an 31 the CGFNS 32 examination to test competency in the English language, which shall be prescribed by the Department, if the applicant is 33 determined by the Board to be educationally prepared in 34

nursing. The Board shall make appropriate inquiry into the
 reasons for any adverse determination by CGFNS before making
 its own decision.

4 An applicant licensed in another state or territory who is applying for licensure and has received her or his 5 б education in a country other than the United States or its 7 territories shall be exempt from the completion of the Commission of Graduates of Foreign Nursing Schools (CGFNS) 8 9 examination if the applicant meets all of the following requirements: 10

11 (1) successful passage of the licensure examination 12 authorized by the Department;

13 (2) holds an active, unencumbered license in14 another state; and

15 (3) has been actively practicing for a minimum of 216 years in another state.

17 (e) (Blank).

Pending the issuance of a license under subsection 18 (f) 19 (c) of this Section, the Department may grant an applicant a temporary license to practice nursing as a registered nurse 20 21 or as a licensed practical nurse if the Department is 22 satisfied that the applicant holds an active, unencumbered 23 license in good standing in another jurisdiction. Τf the applicant holds more than one current active license, or one 24 25 or more active temporary licenses from other jurisdictions, the Department shall not issue a temporary license until it 26 is satisfied that each current active license held by the 27 The temporary license, which applicant is unencumbered. 28 shall be issued no later than 14 working days following 29 30 receipt by the Department of an application for the temporary license, shall be granted upon the submission of the 31 32 following to the Department:

33 (1) a signed and completed application for34 licensure under subsection (a) of this Section as a

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registered nurse or a licensed practical nurse;

2 (2) proof of a current, active license in at least one other jurisdiction and proof that each current active 3 4 license or temporary license held by the applicant within the last 5 years is unencumbered; 5

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(3) a signed and completed application for a 7 temporary license; and

8

the required temporary license fee. (4)

9 The Department may refuse to issue an applicant a (g) temporary license authorized pursuant to this Section if, 10 11 within 14 working days following its receipt of an application for a temporary license, the Department 12 determines that: 13

(1) the applicant has been convicted of a crime 14 under the laws of a jurisdiction of the United States: 15 16 (i) which is a felony; or (ii) which is a misdemeanor directly related to the practice of the profession, 17 within the last 5 years; 18

19 (2) within the last 5 years the applicant has had a license or permit related to the practice of nursing 20 21 revoked, suspended, or placed on probation by another jurisdiction, if at least one of the grounds 22 for 23 revoking, suspending, or placing on probation is the same or substantially equivalent to grounds in Illinois; or 24

25 (3) it intends to deny licensure by endorsement. For purposes of this Section, an "unencumbered license" 26 means a license against which no disciplinary action has been 27 taken or is pending and for which all fees and charges are 28 paid and current. 29

30 The Department may revoke a temporary license issued (h) pursuant to this Section if: 31

(1) it determines that the applicant has been 32 convicted of a crime under the law of any jurisdiction of 33 the United States that is (i) a felony or (ii) a 34

1 misdemeanor directly related to the practice of the 2 profession, within the last 5 years;

3 (2) it determines that within the last 5 years the 4 applicant has had a license or permit related to the 5 practice of nursing revoked, suspended, or placed on 6 probation by another jurisdiction, if at least one of the 7 grounds for revoking, suspending, or placing on probation 8 is the same or substantially equivalent to grounds in 9 Illinois; or

10 (3) it determines that it intends to deny licensure11 by endorsement.

A temporary license shall expire 6 months from the date 12 Further renewal may be granted 13 of issuance. by the Department in hardship cases, as defined by rule and upon 14 approval of the Director. However, a temporary license shall 15 16 automatically expire upon issuance of the Illinois license or notification that the Department intends to deny 17 upon 18 licensure, whichever occurs first.

(i) Applicants have 3 years from the date of application to complete the application process. If the process has not been completed within 3 years from the date of application, the application shall be denied, the fee forfeited, and the applicant must reapply and meet the requirements in effect at the time of reapplication.

(j) A practical nurse licensed by a party state under 25 26 the Nurse Licensure Compact is granted the privilege to practice practical nursing in this State. A registered nurse 27 licensed by a party state under the Nurse Licensure Compact 28 29 is granted the privilege to practice registered nursing in 30 this State. A practical nurse or registered nurse who has been granted the privilege to practice nursing in this State 31 32 under this subsection, shall notify the Department, prior to commencing employment in this State as a practical or 33 registered nurse, of the identity and location of the nurse's 34

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1 prospective employer. A practical nurse or registered nurse who has been granted the privilege to practice nursing in 2 3 this State under this subsection is subject to the schedule 4 of fees authorized under Section 20-35 and the criminal 5 background check required under Section 5-23 of this Act, provided that the practical or registered nurse may exercise б 7 her privilege to practice pending completion of the criminal background check. 8 (Source: P.A. 92-39, eff. 6-29-01; 92-744, eff. 7-25-02.) 9 10 ARTICLE 99

Section 99-5. Effective date. This Act takes effect upon becoming law.