



100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

HB5495

by Rep. Patricia R. Bellock

SYNOPSIS AS INTRODUCED:

225 ILCS 65/65-45
225 ILCS 95/7.7

was 225 ILCS 65/15-25

Amends the Nurse Practice Act and the Physician Assistant Practice Act of 1987. Provides that the Secretary of Financial and Professional Regulation shall by rule provide for advanced practice registered nurses and physician assistants to admit patients to rural hospitals where they have privileges.

LRB100 19650 XWW 34923 b

1 AN ACT concerning regulation.

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

4 Section 5. The Nurse Practice Act is amended by changing
5 Section 65-45 as follows:

6 (225 ILCS 65/65-45) (was 225 ILCS 65/15-25)

7 (Section scheduled to be repealed on January 1, 2028)

8 Sec. 65-45. Advanced practice registered nursing in
9 hospitals, hospital affiliates, or ambulatory surgical
10 treatment centers.

11 (a) An advanced practice registered nurse may provide
12 services in a hospital or a hospital affiliate as those terms
13 are defined in the Hospital Licensing Act or the University of
14 Illinois Hospital Act or a licensed ambulatory surgical
15 treatment center without a written collaborative agreement
16 pursuant to Section 65-35 of this Act. An advanced practice
17 registered nurse must possess clinical privileges recommended
18 by the hospital medical staff and granted by the hospital or
19 the consulting medical staff committee and ambulatory surgical
20 treatment center in order to provide services. The medical
21 staff or consulting medical staff committee shall periodically
22 review the services of all advanced practice registered nurses
23 granted clinical privileges, including any care provided in a

1 hospital affiliate. Authority may also be granted when
2 recommended by the hospital medical staff and granted by the
3 hospital or recommended by the consulting medical staff
4 committee and ambulatory surgical treatment center to
5 individual advanced practice registered nurses to select,
6 order, and administer medications, including controlled
7 substances, to provide delineated care. In a hospital, hospital
8 affiliate, or ambulatory surgical treatment center, the
9 attending physician shall determine an advanced practice
10 registered nurse's role in providing care for his or her
11 patients, except as otherwise provided in the medical staff
12 bylaws or consulting committee policies.

13 (a-2) An advanced practice registered nurse privileged to
14 order medications, including controlled substances, may
15 complete discharge prescriptions provided the prescription is
16 in the name of the advanced practice registered nurse and the
17 attending or discharging physician.

18 (a-3) Advanced practice registered nurses practicing in a
19 hospital or an ambulatory surgical treatment center are not
20 required to obtain a mid-level controlled substance license to
21 order controlled substances under Section 303.05 of the
22 Illinois Controlled Substances Act.

23 (a-4) An advanced practice registered nurse meeting the
24 requirements of Section 65-43 may be privileged to complete
25 discharge orders and prescriptions under the advanced practice
26 registered nurse's name.

1 (a-5) For anesthesia services provided by a certified
2 registered nurse anesthetist, an anesthesiologist, physician,
3 dentist, or podiatric physician shall participate through
4 discussion of and agreement with the anesthesia plan and shall
5 remain physically present and be available on the premises
6 during the delivery of anesthesia services for diagnosis,
7 consultation, and treatment of emergency medical conditions,
8 unless hospital policy adopted pursuant to clause (B) of
9 subdivision (3) of Section 10.7 of the Hospital Licensing Act
10 or ambulatory surgical treatment center policy adopted
11 pursuant to clause (B) of subdivision (3) of Section 6.5 of the
12 Ambulatory Surgical Treatment Center Act provides otherwise. A
13 certified registered nurse anesthetist may select, order, and
14 administer medication for anesthesia services under the
15 anesthesia plan agreed to by the anesthesiologist or the
16 physician, in accordance with hospital alternative policy or
17 the medical staff consulting committee policies of a licensed
18 ambulatory surgical treatment center.

19 (b) An advanced practice registered nurse who provides
20 services in a hospital shall do so in accordance with Section
21 10.7 of the Hospital Licensing Act and, in an ambulatory
22 surgical treatment center, in accordance with Section 6.5 of
23 the Ambulatory Surgical Treatment Center Act. Nothing in this
24 Act shall be construed to require an advanced practice
25 registered nurse to have a collaborative agreement to practice
26 in a hospital, hospital affiliate, or ambulatory surgical

1 treatment center.

2 (c) Advanced practice registered nurses certified as nurse
3 practitioners, nurse midwives, or clinical nurse specialists
4 practicing in a hospital affiliate may be, but are not required
5 to be, privileged to prescribe Schedule II through V controlled
6 substances when such authority is recommended by the
7 appropriate physician committee of the hospital affiliate and
8 granted by the hospital affiliate. This authority may, but is
9 not required to, include prescription of, selection of, orders
10 for, administration of, storage of, acceptance of samples of,
11 and dispensing over-the-counter medications, legend drugs,
12 medical gases, and controlled substances categorized as
13 Schedule II through V controlled substances, as defined in
14 Article II of the Illinois Controlled Substances Act, and other
15 preparations, including, but not limited to, botanical and
16 herbal remedies.

17 To prescribe controlled substances under this subsection
18 (c), an advanced practice registered nurse certified as a nurse
19 practitioner, nurse midwife, or clinical nurse specialist must
20 obtain a controlled substance license. Medication orders shall
21 be reviewed periodically by the appropriate hospital affiliate
22 physicians committee or its physician designee.

23 The hospital affiliate shall file with the Department
24 notice of a grant of prescriptive authority consistent with
25 this subsection (c) and termination of such a grant of
26 authority, in accordance with rules of the Department. Upon

1 receipt of this notice of grant of authority to prescribe any
2 Schedule II through V controlled substances, the licensed
3 advanced practice registered nurse certified as a nurse
4 practitioner, nurse midwife, or clinical nurse specialist may
5 register for a mid-level practitioner controlled substance
6 license under Section 303.05 of the Illinois Controlled
7 Substances Act.

8 In addition, a hospital affiliate may, but is not required
9 to, privilege an advanced practice registered nurse certified
10 as a nurse practitioner, nurse midwife, or clinical nurse
11 specialist to prescribe any Schedule II controlled substances,
12 if all of the following conditions apply:

13 (1) specific Schedule II controlled substances by oral
14 dosage or topical or transdermal application may be
15 designated, provided that the designated Schedule II
16 controlled substances are routinely prescribed by advanced
17 practice registered nurses in their area of certification;
18 the privileging documents must identify the specific
19 Schedule II controlled substances by either brand name or
20 generic name; privileges to prescribe or dispense Schedule
21 II controlled substances to be delivered by injection or
22 other route of administration may not be granted;

23 (2) any privileges must be controlled substances
24 limited to the practice of the advanced practice registered
25 nurse;

26 (3) any prescription must be limited to no more than a

1 30-day supply;

2 (4) the advanced practice registered nurse must
3 discuss the condition of any patients for whom a controlled
4 substance is prescribed monthly with the appropriate
5 physician committee of the hospital affiliate or its
6 physician designee; and

7 (5) the advanced practice registered nurse must meet
8 the education requirements of Section 303.05 of the
9 Illinois Controlled Substances Act.

10 (d) An advanced practice registered nurse meeting the
11 requirements of Section 65-43 may be privileged to prescribe
12 controlled substances categorized as Schedule II through V in
13 accordance with Section 65-43.

14 (e) In order to increase access to care in rural hospitals,
15 the Secretary shall by rule provide for advanced practice
16 registered nurses to admit patients to rural hospitals where
17 they have privileges. For the purpose of this subsection,
18 "rural hospitals" has the meaning provided in Section 8 of the
19 Hospital Licensing Act.

20 (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18.)

21 Section 10. The Physician Assistant Practice Act of 1987 is
22 amended by changing Section 7.7 as follows:

23 (225 ILCS 95/7.7)

24 (Section scheduled to be repealed on January 1, 2028)

1 Sec. 7.7. Physician assistants in hospitals, hospital
2 affiliates, or ambulatory surgical treatment centers.

3 (a) A physician assistant may provide services in a
4 hospital as defined in the Hospital Licensing Act, a hospital
5 affiliate as defined in the University of Illinois Hospital
6 Act, or a licensed ambulatory surgical treatment center as
7 defined in the Ambulatory Surgical Treatment Center Act without
8 a written collaborative agreement pursuant to Section 7.5 of
9 this Act. A physician assistant must possess clinical
10 privileges recommended by the hospital medical staff and
11 granted by the hospital or the consulting medical staff
12 committee and ambulatory surgical treatment center in order to
13 provide services. The medical staff or consulting medical staff
14 committee shall periodically review the services of physician
15 assistants granted clinical privileges, including any care
16 provided in a hospital affiliate. Authority may also be granted
17 when recommended by the hospital medical staff and granted by
18 the hospital or recommended by the consulting medical staff
19 committee and ambulatory surgical treatment center to
20 individual physician assistants to select, order, and
21 administer medications, including controlled substances, to
22 provide delineated care. In a hospital, hospital affiliate, or
23 ambulatory surgical treatment center, the attending physician
24 shall determine a physician assistant's role in providing care
25 for his or her patients, except as otherwise provided in the
26 medical staff bylaws or consulting committee policies.

1 (a-5) Physician assistants practicing in a hospital
2 affiliate may be, but are not required to be, granted authority
3 to prescribe Schedule II through V controlled substances when
4 such authority is recommended by the appropriate physician
5 committee of the hospital affiliate and granted by the hospital
6 affiliate. This authority may, but is not required to, include
7 prescription of, selection of, orders for, administration of,
8 storage of, acceptance of samples of, and dispensing
9 over-the-counter medications, legend drugs, medical gases, and
10 controlled substances categorized as Schedule II through V
11 controlled substances, as defined in Article II of the Illinois
12 Controlled Substances Act, and other preparations, including,
13 but not limited to, botanical and herbal remedies.

14 To prescribe controlled substances under this subsection
15 (a-5), a physician assistant must obtain a mid-level
16 practitioner controlled substance license. Medication orders
17 shall be reviewed periodically by the appropriate hospital
18 affiliate physicians committee or its physician designee.

19 The hospital affiliate shall file with the Department
20 notice of a grant of prescriptive authority consistent with
21 this subsection (a-5) and termination of such a grant of
22 authority in accordance with rules of the Department. Upon
23 receipt of this notice of grant of authority to prescribe any
24 Schedule II through V controlled substances, the licensed
25 physician assistant may register for a mid-level practitioner
26 controlled substance license under Section 303.05 of the

1 Illinois Controlled Substances Act.

2 In addition, a hospital affiliate may, but is not required
3 to, grant authority to a physician assistant to prescribe any
4 Schedule II controlled substances if all of the following
5 conditions apply:

6 (1) specific Schedule II controlled substances by oral
7 dosage or topical or transdermal application may be
8 designated, provided that the designated Schedule II
9 controlled substances are routinely prescribed by
10 physician assistants in their area of certification; this
11 grant of authority must identify the specific Schedule II
12 controlled substances by either brand name or generic name;
13 authority to prescribe or dispense Schedule II controlled
14 substances to be delivered by injection or other route of
15 administration may not be granted;

16 (2) any grant of authority must be controlled
17 substances limited to the practice of the physician
18 assistant;

19 (3) any prescription must be limited to no more than a
20 30-day supply;

21 (4) the physician assistant must discuss the condition
22 of any patients for whom a controlled substance is
23 prescribed monthly with the appropriate physician
24 committee of the hospital affiliate or its physician
25 designee; and

26 (5) the physician assistant must meet the education

1 requirements of Section 303.05 of the Illinois Controlled
2 Substances Act.

3 (b) A physician assistant granted authority to order
4 medications including controlled substances may complete
5 discharge prescriptions provided the prescription is in the
6 name of the physician assistant and the attending or
7 discharging physician.

8 (c) Physician assistants practicing in a hospital,
9 hospital affiliate, or an ambulatory surgical treatment center
10 are not required to obtain a mid-level controlled substance
11 license to order controlled substances under Section 303.05 of
12 the Illinois Controlled Substances Act.

13 (d) In order to increase access to care in rural hospitals,
14 the Secretary shall by rule provide for physician assistants to
15 admit patients to rural hospitals where they have privileges.
16 For the purpose of this subsection, "rural hospitals" has the
17 meaning provided in Section 8 of the Hospital Licensing Act.

18 (Source: P.A. 100-453, eff. 8-25-17.)