HLS 21RS-156 REENGROSSED

2021 Regular Session

HOUSE BILL NO. 495

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BY REPRESENTATIVES IVEY, WILFORD CARTER, COX, GREEN, JAMES, JEFFERSON, MIKE JOHNSON, TRAVIS JOHNSON, DUSTIN MILLER, PIERRE, ROMERO, SCHEXNAYDER, STAGNI, TURNER, AND WHITE AND SENATORS BARROW AND BOUDREAUX

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

NURSES: Allows full practice authority for advanced practice registered nurses

1 AN ACT

To amend and reenact R.S. 28:2(28), 51.1(A)(3)(a), (b), and (d), and 53(B)(1) and R.S. 37:913(3)(a)(vii) through (ix), (b), and (c), 930(E) and (F), and 933, to enact R.S. 36:259(B)(39) and R.S. 37:936 through 939 and 1020.51 and 1020.52, and to repeal R.S. 28:51.1(A)(3)(c) and R.S. 37:913(8) and (9), relative to advanced practice registered nursing; to repeal collaborative practice agreement requirements for advanced practice registered nurses; to authorize advanced practice registered nurses to prescribe, order, furnish, and otherwise provide medications, therapies, referrals, and other healthcare items and services; to provide relative to the authority of advanced practice registered nurses to distribute certain medications in public health clinics; to provide requirements for transition to independent practice for certain advanced practice registered nurses; to create the Independent Practice Advisory Panel within the Louisiana Department of Health and provide for the duties and functions of the panel; to authorize advanced practice registered nurses to furnish signatures and other types of endorsements required of physicians in certain instances; to provide relative to staff membership of psychiatric mental health nurse practitioners at behavioral health treatment facilities; to provide relative to admission of persons to treatment facilities by emergency certificate; to require that psychiatric

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

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1 mental health nurse practitioners who issue such certificates possess certain 2 qualifications; to provide for definitions; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 28:2(28), 51.1(A)(3)(a), (b), and (d), and 53(B)(1) are hereby amended and reenacted to read as follows:

§2. Definitions

Whenever used in this Title, the masculine shall include the feminine, the singular shall include the plural, and the following definitions shall apply:

9 * * *

(28) "Psychiatric mental health nurse practitioner" means an advanced practice registered nurse licensed to practice as a nurse practitioner or clinical nurse specialist by the Louisiana State Board of Nursing, in accordance with the provisions of R.S. 37:911 et seq., who focuses clinical practice on individuals, families, or populations across the life span at risk for developing or having a diagnosis of psychiatric disorders, mental health problems, or both. A psychiatric mental health nurse practitioner means a specialist who provides primary mental health care to patients seeking mental health services in a wide range of settings. Primary mental health care provided by a psychiatric mental health nurse practitioner involves the continuous and comprehensive services necessary for the promotion of optimal mental health, prevention and treatment of psychiatric disorders, and health maintenance. Such primary health care includes the assessment, diagnosis, and management of mental health problems and psychiatric disorders. A psychiatric mental health nurse practitioner means a provider of direct mental health care services who synthesizes theoretical, scientific, and clinical knowledge for the assessment and management of both health and illness states and who is licensed to practice as a nurse practitioner in Louisiana; in accordance with R.S. 37:911; et seq. For purposes of this Chapter, a psychiatric mental health nurse practitioner shall have at least two years training, primary experience, or both, in diagnosis and treatment of mental illness. For purposes of this Chapter, a psychiatric mental health nurse

1	practitioner shall also have authority from the Louisiana State Board of Nursing to
2	prescribe legend and certain controlled drugs, in accordance with the provisions of
3	R.S. 37:913(3)(b), (8), and (9).
4	* * *
5	§51.1. Treatment facility; staff membership and institutional privileges; certain
6	healthcare providers
7	A.
8	* * *
9	(3) Staff membership, specifically delineated institutional privileges, or both,
10	granted to a psychiatric mental health nurse practitioner shall be conditioned upon
11	all of the following requirements:
12	(a) The applicant psychiatric mental health nurse practitioner shall have $\frac{1}{2}$
13	valid, current, collaborative practice agreement, as defined in R.S. 37:913(9), with
14	a psychiatrist an active license issued by the Louisiana State Board of Nursing.
15	(b) The applicant psychiatric mental health nurse practitioner shall have a
16	valid, current and unrestricted advanced practice registered nurse license, as a nurse
17	practitioner or clinical nurse specialist, issued by the Louisiana State Board of
18	Nursing, and have has been granted limited prescriptive authority pursuant to LAC
19	46:XLV.4513 by the Louisiana State Board of Nursing.
20	(d) The applicant psychiatric mental health nurse practitioner shall prescribe
21	medications or and treatment regimens that may include the use of seclusion or
22	restraint on patients in the treatment facility only in accordance with the
23	collaborative practice agreement and in accordance with standards of practice and
24	scope of practice as determined by the Louisiana State Board of Nursing and with
25	the treatment facility's staff membership or privilege granting privilege-granting
26	process and restrictions, if any.
27	* * *
28	§53. Admission by emergency certificate; extension; payment for services rendered
29	* * *

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B.(1)(a) For the purposes of this Subsection, "examining clinician" means

Any any physician licensed or permitted by the Louisiana State Board of Medical

Examiners, physician assistant when acting in accordance with their respective his

clinical practice guidelines, psychiatric mental health nurse practitioner, other nurse

practitioner who acts in accordance with a collaborative practice agreement and

receives verbal approval for executing the an emergency certificate from his

collaborating a physician licensed or permitted by the Louisiana State Board of

Medical Examiners, or psychologist.

(b) An examining clinician may execute an emergency certificate only after an actual examination of a person alleged to have a mental illness or be suffering from a substance-related or addictive disorder who is determined to be in need of immediate care and treatment in a treatment facility because the examining physician, physician assistant when acting in accordance with their respective clinical practice guidelines, psychiatric mental health nurse practitioner, other nurse practitioner who acts in accordance with a collaborative practice agreement and receives verbal approval for executing the certificate from his collaborating physician, or psychologist an examining clinician determines the person to be dangerous to self or others or to be gravely disabled. The actual examination of the person by a psychiatrist, or psychiatric mental health nurse practitioner, or other nurse practitioner may be conducted by telemedicine utilizing video conferencing technology provided that a licensed healthcare professional who can adequately and accurately assist with obtaining any necessary information including but not limited to the information listed in Paragraph (4) of this Subsection shall be in the examination room with the patient at the time of the video conference. A patient examined in such a manner shall be medically cleared prior to admission to a mental health treatment facility. Failure to conduct an examination prior to the execution of the certificate will be evidence of gross negligence.

28 * * *

Section 2. R.S. 36:259(B)(39) is hereby enacted to read as follows:

1	§259. Transfer of agencies and functions to Louisiana Department of Health
2	* * *
3	B. The following agencies, as defined in R.S. 36:3, are placed within the
4	Louisiana Department of Health and shall perform and exercise their powers, duties,
5	functions, and responsibilities as otherwise provided by law:
6	* * *
7	(39) The Independent Practice Advisory Panel (R.S. 37:1020.51 et seq.).
8	* * *
9	Section 3. R.S. 37:913(3)(a)(vii) through (ix), (b), and (c), 930(E) and (F), and 933
0	are hereby amended and reenacted and R.S. 37:936 through 939 and 1020.51 and 1020.52
1	are hereby enacted to read as follows:
12	§913. Definitions
13	As used in this Part:
4	* * *
15	(3)(a) "Advanced practice registered nursing" means nursing by a certified
16	registered nurse anesthetist, certified nurse midwife, clinical nurse specialist, or
17	nurse practitioner which is based on knowledge and skills acquired in a basic nursing
18	education program, licensure as a registered nurse, and a minimum of a master's
19	degree with a concentration in the respective advanced practice nursing specialty
20	which includes both didactic and clinical components, advanced knowledge in
21	nursing theory, physical and psychosocial assessment, nursing interventions, and
22	management of health care. Advanced practice registered nursing includes:
23	* * *
24	(vii) Analyzing multiple sources of data and identifying and performing
25	certain acts of medical diagnosis in accordance with the collaborative practice
26	agreement.
27	(viii) Making decisions in solving patient care problems and selecting
28	treatment regimens in collaboration with a licensed physician, dentist, or other health
29	care provider as indicated.

1	(ix) Consulting with or referring patients to licensed physicians, dentists, and
2	other health care providers in accordance with a collaborative practice agreement.
3	(b) Advanced practice registered nursing may include certain acts of medical
4	diagnosis, in accordance with R.S. 37:913(8) and (9), or medical prescriptions of
5	therapeutic or corrective nature, prescribing assessment studies, legend and certain
6	controlled drugs, therapeutic regimens, medical devices and appliances, receiving
7	and distributing a therapeutic regimen of prepackaged drugs prepared and labeled by
8	a licensed pharmacist, and free samples supplied by a drug manufacturer, and
9	distributing drugs for administration to and use by other individuals within the scope
10	of practice as defined by the board and in accordance with this Paragraph and R.S.
11	<u>37:937</u> .
12	(c) Advanced practice registered nursing may include the provision of
13	medication-assisted treatment (MAT), as authorized by the United States Department
14	of Health and Human Services, Substance Abuse and Mental Health Services
15	Administration and in accordance with rules promulgated by the board. At a
16	minimum, rules promulgated by the board shall include a requirement that in order
17	for the APRN to provide MAT, his collaborating physician shall also be authorized
18	and in compliance with all federal and state laws and rules authorizing the provision
19	of MAT. For purposes of this Subparagraph, "MAT" means the use of medications
20	with counseling and behavioral therapies to treat substance use disorders and prevent
21	opioid overdose.
22	* * *
23	§930. Anesthetics; authority to administer; penalty
24	* * *
25	E. Nothing in this Section shall prohibit the administration of a digital block
26	or a pudendal block by an advanced practice registered nurse who has been trained
27	to administer such procedure in accordance with a collaborative practice agreement.
28	F. Notwithstanding any laws law to the contrary, a certified registered nurse
29	anesthetist shall not be required to have a collaborative practice agreement or

prescriptive authority to provide anesthesia care, including the administration of medications, anesthetics, and ancillary services necessary for the delivery of care within his scope of practice under the direction and supervision of a physician or dentist who is licensed to practice under the laws of the state of Louisiana this state.

§933. Distributing medications in public health clinics

Nothing in this Part shall prohibit a registered nurse who is properly licensed and recognized by the board as a nurse practitioner, nurse midwife, or clinical nurse specialist, and who is employed by a municipal, parochial, or state-operated or contracted public health clinic, from inserting into the subcutaneous space a medication implant or distributing a therapeutic regime of medication, to be consumed by a patient off premises, to treat sexually transmitted diseases; or to prevent pregnancy, provided such insertion or distribution is performed only under a protocol approved by a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners. The distribution of the medication shall be accomplished under procedures developed by the director of pharmacy of the office of public health and approved by the Louisiana Board of Pharmacy.

18 * * *

§936. Transition to practice requirements for certain advanced practice registered nurses

A.(1) Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall collaborate, as defined in R.S. 37:913(7), for at least six thousand hours, subject to the conditions of Paragraph (2) of this Subsection, with a licensed physician or be employed by a clinic that has a medical director who is a licensed physician. Additionally, any nurse practitioner, certified nurse midwife, or clinical nurse specialist who practices in any specialty and transitions to independent practice shall do so in collaboration with a physician who practices in that same specialty.

(2) Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall submit written evidence to the board upon completion of the clinical

1	experience required in Paragraph (1) of this Subsection. Hours of clinical experience
2	gained in another state may count toward the clinical experience requirement
3	provided in Paragraph (1) of this Subsection, subject to approval by the board.
4	(3)(a) Any nurse practitioner, certified nurse midwife, or clinical nurse
5	specialist who did not complete four thousand clinical hours as a registered nurse
6	prior to achieving advanced practice certification shall collaborate for an additional
7	four thousand hours beyond the minimum hour requirement provided in Paragraph
8	(1) of this Subsection.
9	(b) Any individual who is subject to the clinical hour requirement of this
10	Paragraph and does not have the requisite number of clinical hours shall obtain the
11	balance of the hours needed after his graduation, and such hours shall be gained in
12	collaboration with a licensed physician, in employment in a clinic that has a medical
13	director who is a licensed physician, or in a combination of these two authorized
14	methods.
15	(4) Notwithstanding Paragraphs (1) through (3) of this Subsection, a nurse
16	practitioner, certified nurse midwife, or clinical nurse specialist shall hold a current,
17	unencumbered license issued by the board.
18	(5) Any nurse practitioner, certified nurse midwife, or clinical nurse
19	specialist who is deemed by the board to have met the requirements of this
20	Subsection necessary for independent practice on and after the effective date of this
21	Section shall be eligible to transition to independent practice.
22	B. No nurse practitioner, certified nurse midwife, or clinical nurse specialist
23	who has completed the requirements of Subsection A of this Section and practices
24	independently in a specialty may practice independently in a different specialty
25	unless he completes all requirements of Subsection A of this Section again for that
26	different specialty.

1	§937. Advanced practice registered nurses; prescribing, ordering, and furnishing
2	authority
3	A. The board shall grant prescribing authority through the advanced practice
4	registered nurse license.
5	B. The prescribing authority granted in accordance with this Section shall
6	include the authority of the advanced practice registered nurse to do all of the
7	following:
8	(1) Diagnose, prescribe, and institute therapy or referrals of patients to
9	healthcare agencies or other healthcare providers and to community resources.
10	(2) Prescribe and administer pharmacological agents, including over-the-
11	counter medications, legend drugs, and controlled substances, within his scope of
12	practice.
13	(3) Plan and initiate a therapeutic regimen that includes ordering and
14	prescribing non-pharmacological interventions including but not limited to durable
15	medical equipment, medical devices, nutrition, blood and blood products, and
16	diagnostic and supportive services including but not limited to home health care,
17	hospice, and physical and occupational therapy.
18	§938. Advanced practice registered nurses; signature authority
19	If a provision of law or administrative rule requires a signature, certification,
20	stamp, verification, affidavit, or endorsement by a physician, the requirement may
21	be fulfilled by an advanced practice registered nurse practicing within his scope of
22	practice in accordance with the provisions of this Part.
23	§939. Collaborative practice agreements
24	A. The board shall not prohibit an advanced practice registered nurse from
25	practicing under a collaborative practice agreement.
26	B. For purposes of this Section, "collaborative practice agreement" means
27	a formal written statement addressing the parameters of collaboration, as defined in
28	R.S. 37:913(7), which are mutually agreed upon by an advanced practice registered

1	nurse and one or more licensed physicians which includes but shall not be limited to
2	the following provisions:
3	(1) Availability of the collaborating physician for consultation, referral, or
4	both.
5	(2) Methods of management of the collaborative practice which shall include
6	clinical practice guidelines.
7	(3) Coverage of the healthcare needs of a patient during any absence of the
8	advanced practice registered nurse or physician.
9	* * *
10	§1020.51. Independent Practice Advisory Panel
11	A. There is hereby created within the Louisiana Department of Health the
12	Independent Practice Advisory Panel, referred to hereafter in this Chapter as the
13	"advisory panel".
14	B. The advisory panel shall be composed of the following members:
15	(1) One physician appointed by the Louisiana State Medical Society.
16	(2) One physician appointed by the Louisiana Medical Association.
17	(3) One physician appointed by the Louisiana Academy of Family
18	Physicians.
19	(4) Two advanced practice registered nurses appointed by the Louisiana
20	Association of Nurse Practitioners.
21	(5) One advanced practice registered nurse appointed by the Louisiana
22	Council of Administrators of Nursing Education.
23	(6) The executive director of the Louisiana State Board of Nursing, who
24	shall be a nonvoting member.
25	(7) The executive director of the Louisiana State Board of Medical
26	Examiners, who shall be a nonvoting member.

1	C. At its initial meeting, the advisory panel shall elect from its membership
2	a chairman and such other officers as it deems necessary and shall establish rules of
3	procedure and policies for the administration of its affairs.
4	D. The advisory panel shall meet at least semiannually.
5	E. Four members, at least two of whom are physicians and two of whom are
6	advanced practice registered nurses, shall constitute a quorum of the advisory panel.
7	F. The advisory panel shall have the following duties and responsibilities:
8	(1) Ensure quality of care post discipline action.
9	(2) Make recommendations on education items to reduce recurring
10	violations.
11	(3) Review complaints and concerns regarding advanced practice registered
12	nurses who practice independently and regarding physicians who collaborate with
13	advanced practice registered nurses.
14	(4) Develop advisory or practice opinions of any items brought before the
15	panel.
16	(5) Make recommendations to the Louisiana State Board of Nursing and the
17	Louisiana State Board of Medical Examiners concerning administrative rules to be
18	jointly promulgated by both boards to govern independent practice by advanced
19	practice registered nurses.
20	§1020.52. Termination
21	The provisions of this Chapter shall terminate on August 1, 2025.
22	Section 4. R.S. 28:51.1(A)(3)(c) and R.S. 37:913(8) and (9) are hereby repealed in
23	their entirety.
24	Section 5.(A) The Louisiana State Law Institute is hereby directed to redesignate
25	R.S. 37:1021 through 1035 as Chapter 11-B of Title 37 of the Louisiana Revised Statutes
26	of 1950 and is further directed to retain the heading of the Chapter.
27	(B) The Louisiana State Law Institute is hereby directed to designate R.S.
28	37:1020.51 and 1020.52, as enacted by Section 3 of this Act, as Chapter 11-A of Title 37 of

- 1 the Louisiana Revised Statutes of 1950 and is further directed to apply to the Part the
- 2 heading "Advanced Practice Registered Nurses Independent Practice".

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 495 Reengrossed

2021 Regular Session

Ivey

Abstract: Allows full practice authority for advanced practice registered nurses through the repeal of collaborative practice agreement requirements and sets forth transition to practice requirements for certain advanced practice registered nurses to practice independently.

<u>Proposed law</u> repeals from <u>present law</u> relative to the practice of nursing the defined terms "collaborative practice" and "collaborative practice agreement" and their corresponding definitions. Additionally, repeals occurrences of these terms in <u>present law</u> relative to behavioral health.

<u>Present law</u> defines "advanced practice registered nursing", in part, to include the following:

- (1) Analyzing multiple sources of data and identifying and performing certain acts of medical diagnosis in accordance with the collaborative practice agreement.
- (2) Making decisions in solving patient care problems and selecting treatment regimens in collaboration with a licensed physician, dentist, or other healthcare provider as indicated.
- (3) Consulting with or referring patients to licensed physicians, dentists, and other healthcare providers in accordance with a collaborative practice agreement.

<u>Proposed law</u> deletes from the provisions of <u>present law</u> listed above all references to collaborative practice agreements and collaboration with a licensed physician, dentist, or other healthcare provider. Also deletes from <u>present law</u> references to nurses performing acts of medical diagnosis. Otherwise, retains <u>present law</u>.

<u>Proposed law</u> repeals from <u>present law</u> references to a collaborating physician in provisions relative to advanced practice registered nurses providing certain treatment for substance use disorders and in other laws pertaining to behavioral health.

<u>Proposed law</u> repeals from <u>present law</u> references to collaborative practice agreements in provisions relative to advanced practice registered nurses administering anesthetics.

<u>Proposed law</u> repeals from <u>present law</u> a requirement that advanced practice registered nurses employed by public health clinics perform the following procedures only under a protocol approved by a licensed physician:

- (1) Inserting into the subcutaneous space a medication implant to treat sexually transmitted diseases or to prevent pregnancy.
- (2) Distributing a therapeutic regimen of medication, to be consumed by a patient off premises, to treat sexually transmitted diseases or to prevent pregnancy.

Page 12 of 16

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

<u>Proposed law</u> requires the Louisiana State Board of Nursing (board) to grant prescribing authority through the advanced practice registered nurse license. Provides that such prescribing authority shall include the authority of the advanced practice registered nurse to do all of the following:

- (1) Diagnose, prescribe, and institute therapy or referrals of patients to healthcare agencies or other healthcare providers and to community resources.
- (2) Prescribe and administer pharmacological agents, including over-the-counter medications, legend drugs, and controlled substances, within his scope of practice.
- (3) Plan and initiate a therapeutic regimen that includes ordering and prescribing non-pharmacological interventions including but not limited to durable medical equipment, medical devices, nutrition, blood and blood products, and diagnostic and supportive services including but not limited to home health care, hospice, and physical and occupational therapy.

<u>Proposed law</u> provides that if a provision of <u>present law</u> or <u>present administrative rule</u> requires a signature, certification, stamp, verification, affidavit, or endorsement by a physician, the requirement may be fulfilled by an advanced practice registered nurse practicing within his scope of practice in accordance with the provisions of <u>present law</u> and proposed law.

<u>Proposed law</u> establishes the following transition to practice requirements for certain advanced practice registered nurses:

- (1) Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall collaborate for at least 6,000 hours with a licensed physician or be employed by a clinic that has a medical director who is a licensed physician.
- (2) Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who practices in any specialty and transitions to independent practice shall do so in collaboration with a physician who practices in that same specialty.
- (3) Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall submit written evidence to the board upon completion of the clinical experience required by proposed law.
- (4) Hours of clinical experience gained in another state may count toward the clinical experience requirement provided in <u>proposed law</u>, subject to approval by the board.
- (5) Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who did not complete 4,000 clinical hours as a registered nurse prior to achieving advanced practice certification shall collaborate for an additional 4,000 hours beyond the minimum 6,000-hour requirement provided in proposed law.
- (6) A nurse practitioner, certified nurse midwife, or clinical nurse specialist shall hold a current, unencumbered license issued by the board.
- (7) Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who is deemed by the board to have met the requirements of <u>proposed law</u> necessary for independent practice on and after the effective date of <u>proposed law</u> shall be eligible to transition to independent practice.

<u>Proposed law</u> provides that no nurse practitioner, certified nurse midwife, or clinical nurse specialist who has completed the requirements of <u>proposed law</u> and practices independently in a specialty may practice independently in a different specialty unless he completes all requirements of proposed law again for that different specialty.

<u>Proposed law</u> stipulates that the board shall not prohibit an advanced practice registered nurse from practicing under a collaborative practice agreement. Provides that for purposes of <u>proposed law</u>, "collaborative practice agreement" means a formal written statement addressing the parameters of collaboration, as defined in <u>present law</u>, which are mutually agreed upon by an advanced practice registered nurse and one or more licensed physicians which includes but shall not be limited to the following provisions:

- (1) Availability of the collaborating physician for consultation, referral, or both.
- (2) Methods of management of the collaborative practice which shall include clinical practice guidelines.
- (3) Coverage of the healthcare needs of a patient during any absence of the advanced practice registered nurse or physician.

<u>Proposed law</u> creates within the Louisiana Department of Health the Independent Practice Advisory Panel (advisory panel). Provides that the advisory panel shall be composed of the following members:

- (1) One physician appointed by the Louisiana State Medical Society.
- (2) One physician appointed by the Louisiana Medical Association.
- (3) One physician appointed by the Louisiana Academy of Family Physicians.
- (4) Two advanced practice registered nurses appointed by the Louisiana Association of Nurse Practitioners.
- (5) One advanced practice registered nurse appointed by the Louisiana Council of Administrators of Nursing Education.
- (6) The executive director of the Louisiana State Board of Nursing, who shall be a nonvoting member.
- (7) The executive director of the Louisiana State Board of Medical Examiners, who shall be a nonvoting member.

<u>Proposed law</u> provides that the advisory panel shall have the following duties and responsibilities:

- (1) Ensure quality of care post discipline action.
- (2) Make recommendations on education items to reduce recurring violations.
- (3) Review complaints and concerns regarding advanced practice registered nurses who practice independently and regarding physicians who collaborate with advanced practice registered nurses.
- (4) Develop advisory or practice opinions of any items brought before the panel.
- (5) Make recommendations to the La. State Board of Nursing and the La. State Board of Medical Examiners concerning administrative rules to be jointly promulgated by both boards to govern independent practice by advanced practice registered nurses.

Proposed law creating and providing for the advisory panel terminates on Aug. 1, 2025.

(Amends R.S. 28:2(28), 51.1(A)(3)(a), (b), and (d), and 53(B)(1) and R.S. 37:913(3)(a)(vii)-(ix), (b), and (c), 930(E) and (F), and 933; Adds R.S. 36:259(B)(39) and R.S. 37:936-939, 1020.51, and 1020.52; Repeals R.S. 28:51.1(A)(3)(c) and R.S. 37:913(8) and (9))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Health and Welfare</u> to the <u>original</u> bill:

- 1. Delete <u>proposed law</u> which would have revised <u>present law</u> to authorize certified registered nurse anesthetists to provide anesthesia care within their scope of practice under the direction and supervision of a physician or dentist who is licensed to practice under the laws of this state.
- 2. Revise <u>present law</u> to provide that certified registered nurse anesthetists shall not be required to have prescriptive authority to provide anesthesia care within their scope of practice under the direction and supervision of a physician or dentist who is licensed to practice under the laws of this state.

The House Floor Amendments to the engrossed bill:

- 1. Restore to <u>present law</u> the defined term "collaboration" and its corresponding definition which <u>proposed law</u> formerly repealed.
- 2. Establish the following transition to practice requirements for certain advanced practice registered nurses:
 - a. Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall collaborate for at least 6,000 hours with a licensed physician or be employed by a clinic that has a medical director who is a licensed physician.
 - b. Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who practices in any specialty and transitions to independent practice shall do so in collaboration with a physician who practices in that same specialty.
 - c. Each nurse practitioner, certified nurse midwife, and clinical nurse specialist shall submit written evidence to the board upon completion of the clinical experience required by <u>proposed law</u>.
 - d. Hours of clinical experience gained in another state may count toward the clinical experience requirement provided in <u>proposed law</u>, subject to approval by the board.
 - e. Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who did not complete 4,000 clinical hours as a registered nurse prior to achieving advanced practice certification shall collaborate for an additional 4,000 hours beyond the minimum 6,000-hour requirement provided in proposed law.
 - f. A nurse practitioner, certified nurse midwife, or clinical nurse specialist shall hold a current, unencumbered license issued by the La. State Board of Nursing (board).
 - g. Any nurse practitioner, certified nurse midwife, or clinical nurse specialist who is deemed by the board to have met the requirements of

proposed law necessary for independent practice on and after the effective date of proposed law shall be eligible to transition to independent practice.

- 3. Provide that no nurse practitioner, certified nurse midwife, or clinical nurse specialist who has completed the requirements of <u>proposed law</u> and practices independently in a specialty may practice independently in a different specialty unless he completes all requirements of <u>proposed law</u> again for that different specialty.
- 4. Stipulate that the board shall not prohibit an advanced practice registered nurse from practicing under a collaborative practice agreement. Provide that for purposes of proposed law, "collaborative practice agreement" means a formal written statement addressing the parameters of collaboration, as defined in present law, which are mutually agreed upon by an advanced practice registered nurse and one or more licensed physicians which includes but shall not be limited to the following provisions:
 - a. Availability of the collaborating physician for consultation, referral, or both
 - b. Methods of management of the collaborative practice which shall include clinical practice guidelines.
 - c. Coverage of the healthcare needs of a patient during any absence of the advanced practice registered nurse or physician.
- 5. Creates within the La. Department of Health the Independent Practice Advisory Panel (advisory panel) and provides for the membership of the advisory panel to include three physicians, three advanced practice registered nurses, the executive director of the La. State Board of Nursing, who shall be a nonvoting member, and the executive director of the La. State Board of Medical Examiners, who shall be a nonvoting member.
- 6. Provide that the advisory panel shall have the following duties and responsibilities:
 - a. Ensure quality of care post discipline action.
 - b. Make recommendations on education items to reduce recurring violations.
 - c. Review complaints and concerns regarding advanced practice registered nurses who practice independently and regarding physicians who collaborate with advanced practice registered nurses.
 - d. Develop advisory or practice opinions of any items brought before the panel.
 - e. Make recommendations to the La. State Board of Nursing and the La. State Board of Medical Examiners concerning administrative rules to be jointly promulgated by both boards to govern independent practice by advanced practice registered nurses.
- 7. Terminate <u>proposed law</u> creating and providing for the advisory panel on Aug. 1, 2025.
- 8. Make technical changes.

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.