

GREEN SHEET REDIGEST

HB 495

2021 Regular Session

Ivey

**NURSES: Allows full practice authority for advanced practice registered nurses**

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DIGEST

Proposed law repeals from present law relative to the practice of nursing the term "collaborative practice agreement".

Proposed law redefines "advanced practice registered nurse", "advanced practice registered nursing", "collaboration", and "collaborative practice" and adds definitions for "collaborative practice protocols" and "mentorship agreement".

Proposed law provides that the La. State Board of Nursing (LSBN) may conduct unannounced inspections of current licensees at sufficient intervals to determine compliance with state and federal requirements or as considered necessary. Proposed law provides that the inspection may include random audits of the licensee's records, including but not limited to the advanced practice registered nurse's collaborative practice protocols.

Present law provides for the licensure qualifications of registered nurses and advanced practice registered nurses. Proposed law relocates the provisions relative to advanced practice registered nurses to a newly created section of law.

Proposed law provides that an advanced practice registered nurse (APRN) who has not completed a minimum of 4,000 hours of patient contact experience as an APRN shall receive a license with a transitional status endorsement to practice pursuant to a mentorship agreement and requires the APRN to submit all of the following to the LSBN:

- (1) Proof that the APRN has entered into a mentorship agreement with a health care provider as specified by the rules and regulations of the LSBN.
- (2) An attestation that the APRN will practice in accordance with the standards of practice and scope of practice established by the LSBN and the appropriate national professional nursing organization from which he has received certification.
- (3) An attestation that the APRN has collaborative practice protocols for consultation, collaboration, and referral when appropriate.
- (4) Proof that the APRN maintains or is otherwise covered by medical malpractice liability coverage in an amount to be determined by the board, but not less than \$500,000 per claim with an aggregate liability for all claims during the year of \$1,500,000, or proof of participation in the Patient's Compensation Fund.
- (5) Any other requirements as promulgated by the LSBN.

Proposed law provides that an APRN who has completed a minimum of 4,000 hours of patient contact experience as an APRN shall apply for an initial or renewal license by submitting all of the following to the LSBN:

- (1) Proof that the APRN has completed a minimum of 4,000 hours of patient contact experience as an APRN on a form required by the board's rules and regulations.
- (2) An attestation that the APRN will practice in accordance with the standards of practice and scope of practice established by the LSBN and the appropriate national professional nursing organization from which he has received certification.
- (3) An attestation that the APRN has collaborative practice protocols for consultation, collaboration, and referral when appropriate.

- (4) Proof that the APRN maintains or is otherwise covered by medical malpractice liability coverage in an amount to be determined by the board, but not less than \$500,000 per claim with an aggregate liability for all claims during the year of \$1,500,000, or proof of participation in the Patient's Compensation Fund.
- (5) Any other requirements as promulgated by the LSBN.

Proposed law provides that an APRN shall diagnosis and prescribe only in accordance with the standards of practice and scope of practice established by the LSBN and the appropriate national professional nursing organization from which he has received certification.

Proposed law provides that the LSBN may establish, by rule, a patient contact experience requirement greater than the minimum 4,000 hours when considered necessary.

Proposed law provides that the LSBN may promulgate all rules and regulations necessary to implement proposed law.

Proposed law provides for an advanced practice registered nursing advisory subcommittee composed of three members of the La. State Board of Nursing, appointed by the board's president, and three members of the La. State Board of Medical Examiners, appointed by the board's president.

Proposed law provides for the advisory subcommittee to meet at least once annually and to alternate hosting sites between the two licensing boards with the president of the board hosting the subcommittee designating a member to act as chairman.

Proposed law provides that the purpose of the advisory subcommittee shall be solely to conduct a joint regulatory body review of the state laws relative to advanced practice registered nursing and to facilitate a discussion on proposed revisions to the law.

Proposed law provides that no later than 30 days after a meeting, the chairman of the advisory subcommittee shall submit a written report of recommendations to the La. State Board of Nursing, the La. State Board of Medical Examiners, and the House and Senate committees on health and welfare.

Effective on January 1, 2022.

(Amends R.S. 28:2(28), 51.1(A)(3), and 53(B)(1), R.S. 37:913(1)(intro. para.), (3), (7), (8), and (9), 921(A), (B), and (E)(1), 925(C), and 930(E) and (F) and R.S. 40:2109.3(A)(2); adds R.S. 37:913(17), 918(22), 936, 937, and 938)

#### Summary of Amendments Adopted by House

##### The Committee Amendments Proposed by House Committee on Health and Welfare to the original bill:

1. Delete proposed law which would have revised present law 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 present law 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 present law the defined term "collaboration" and its corresponding definition which proposed law 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 proposed law.
  - d. Hours of clinical experience gained in another state may count toward the clinical experience requirement provided in proposed law, 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 proposed law 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.
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. Create 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.

#### Summary of Amendments Adopted by Senate

##### Committee Amendments Proposed by Senate Committee on Health and Welfare to the reengrossed bill

1. Deletes references to collaborative practice agreements in present law.
2. Redefines advanced practice registered nurse, advanced practice registered nursing, collaboration, and collaborative practice and defines collaborative practice protocols and mentorship agreement.
3. Allows the LSBN to conduct unannounced inspections and random audits.
4. Relocates present law provisions relative to the licensure qualifications of an APRN.
5. Allows the LSBN to require an APRN to practice pursuant to a mentorship agreement after violating a provision of present law.
6. Provides for the designation of transitional status and practice pursuant to a mentorship agreement for an APRN with less than 4,000 hours of experience.
7. Provides for provisional prescriptive authority for an APRN with transitional status.
8. Provides for licensing requirements for an APRN with at least 4,000 hours of experience.
9. Creates an advanced practice registered nursing advisory subcommittee.

10. Provides for an effective date.
11. Makes technical changes.