LEGISLATIVE BILL 107

Approved by the Governor March 05, 2015

Introduced by Crawford, 45; Campbell, 25; Cook, 13; Groene, 42; Howard, 9; Kolterman, 24; Krist, 10; Kuehn, 38; Riepe, 12; Watermeier, 1; Pansing Brooks, 28.

A BILL FOR AN ACT relating to nurses; to amend sections 38-206, 38-2302, 38-2310, 38-2322, and 38-2323, Reissue Revised Statutes of Nebraska, and sections 38-2301 and 38-2315, Revised Statutes Cumulative Supplement, 2014; to eliminate requirements for integrated practice agreements for nurse practitioners; to provide for transition-to-practice agreements; to change provisions relating to credentialing and regulation; to harmonize provisions; and to repeal the original sections. Be it enacted by the people of the State of Nebraska,

Section 1. Section 38-206, Reissue Revised Statutes of Nebraska, is amended to read:

38-206 The board shall:

(1) Establish standards for integrated practice agreements between collaborating physicians and certified nurse midwives, and nurse practitioners;

(2) Monitor the scope of practice by certified nurse midwives, certified stered nurse anesthetists, clinical nurse specialists, and nurse registered nurse anesthetists, practitioners;

(3) Recommend disciplinary action relating to licenses of advanced practice registered nurses, certified nurse midwives, certified registered nurse anesthetists, clinical nurse specialists, and nurse practitioners;
 (4) Engage in other activities not inconsistent with the Advanced Practice

Registered Nurse Practice Act, the Certified Nurse Midwifery Practice Act, the Certified Registered Nurse Anesthetist Practice Act, the Clinical Nurse Specialist Practice Act, and the Nurse Practitioner Practice Act; and

(5) Adopt rules and regulations to implement the Advanced Practice (5) Adopt rules and regulations to implement the Advanced Practice Registered Nurse Practice Act, the Certified Nurse Midwifery Practice Act, the Certified Registered Nurse Anesthetist Practice Act, the Clinical Nurse Specialist Practice Act, and the Nurse Practitioner Practice Act, for promulgation by the department as provided in section 38-126. Such rules and regulations shall also include: (a) Approved certification organizations and approved certification programs; and (b) professional liability insurance.

Sec. 2. Section 38-2301, Revised Statutes Cumulative Supplement, 2014, is amended to read:

38-2301 Sections 38-2301 to 38-2324 <u>and section 4 of this act</u>shall be known and may be cited as the Nurse Practitioner Practice Act. Sec. 3. Section 38-2302, Reissue Revised Statutes of Nebraska, is amended

to read:

38-2302 For purposes of the Nurse Practitioner Practice Act and elsewhere in the Uniform Credentialing Act, unless the context otherwise requires, the definitions found in sections 38-2303 to 38-2314 <u>and section 4 of this act</u> apply.

Sec. 4. Section 38-2310, Reissue Revised Statutes of Nebraska, is amended to read:

38-2310 Transition-to-practice agreement means a collaborative agreement between a nurse practitioner and a supervising provider which provides for the delivery of health care through a collaborative practice and which meets requirements of section 38-2322.

(1) Integrated practice agreement means a written agreement between a nurse practitioner and a collaborating physician in which the nurse practitioner and the collaborating physician provide for the delivery of health care through an integrated practice. The integrated practice agreement shall provide that the nurse practitioner and the collaborating physician will practice collaboratively within the framework of their respective scopes of practice. Each provider shall be responsible for his or her individual decisions in managing the health care of patients. Integrated practice includes consultation, collaboration, and referral. (2) The nurse practitioner and the collaborating physician shall have

joint responsibility for patient care, based upon the scope of practice of each practitioner. The collaborating physician shall be responsible for supervision of the nurse practitioner to ensure the quality of health care provided to patients.

(3) For purposes of this section:

(a) Collaborating physician means a physician or osteopathic physician licensed in Nebraska and practicing in the same geographic area and practice specialty, related specialty, or field of practice as the nurse practitioner; and

(b) Supervision means the ready availability of the collaborating physician for consultation and direction of the activities of the nurse practitioner within the nurse practitioner's defined scope of practice.

Sec. 5. Section 38-2315, Revised Statutes Cumulative Supplement, 2014, is amended to read:

38-2315 (1) A nurse practitioner may provide health care services within specialty areas. A nurse practitioner shall function by establishing collaborative, consultative, and referral networks as appropriate with other health care professionals. Patients who require care beyond the scope of practice of a nurse practitioner shall be referred to an appropriate health care provider.

(2) Nurse practitioner practice means health promotion, health supervision, illness prevention and diagnosis, treatment, and management of common health problems and acute and chronic conditions, including:

 (a) Assessing patients, ordering diagnostic tests and therapeutic treatments, synthesizing and analyzing data, and applying advanced nursing

principles;

(b) Dispensing, incident to practice only, sample medications which are provided by the manufacturer and are provided at no charge to the patient; and

(c) Prescribing therapeutic measures and medications relating to health conditions within the scope of practice. Any limitation on the prescribing authority of the nurse practitioner for controlled substances listed in Schedule II of section 28-405 shall be recorded in the integrated practice agreement established pursuant to section 38-2310.

(3) A nurse practitioner who has proof of a current certification from an approved certification program in a psychiatric or mental health specialty may manage the care of patients committed under the Nebraska Mental Health Commitment Act. Patients who require care beyond the scope of practice of a nurse practitioner who has proof of a current certification from an approved certification program in a psychiatric or mental health specialty shall be referred to an appropriate health care provider.

(4) A nurse practitioner may pronounce death and may complete and sign death certificates and any other forms if such acts are within the scope of practice of the nurse practitioner and are not otherwise prohibited by law. Sec. 6. Section 38-2322, Reissue Revised Statutes of Nebraska, is amended

to read:

38-2322 (1) <u>In order to be licensed</u> Prior to commencing practice as a nurse practitioner, an individual (a) who has a master's degree or doctorate degree in nursing and has completed an approved nurse practitioner program and $\frac{1}{7}$ (b) who can demonstrate separate course work in pharmacotherapeutics, advanced health assessment, and pathophysiology or psychopathology, and (c) who has completed a minimum of two thousand hours of practice under the supervision of a physician, shall submit to the department an integrated practice agreement with a collaborating physician and shall furnish proof of professional liability insurance required under section 38-2320.

(2) In order to practice as a nurse practitioner in this state, an individual who holds or has held a license as a nurse practitioner in this state or in another state shall submit to the department a transition-to-practice agreement or evidence of completion of two thousand hours of practice as a nurse practitioner which have been completed under a transition-topractice agreement, under a collaborative agreement, under an integrated practice agreement, through independent practice, or under any combination of such agreements and practice, as allowed in this state or another state.

(3)(a) A transition-to-practice agreement shall be a formal written agreement that provides that the nurse practitioner and the supervising provider practice collaboratively within the framework of their respective scopes of practice.

(b) The nurse practitioner and the supervising provider shall each be responsible for his or her individual decisions in managing the health care of patients through consultation, collaboration, and referral. The nurse practitioner and the supervising provider shall have joint responsibility for the delivery of health care to a patient based upon the scope of practice of

the nurse practitioner and the supervising provider. (c) The supervising provider shall be responsible for supervision of the nurse practitioner to ensure the quality of health care provided to patients.

(d) In order for a nurse practitioner to be a supervising provider for purposes of a transition-to-practice agreement, the nurse practitioner shall submit to the department evidence of completion of ten thousand hours of practice as a nurse practitioner which have been completed under a transitionto-practice agreement, under a collaborative agreement, under an integrated practice agreement, through independent practice, or under any combination of such agreements or practice, as allowed in this state or another state.

(4) For purposes of this section:

(a) Supervising provider means a physician, osteopathic physician, or nurse practitioner licensed and practicing in Nebraska and practicing in the same practice specialty, related specialty, or field of practice as the nurse practitioner being supervised; and

(b) Supervision means the ready availability of the supervising provider for consultation and direction of the activities of the nurse practitioner being supervised within such nurse practitioner's defined scope of practice.

of (2) A nurse practitioner who needs to obtain the two thousand hours supervised practice required under subdivision (1)(c) of this section shall (a) submit to the department one or more integrated practice agreements with a collaborating physician, (b) furnish proof of jointly approved protocols with a collaborating physician which shall guide the nurse practitioner's practice, and (c) furnish proof of professional liability insurance required under section 28-2220 section 38-2320.

(3) If, after a diligent effort to obtain an integrated practice

agreement, a nurse practitioner is unable to obtain an integrated practice agreement with one physician, the board may waive the requirement of an integrated practice agreement upon a showing that the applicant (a) meets the requirements of subsection (1) of this section, (b) has made a diligent effort to obtain an integrated practice agreement, and (c) will practice in a geographic area where there is a shortage of health care services.

Sec. 7. Section 38-2323, Reissue Revised Statutes of Nebraska, is amended to read:

38-2323 Nothing in the Nurse Practitioner Practice Act shall prohibit a nurse practitioner from consulting or collaborating with and referring patients to health care providers not included in the nurse practitioner's <u>transition-to-practice</u> integrated practice agreement.

Sec. 8. Original sections 38-206, 38-2302, 38-2310, 38-2322, and 38-2323, Reissue Revised Statutes of Nebraska, and sections 38-2301 and 38-2315, Revised Statutes Cumulative Supplement, 2014, are repealed.