DIGEST

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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.

<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 <u>proposed law</u>.

<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 <u>proposed law</u> 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 <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.
- 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 proposed law creating and providing for the advisory panel on Aug. 1, 2025.
- 8. Make technical changes.