



93RD GENERAL ASSEMBLY

State of Illinois

2003 and 2004

Introduced 02/09/04, by Jim Watson - William B. Black -
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SYNOPSIS AS INTRODUCED:

New Act
225 ILCS 65/5-10
225 ILCS 65/5-15
225 ILCS 65/10-30

Creates the Nurse Licensure Compact Act. Allows for reciprocity of licensure of licensed practical nurses and registered nurses among the states. Provides for administration of the Compact by the Nursing Act Coordinator. Provides that the licensing board shall participate in a Compact Evaluation Initiative designed to evaluate the effectiveness and operability of the Compact. Provides that the Compact does not relieve employers from complying with statutorily imposed obligations. Provides that the Compact does not supersede existing State labor laws. Creates the Advanced Practice Registered Nurse Compact Act. Provides for recognition of the licensure/authority to practice of an advanced practice registered nurse among states. Provides guidelines concerning application, adverse actions, authority of licensing boards, compact administration, and immunity. Provides that the Director of Professional Regulation shall serve as the compact administrator for this State and provides for the termination of Illinois' participation in the compact under specified circumstances. Amends the Nursing and Advanced Practice Nursing Act to make changes relating to the purposes of the Nurse Licensure Compact. Effective immediately.

LRB093 18358 AMC 44065 b

FISCAL NOTE ACT
MAY APPLY

1 AN ACT concerning the licensure of nurses.

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

4 ARTICLE 5

5 Section 5-1. Short title. This Article may be cited as the
6 Nurse Licensure Compact Act. In this Article any reference to
7 this Act means this Article.

8 Section 5-5. Nurse Licensure Compact. The State of
9 Illinois ratifies and approves the Nurse Licensure Compact and
10 enters into it with all other jurisdictions that legally join
11 in the compact, which is, in form, substantially as follows:

12 ARTICLE I. Findings and Declaration of Purpose

13 (a) The party states find that:

14 (1) the health and safety of the public are affected by
15 the degree of compliance with and the effectiveness of
16 enforcement activities related to state nurse licensure
17 laws;

18 (2) violations of nurse licensure and other laws
19 regulating the practice of nursing may result in injury or
20 harm to the public;

21 (3) the expanded mobility of nurses and the use of
22 advanced communication technologies as part of our
23 nation's healthcare delivery system require greater
24 coordination and cooperation among states in the areas of
25 nurse licensure and regulation;

26 (4) new practice modalities and technology make
27 compliance with individual state nurse licensure laws
28 difficult and complex;

29 (5) the current system of duplicative licensure for

1 nurses practicing in multiple states is cumbersome and
2 redundant to both nurses and states.

3 (b) The general purposes of this Compact are to:

4 (1) facilitate the states' responsibility to protect
5 the public's health and safety;

6 (2) ensure and encourage the cooperation of party
7 states in the areas of nurse licensure and regulation;

8 (3) facilitate the exchange of information between
9 party states in the areas of nurse regulation,
10 investigation and adverse actions;

11 (4) promote compliance with the laws governing the
12 practice of nursing in each jurisdiction;

13 (5) invest all party states with the authority to hold
14 a nurse accountable for meeting all state practice laws in
15 the state in which the patient is located at the time care
16 is rendered through the mutual recognition of party state
17 licenses.

18 ARTICLE II. Definitions

19 As used in this Compact:

20 (a) "Adverse Action" means a home or remote state action.

21 (b) "Alternative program" means a voluntary,
22 non-disciplinary monitoring program approved by a nurse
23 licensing board.

24 (c) "Coordinated licensure information system" means an
25 integrated process for collecting, storing, and sharing
26 information on nurse licensure and enforcement activities
27 related to nurse licensure laws, which is administered by a
28 non-profit organization composed of and controlled by state
29 nurse licensing boards.

30 (d) "Current significant investigative information" means:

31 (1) investigative information that a licensing board,
32 after a preliminary inquiry that includes notification and
33 an opportunity for the nurse to respond if required by
34 state law, has reason to believe is not groundless and, if

1 proved true, would indicate more than a minor infraction;
2 or

3 (2) investigative information that indicates that the
4 nurse represents an immediate threat to public health and
5 safety regardless of whether the nurse has been notified
6 and had an opportunity to respond.

7 (e) "Home state" means the party state which is the nurse's
8 primary state of residence.

9 (f) "Home state action" means any administrative, civil,
10 equitable or criminal action permitted by the home state's laws
11 which are imposed on a nurse by the home state's licensing
12 board or other authority including actions against an
13 individual's license such as: revocation, suspension,
14 probation or any other action which affects a nurse's
15 authorization to practice.

16 (g) "Licensing board" means a party state's regulatory body
17 responsible for issuing nurse licenses.

18 (h) "Multistate licensure privilege" means current,
19 official authority from a remote state permitting the practice
20 of nursing as either a registered nurse or a licensed
21 practical/vocational nurse in such party state. All party
22 states have the authority, in accordance with existing state
23 due process law, to take actions against the nurse's privilege
24 such as: revocation, suspension, probation or any other action
25 which affects a nurse's authorization to practice.

26 (i) "Nurse" means a registered nurse or licensed
27 practical/vocational nurse, as those terms are defined by each
28 party's state practice laws.

29 (j) "Party state" means any state that has adopted this
30 Compact.

31 (k) "Remote state" means a party state, other than the home
32 state,

33 (1) where the patient is located at the time nursing
34 care is provided, or,

35 (2) in the case of the practice of nursing not
36 involving a patient, in such party state where the

1 recipient of nursing practice is located.

2 (l) "Remote state action" means:

3 (1) any administrative, civil, equitable or criminal
4 action permitted by a remote state's laws which are imposed
5 on a nurse by the remote state's licensing board or other
6 authority including actions against an individual's
7 multistate licensure privilege to practice in the remote
8 state, and

9 (2) cease and desist and other injunctive or equitable
10 orders issued by remote states or the licensing boards
11 thereof.

12 (m) "State" means a state, territory, or possession of the
13 United States, the District of Columbia or the Commonwealth of
14 Puerto Rico.

15 (n) "State practice laws" means those individual party's
16 state laws and regulations that govern the practice of nursing,
17 define the scope of nursing practice, and create the methods
18 and grounds for imposing discipline. "State practice laws" does
19 not include the initial qualifications for licensure or
20 requirements necessary to obtain and retain a license, except
21 for qualifications or requirements of the home state.

22 ARTICLE III. General Provisions and Jurisdiction

23 (a) A license to practice registered nursing issued by a
24 home state to a resident in that state will be recognized by
25 each party state as authorizing a multistate licensure
26 privilege to practice as a registered nurse in such party
27 state. A license to practice licensed practical/vocational
28 nursing issued by a home state to a resident in that state will
29 be recognized by each party state as authorizing a multistate
30 licensure privilege to practice as a licensed
31 practical/vocational nurse in such party state. In order to
32 obtain or retain a license, an applicant must meet the home
33 state's qualifications for licensure and license renewal as
34 well as all other applicable state laws.

1 (b) Party states may, in accordance with state due process
2 laws, limit or revoke the multistate licensure privilege of any
3 nurse to practice in their state and may take any other actions
4 under their applicable state laws necessary to protect the
5 health and safety of their citizens. If a party state takes
6 such action, it shall promptly notify the administrator of the
7 coordinated licensure information system. The administrator of
8 the coordinated licensure information system shall promptly
9 notify the home state of any such actions by remote states.

10 (c) Every nurse practicing in a party state must comply
11 with the state practice laws of the state in which the patient
12 is located at the time care is rendered. In addition, the
13 practice of nursing is not limited to patient care, but shall
14 include all nursing practice as defined by the state practice
15 laws of a party state. The practice of nursing will subject a
16 nurse to the jurisdiction of the nurse licensing board and the
17 courts, as well as the laws, in that party state.

18 (d) This Compact does not affect additional requirements
19 imposed by states for advanced practice registered nursing.
20 However, a multistate licensure privilege to practice
21 registered nursing granted by a party state shall be recognized
22 by other party states as a license to practice registered
23 nursing if one is required by state law as a precondition for
24 qualifying for advanced practice registered nurse
25 authorization.

26 (e) Individuals not residing in a party state shall
27 continue to be able to apply for nurse licensure as provided
28 for under the laws of each party state. However, the license
29 granted to these individuals will not be recognized as granting
30 the privilege to practice nursing in any other party state
31 unless explicitly agreed to by that party state.

32 ARTICLE IV. Applications for Licensure in a Party State

33 (a) Upon application for a license, the licensing board in
34 a party state shall ascertain, through the coordinated

1 licensure information system, whether the applicant has ever
2 held, or is the holder of, a license issued by any other state,
3 whether there are any restrictions on the multistate licensure
4 privilege, and whether any other adverse action by any state
5 has been taken against the license.

6 (b) A nurse in a party state shall hold licensure in only
7 one party state at a time, issued by the home state.

8 (c) A nurse who intends to change primary state of
9 residence may apply for licensure in the new home state in
10 advance of such change. However, new licenses will not be
11 issued by a party state until after a nurse provides evidence
12 of change in primary state of residence satisfactory to the new
13 home state's licensing board.

14 (d) When a nurse changes primary state of residence by:

15 (1) moving between two party states, and obtains a
16 license from the new home state, the license from the
17 former home state is no longer valid;

18 (2) moving from a non-party state to a party state, and
19 obtains a license from the new home state, the individual
20 state license issued by the non-party state is not affected
21 and will remain in full force if so provided by the laws of
22 the non-party state;

23 (3) moving from a party state to a non-party state, the
24 license issued by the prior home state converts to an
25 individual state license, valid only in the former home
26 state, without the multistate licensure privilege to
27 practice in other party states.

28 ARTICLE V. Adverse Actions

29 In addition to the General Provisions described in Article
30 III, the following provisions apply:

31 (a) The licensing board of a remote state shall promptly
32 report to the administrator of the coordinated licensure
33 information system any remote state actions including the
34 factual and legal basis for such action, if known. The

1 licensing board of a remote state shall also promptly report
2 any significant current investigative information yet to
3 result in a remote state action. The administrator of the
4 coordinated licensure information system shall promptly notify
5 the home state of any such reports.

6 (b) The licensing board of a party state shall have the
7 authority to complete any pending investigations for a nurse
8 who changes primary state of residence during the course of
9 such investigations. It shall also have the authority to take
10 appropriate action(s), and shall promptly report the
11 conclusions of such investigations to the administrator of the
12 coordinated licensure information system. The administrator of
13 the coordinated licensure information system shall promptly
14 notify the new home state of any such actions.

15 (c) A remote state may take adverse action affecting the
16 multistate licensure privilege to practice within that party
17 state. However, only the home state shall have the power to
18 impose adverse action against the license issued by the home
19 state.

20 (d) For purposes of imposing adverse action, the licensing
21 board of the home state shall give the same priority and effect
22 to reported conduct received from a remote state as it would if
23 such conduct had occurred within the home state. In so doing,
24 it shall apply its own state laws to determine appropriate
25 action.

26 (e) The home state may take adverse action based on the
27 factual findings of the remote state, so long as each state
28 follows its own procedures for imposing such adverse action.

29 (f) Nothing in this Compact shall override a party state's
30 decision that participation in an alternative program may be
31 used in lieu of licensure action and that such participation
32 shall remain non-public if required by the party state's laws.
33 Party states must require nurses who enter any alternative
34 programs to agree not to practice in any other party state
35 during the term of the alternative program without prior
36 authorization from such other party state.

1 ARTICLE VI. Additional Authorities Invested
2 in Party State Nurse Licensing Boards

3 Notwithstanding any other powers, party state nurse
4 licensing boards shall have the authority to:

5 (a) if otherwise permitted by state law, recover from the
6 affected nurse the costs of investigations and disposition of
7 cases resulting from any adverse action taken against that
8 nurse;

9 (b) issue subpoenas for both hearings and investigations
10 which require the attendance and testimony of witnesses, and
11 the production of evidence. Subpoenas issued by a nurse
12 licensing board in a party state for the attendance and
13 testimony of witnesses, and/or the production of evidence from
14 another party state, shall be enforced in the latter state by
15 any court of competent jurisdiction, according to the practice
16 and procedure of that court applicable to subpoenas issued in
17 proceedings pending before it. The issuing authority shall pay
18 any witness fees, travel expenses, mileage and other fees
19 required by the service statutes of the state where the
20 witnesses and/or evidence are located;

21 (c) issue cease and desist orders to limit or revoke a
22 nurse's authority to practice in their state;

23 (d) promulgate uniform rules and regulations as provided
24 for in Article VIII(c).

25 ARTICLE VII. Coordinated Licensure Information System

26 (a) All party states shall participate in a cooperative
27 effort to create a coordinated data base of all licensed
28 registered nurses and licensed practical/vocational nurses.
29 This system will include information on the licensure and
30 disciplinary history of each nurse, as contributed by party
31 states, to assist in the coordination of nurse licensure and
32 enforcement efforts.

1 (b) Notwithstanding any other provision of law, all party
2 states' licensing boards shall promptly report adverse
3 actions, actions against multistate licensure privileges, any
4 current significant investigative information yet to result in
5 adverse action, denials of applications, and the reasons for
6 such denials, to the coordinated licensure information system.

7 (c) Current significant investigative information shall be
8 transmitted through the coordinated licensure information
9 system only to party state licensing boards.

10 (d) Notwithstanding any other provision of law, all party
11 states' licensing boards contributing information to the
12 coordinated licensure information system may designate
13 information that may not be shared with non-party states or
14 disclosed to other entities or individuals without the express
15 permission of the contributing state.

16 (e) Any personally identifiable information obtained by a
17 party states' licensing board from the coordinated licensure
18 information system may not be shared with non-party states or
19 disclosed to other entities or individuals except to the extent
20 permitted by the laws of the party state contributing the
21 information.

22 (f) Any information contributed to the coordinated
23 licensure information system that is subsequently required to
24 be expunged by the laws of the party state contributing that
25 information, shall also be expunged from the coordinated
26 licensure information system.

27 (g) The Compact administrators, acting jointly with each
28 other and in consultation with the administrator of the
29 coordinated licensure information system, shall formulate
30 necessary and proper procedures for the identification,
31 collection and exchange of information under this Compact.

32 ARTICLE VIII. Compact Administration and
33 Interchange of Information

34 (a) The head of the nurse licensing board, or his/her

1 designee, of each party state shall be the administrator of
2 this Compact for his/her state.

3 (b) The Compact administrator of each party state shall
4 furnish to the Compact administrator of each other party state
5 any information and documents including, but not limited to, a
6 uniform data set of investigations, identifying information,
7 licensure data, and disclosable alternative program
8 participation information to facilitate the administration of
9 this Compact.

10 (c) Compact administrators shall have the authority to
11 develop uniform rules to facilitate and coordinate
12 implementation of this Compact. These uniform rules shall be
13 adopted by party states, under the authority invested under
14 Article VI(d).

15 ARTICLE IX. Immunity

16 No party state or the officers or employees or agents of a
17 party state's nurse licensing board who acts in accordance with
18 the provisions of this Compact shall be liable on account of
19 any act or omission in good faith while engaged in the
20 performance of their duties under this Compact. Good faith in
21 this article shall not include willful misconduct, gross
22 negligence, or recklessness.

23 ARTICLE X. Entry into Force, Withdrawal and Amendment

24 (a) This Compact shall enter into force and become
25 effective as to any state when it has been enacted into the
26 laws of that state. Any party state may withdraw from this
27 Compact by enacting a statute repealing the same, but no such
28 withdrawal shall take effect until six months after the
29 withdrawing state has given notice of the withdrawal to the
30 executive heads of all other party states.

31 (b) No withdrawal shall affect the validity or
32 applicability by the licensing boards of states remaining party

1 to the Compact of any report of adverse action occurring prior
2 to the withdrawal.

3 (c) Nothing contained in this Compact shall be construed to
4 invalidate or prevent any nurse licensure agreement or other
5 cooperative arrangement between a party state and a non-party
6 state that is made in accordance with the other provisions of
7 this Compact.

8 (d) This Compact may be amended by the party states. No
9 amendment to this Compact shall become effective and binding
10 upon the party states unless and until it is enacted into the
11 laws of all party states.

12 ARTICLE XI. Construction and Severability

13 (a) This Compact shall be liberally construed so as to
14 effectuate the purposes thereof. The provisions of this Compact
15 shall be severable and if any phrase, clause, sentence or
16 provision of this Compact is declared to be contrary to the
17 constitution of any party state or of the United States or the
18 applicability thereof to any government, agency, person or
19 circumstance is held invalid, the validity of the remainder of
20 this Compact and the applicability thereof to any government,
21 agency, person or circumstance shall not be affected thereby.
22 If this Compact shall be held contrary to the constitution of
23 any state party thereto, the Compact shall remain in full force
24 and effect as to the remaining party states and in full force
25 and effect as to the party state affected as to all severable
26 matters.

27 (b) In the event party states find a need for settling
28 disputes arising under this Compact:

29 (1) The party states may submit the issues in dispute
30 to an arbitration panel which will be comprised of an
31 individual appointed by the Compact administrator in the
32 home state; an individual appointed by the Compact
33 administrator in the remote state(s) involved; and an
34 individual mutually agreed upon by the Compact

1 administrators of all the party states involved in the
2 dispute.

3 (2) The decision of a majority of the arbitrators shall
4 be final and binding.

5 Section 5-10. Compact administrator. The head of the nurse
6 licensing board as used to define the compact administrator in
7 Article VIII(a) of the Compact shall mean the Nursing Act
8 Coordinator as defined under Section 10-15 of the Nursing and
9 Advanced Practice Nursing Act.

10 Section 5-15. Compact Evaluation Initiative. Upon the
11 effective date of this Compact, the licensing board shall
12 participate in a Compact Evaluation Initiative designed to
13 evaluate the effectiveness and operability of the Compact. Such
14 Compact Evaluation Initiative shall be conducted by an outside
15 researcher. A component of the Evaluation shall include a
16 remote state identification system through which nurses shall
17 designate those remote states in which the nurse is practicing.
18 A nurse's practice information in such identification system
19 shall be updated upon issuance and renewal of the nurse
20 license. The Evaluation shall continue until the year 2005,
21 after which time a report shall be produced for comment by the
22 participating licensing boards and shall be submitted to the
23 General Assembly in the form of a Nurse Licensure Compact
24 evaluation report.

25 Section 5-20. Costs of investigation and disposition of
26 cases. To facilitate cross-state enforcement efforts, the
27 General Assembly finds that it is necessary for Illinois to
28 have the power to recover from the affected nurse the costs of
29 investigations and disposition of cases resulting from adverse
30 actions taken by this State against that nurse.

31 Section 5-25. Statutory obligations. This Compact is
32 designed to facilitate the regulation of nurses and does not

1 relieve employers from complying with statutorily imposed
2 obligations.

3 Section 5-30. State labor laws. This Compact does not
4 supersede existing State labor laws.

5 ARTICLE 10

6 Section 10-1. Short title. This Article may be cited as
7 the Advanced Practice Registered Nurse Compact Act. In this
8 Article, any reference to this Act means this Article.

9 Section 10-5. Ratification and approval of compact. The
10 advanced practice registered nurse compact is hereby enacted
11 into law and entered into on behalf of this State with any
12 state that legally joins therein in substantially the following
13 form:

14 ARTICLE I

15 Findings and Declaration of Purpose

16 (a) The party states find that:

17 (1) The health and safety of the public are affected by
18 the degree of compliance with APRN licensure/authority to
19 practice requirements and the effectiveness of enforcement
20 activities related to state APRN licensure/authority to
21 practice laws;

22 (2) Violations of APRN licensure/authority to practice
23 and other laws regulating the practice of nursing may
24 result in injury or harm to the public;

25 (3) The expanded mobility of APRNs and the use of
26 advanced communication technologies as part of our
27 nation's health care delivery system require greater
28 coordination and cooperation among states in the areas of
29 APRN licensure/authority to practice and regulation;

30 (4) New practice modalities and technology make

1 compliance with individual state APRN licensure/authority
2 to practice laws difficult and complex;

3 (5) The current system of duplicative APRN
4 licensure/authority to practice for APRNs practicing in
5 multiple states is cumbersome and redundant to both APRNs
6 and states;

7 (6) Uniformity of APRN requirements throughout the
8 states promotes public safety and public health benefits;
9 and

10 (7) Access to APRN services increases the public's
11 access to health care, particularly in rural and
12 underserved areas.

13 (b) The general purposes of this Compact are to:

14 (1) Facilitate the states' responsibilities to protect
15 the public's health and safety;

16 (2) Ensure and encourage the cooperation of party
17 states in the areas of APRN licensure/authority to practice
18 and regulation including promotion of uniform licensure
19 requirements;

20 (3) Facilitate the exchange of information between
21 party states in the areas of APRN regulation, investigation
22 and adverse actions;

23 (4) Promote compliance with the laws governing APRN
24 practice in each jurisdiction; and

25 (5) Invest all party states with the authority to hold
26 an APRN accountable for meeting all state practice laws in
27 the state in which the patient is located at the time care
28 is rendered through the mutual recognition of party state
29 licenses.

30 ARTICLE II

31 Definitions

32 As used in this Compact:

33 (a) "Advanced Practice Registered Nurse" or "APRN" means a
34 Nurse Anesthetist; Nurse Practitioner; Nurse Midwife; or

1 Clinical Nurse Specialist to the extent a party state licenses
2 or grants authority to practice in that APRN role and title.

3 (b) "Adverse Action" means a home or remote state
4 disciplinary action.

5 (c) "Alternative program" means a voluntary,
6 non-disciplinary monitoring program approved by a licensing
7 board.

8 (d) "APRN Licensure/Authority to Practice" means the
9 regulatory mechanism used by a party state to grant legal
10 authority to practice as an APRN.

11 (e) "APRN Uniform Licensure/Authority to Practice
12 Requirements" means those agreed upon minimum uniform
13 licensure, education and examination requirements adopted by
14 licensing boards for the recognized APRN role and title.

15 (f) "Coordinated licensure information system" means an
16 integrated process for collecting, storing and sharing
17 information on APRN licensure/authority to practice and
18 enforcement activities related to APRN licensure/authority to
19 practice laws, which is administered by a non-profit
20 organization composed of and controlled by state licensing
21 boards.

22 (g) "Current significant investigative information" means:

23 (1) Investigative information that a licensing board,
24 after a preliminary inquiry that includes notification and
25 an opportunity for the APRN to respond if required by state
26 law, has reason to believe is not groundless and, if proved
27 true, would indicate more than a minor infraction; or

28 (2) Investigative information that indicates that the
29 APRN represents an immediate threat to public health and
30 safety regardless of whether the APRN has been notified and
31 had an opportunity to respond.

32 (h) "Home state" means the party state that is the APRN's
33 primary state of residence.

34 (i) "Home state action" means any administrative, civil,
35 equitable or criminal action permitted by the home state's laws
36 which are imposed on an APRN by the home state's licensing

1 board or other authority including actions against an
2 individual's license/authority to practice such as:
3 revocation, suspension, probation or any other action which
4 affects an APRN's authorization to practice.

5 (j) "Licensing board" means a party state's regulatory body
6 responsible for issuing APRN licensure/authority to practice.

7 (k) "Multistate advanced practice privilege" means current
8 authority from a remote state permitting an APRN to practice in
9 that state in the same role and title as the APRN is
10 licensed/authorized to practice in the home state to the extent
11 that the remote state laws recognize such APRN role and title.
12 A remote state has the authority, in accordance with existing
13 state due process laws, to take actions against the APRN's
14 privilege, including revocation, suspension, probation, or any
15 other action that affects an APRN's multistate privilege to
16 practice.

17 (l) "Party state" means any state that has adopted this
18 Compact.

19 (m) "Prescriptive authority" means the legal authority to
20 prescribe medications and devices as defined by party state
21 laws.

22 (n) "Remote state" means a party state, other than the home
23 state,

24 (1) Where the patient is located at the time APRN care
25 is provided, or

26 (2) In the case of APRN practice not involving a
27 patient, in such party state where the recipient of APRN
28 practice is located.

29 (o) "Remote state action" means:

30 (1) Any administrative, civil, equitable or criminal
31 action permitted by a remote state's laws which are imposed
32 on an APRN by the remote state's licensing board or other
33 authority including actions against an individual's
34 multistate advanced practice privilege in the remote
35 state, and

36 (2) Cease and desist and other injunctive or equitable

1 orders issued by remote states or the licensing boards
2 thereof.

3 (p) "State" means a state, territory, or possession of the
4 United States.

5 (q) "State practice laws" means a party state's laws and
6 regulations that govern APRN practice, define the scope of
7 advanced nursing practice including prescriptive authority,
8 and create the methods and grounds for imposing discipline.
9 State practice laws do not include the requirements necessary
10 to obtain and retain APRN licensure/authority to practice as an
11 APRN, except for qualifications or requirements of the home
12 state.

13 (r) "Unencumbered" means that a state has no current
14 disciplinary action against an APRN's license/authority to
15 practice.

16 ARTICLE III

17 General Provisions and Jurisdiction

18 (a) All party states shall participate in the Nurse
19 Licensure Compact for registered nurses and licensed
20 practical/vocational nurses in order to enter into the APRN
21 Compact.

22 (b) No state shall enter the APRN Compact until the state
23 adopts, at a minimum, the APRN Uniform Licensure/Authority to
24 Practice Requirements for each APRN role and title recognized
25 by the state seeking to enter the APRN Compact.

26 (c) APRN Licensure/Authority to practice issued by a home
27 state to a resident in that state will be recognized by each
28 party state as authorizing a multistate advanced practice
29 privilege to the extent that the role and title are recognized
30 by each party state. To obtain or retain APRN
31 licensure/authority to practice as an APRN, an applicant must
32 meet the home state's qualifications for authority or renewal
33 of authority as well as all other applicable state laws.

34 (d) The APRN multistate advanced practice privilege does

1 not include prescriptive authority, and does not affect any
2 requirements imposed by states to grant to an APRN initial and
3 continuing prescriptive authority according to state practice
4 laws. However, a party state may grant prescriptive authority
5 to an individual on the basis of a multistate advanced practice
6 privilege to the extent permitted by state practice laws.

7 (e) A party state may, in accordance with state due process
8 laws, limit or revoke the multistate advanced practice
9 privilege in the party state and may take any other necessary
10 actions under the party state's applicable laws to protect the
11 health and safety of the party state's citizens. If a party
12 state takes action, the party state shall promptly notify the
13 administrator of the coordinated licensure information system.
14 The administrator of the coordinated licensure information
15 system shall promptly notify the home state of any such actions
16 by remote states.

17 (f) An APRN practicing in a party state must comply with
18 the state practice laws of the state in which the patient is
19 located at the time care is provided. The APRN practice
20 includes patient care and all advanced nursing practice defined
21 by the party state's practice laws. The APRN practice will
22 subject an APRN to the jurisdiction of the licensing board, the
23 courts, and the laws of the party state.

24 (g) Individuals not residing in a party state may apply for
25 APRN licensure/authority to practice as an APRN under the laws
26 of a party state. However, the authority to practice granted to
27 these individuals will not be recognized as granting the
28 privilege to practice as an APRN in any other party state
29 unless explicitly agreed to by that party state.

30 ARTICLE IV

31 Applications for APRN Licensure/Authority 32 to Practice in a Party State

33 (a) Once an application for APRN licensure/authority to
34 practice is submitted, a party state shall ascertain, through

1 the Coordinated Licensure Information System, whether:

2 (1) The applicant has held or is the holder of a
3 nursing license/authority to practice issued by another
4 state;

5 (2) The applicant has had a history of previous
6 disciplinary action by any state;

7 (3) An encumbrance exists on any license/authority to
8 practice; and

9 (4) Any other adverse action by any other state has
10 been taken against a license/authority to practice.

11 This information may be used in approving or denying an
12 application for APRN licensure/authority to practice.

13 (b) An APRN in a party state shall hold APRN
14 licensure/authority to practice in only one party state at a
15 time, issued by the home state.

16 (c) An APRN who intends to change primary state of
17 residence may apply for APRN licensure/authority to practice in
18 the new home state in advance of such change. However, new
19 licensure/authority to practice will not be issued by a party
20 state until after an APRN provides evidence of change in
21 primary state of residence satisfactory to the new home state's
22 licensing board.

23 (d) When an APRN changes primary state of residence by:

24 (1) Moving between two party states, and obtains APRN
25 licensure/authority to practice from the new home state,
26 the APRN licensure/authority to practice from the former
27 home state is no longer valid;

28 (2) Moving from a non-party state to a party state, and
29 obtains APRN licensure/authority to practice from the new
30 home state, the individual state license issued by the
31 non-party state is not affected and will remain in full
32 force if so provided by the laws of the non-party state;

33 (3) Moving from a party state to a non-party state, the
34 APRN licensure/authority to practice issued by the prior
35 home state converts to an individual state license, valid
36 only in the former home state, without the multistate

1 licensure privilege to practice in other party states.

2 ARTICLE V

3 Adverse Actions

4 In addition to the General Provisions described in Article
5 III, the following provisions apply:

6 (a) The licensing board of a remote state shall promptly
7 report to the administrator of the coordinated licensure
8 information system any remote state actions including the
9 factual and legal basis for such action, if known. The
10 licensing board of a remote state shall also promptly report
11 any significant current investigative information yet to
12 result in a remote state action. The administrator of the
13 coordinated licensure information system shall promptly notify
14 the home state of any such reports.

15 (b) The licensing board of a party state shall have the
16 authority to complete any pending investigations for an APRN
17 who changes primary state of residence during the course of
18 such investigations. It shall also have the authority to take
19 appropriate action(s), and shall promptly report the
20 conclusions of such investigations to the administrator of the
21 coordinated licensure information system. The administrator of
22 the coordinated licensure information system shall promptly
23 notify the new home state of any such actions.

24 (c) A remote state may take adverse action affecting the
25 multistate advanced practice privilege to practice within that
26 party state. However, only the home state shall have the power
27 to impose adverse action against the APRN licensure/authority
28 to practice issued by the home state.

29 (d) For purposes of imposing adverse action, the licensing
30 board of the home state shall give the same priority and effect
31 to reported conduct received from a remote state as it would if
32 such conduct had occurred within the home state. In so doing,
33 it shall apply its own state laws to determine appropriate
34 action.

1 (e) The home state may take adverse action based on the
2 factual findings of the remote state, so long as each state
3 follows its own procedures for imposing such adverse action.

4 (f) Nothing in this Compact shall override a party state's
5 decision that participation in an alternative program may be
6 used in lieu of adverse action and that such participation
7 shall remain non-public if required by the party state's laws.
8 Party states must require APRNs who enter any alternative
9 programs to agree not to practice in any other party state
10 during the term of the alternative program without prior
11 authorization from such other party state.

12 (g) All home state licensing board disciplinary orders,
13 agreed or otherwise, which limit the scope of the APRN's
14 practice or require monitoring of the APRN as a condition of
15 the order shall include the requirements that the APRN will
16 limit her or his practice to the home state during the pendency
17 of the order. This requirement may allow the APRN to practice
18 in other party states with prior written authorization from
19 both the home state and party state licensing boards.

20 ARTICLE VI

21 Additional Authorities Invested in Party State

22 Licensing Boards

23 Notwithstanding any other powers, party state licensing
24 boards shall have the authority to:

25 (a) If otherwise permitted by state law, recover from the
26 affected APRN the costs of investigations and disposition of
27 cases resulting from any adverse action taken against that
28 APRN;

29 (b) Issue subpoenas for both hearings and investigations,
30 which require the attendance and testimony of witnesses, and
31 the production of evidence. Subpoenas issued by a licensing
32 board in a party state for the attendance and testimony of
33 witnesses, and/or the production of evidence from another party
34 state, shall be enforced in the latter state by any court of

1 competent jurisdiction, according to the practice and
2 procedure of that court applicable to subpoenas issued in
3 proceedings pending before it. The issuing authority shall pay
4 any witness fees, travel expenses, mileage and other fees
5 required by the service statutes of the state where the
6 witnesses and/or evidence are located;

7 (c) Issue cease and desist orders to limit or revoke an
8 APRN's privilege or licensure/authority to practice in their
9 state; and

10 (d) Promulgate uniform rules and regulations as provided
11 for in Article VIII(c).

12 ARTICLE VII

13 Coordinated Licensure Information System

14 (a) All party states shall participate in a cooperative
15 effort to create a coordinated database of all APRNs. This
16 system will include information on the APRN
17 licensure/authority to practice and disciplinary history of
18 each APRN, as contributed by party states, to assist in the
19 coordination of APRN licensure/authority to practice and
20 enforcement efforts.

21 (b) Notwithstanding any other provision of law, all party
22 states' licensing boards shall promptly report adverse
23 actions, actions against multistate advanced practice
24 privileges, any current significant investigative information
25 yet to result in adverse action, denials of applications, and
26 the reasons for such denials, to the coordinated licensure
27 information system.

28 (c) Current significant investigative information shall be
29 transmitted through the coordinated licensure information
30 system only to party state licensing boards.

31 (d) Notwithstanding any other provision of law, all party
32 states' licensing boards contributing information to the
33 coordinated licensure information system may designate
34 information that may not be shared with non-party states or

1 disclosed to other entities or individuals without the express
2 permission of the contributing state.

3 (e) Any personally identifiable information obtained by a
4 party states' licensing board from the coordinated licensure
5 information system may not be shared with non-party states or
6 disclosed to other entities or individuals except to the extent
7 permitted by the laws of the party state contributing the
8 information.

9 (f) Any information contributed to the coordinated
10 licensure information system that is subsequently required to
11 be expunged by the laws of the party state contributing that
12 information, shall also be expunged from the coordinated
13 licensure information system.

14 (g) The Compact administrators, acting jointly with each
15 other and in consultation with the administrator of the
16 coordinated licensure information system, shall formulate
17 necessary and proper procedures for the identification,
18 collection and exchange of information under this Compact.

19 ARTICLE VIII

20 Compact Administration and Interchange of Information

21 (a) The head of the licensing board, or his/her designee,
22 of each party state shall be the administrator of this Compact
23 for his/her state.

24 (b) The Compact administrator of each party state shall
25 furnish to the Compact administrator of each other party state
26 any information and documents including, but not limited to, a
27 uniform data set of investigations, identifying information,
28 licensure data, and disclosable alternative program
29 participation information to facilitate the administration of
30 this Compact.

31 (c) Compact administrators shall have the authority to
32 develop uniform rules to facilitate and coordinate
33 implementation of this Compact. These uniform rules shall be
34 adopted by party states, under the authority invested under

1 Article VI(d).

2 ARTICLE IX

3 Immunity

4 No party state or the officers or employees or agents of a
5 party state's licensing board who acts in accordance with the
6 provisions of this Compact shall be liable on account of any
7 act or omission in good faith while engaged in the performance
8 of their duties under this Compact. Good faith in this article
9 shall not include willful misconduct, gross negligence, or
10 recklessness.

11 ARTICLE X

12 Entry into Force, Withdrawal and Amendment

13 (a) This Compact shall enter into force and become
14 effective as to any state when it has been enacted into the
15 laws of that state. Any party state may withdraw from this
16 Compact by enacting a statute repealing the same, but no such
17 withdrawal shall take effect until six months after the
18 withdrawing state has given notice of the withdrawal to the
19 executive heads of all other party states.

20 (b) No withdrawal shall affect the validity or
21 applicability by the licensing boards of states remaining party
22 to the Compact of any report of adverse action occurring prior
23 to the withdrawal.

24 (c) Nothing contained in this Compact shall be construed to
25 invalidate or prevent any APRN licensure/authority to practice
26 agreement or other cooperative arrangement between a party
27 state and a non-party state that is made in accordance with the
28 other provisions of this Compact.

29 (d) This Compact may be amended by the party states. No
30 amendment to this Compact shall become effective and binding
31 upon the party states unless and until it is enacted into the
32 laws of all party states.

1 ARTICLE XI

2 Construction and Severability

3 (a) This Compact shall be liberally construed so as to
4 effectuate the purposes thereof. The provisions of this Compact
5 shall be severable and if any phrase, clause, sentence or
6 provision of this Compact is declared to be contrary to the
7 constitution of any party state or of the United States or the
8 applicability thereof to any government, agency, person or
9 circumstance is held invalid, the validity of the remainder of
10 this Compact and the applicability thereof to any government,
11 agency, person or circumstance shall not be affected thereby.
12 If this Compact shall be held contrary to the constitution of
13 any state party thereto, the Compact shall remain in full force
14 and effect as to the remaining party states and in full force
15 and effect as to the party state affected as to all severable
16 matters.

17 (b) In the event party states find a need for settling
18 disputes arising under this Compact:

19 (1) The party states may submit the issues in dispute
20 to an arbitration panel which will be comprised of an
21 individual appointed by the Compact administrator in the
22 home state; an individual appointed by the Compact
23 administrator in the remote state(s) involved; and an
24 individual mutually agreed upon by the Compact
25 administrators of all the party states involved in the
26 dispute.

27 (2) The decision of a majority of the arbitrators shall
28 be final and binding.

29 Section 10-10. Compact administrator; expenses.

30 (a) The Director of Professional Regulation shall serve as
31 the compact administrator for this State and any expenses he or
32 she incurs in so serving shall be paid from the appropriation
33 for the ordinary and contingent expenses of the Department of

1 Professional Regulation.

2 (b) The Director shall terminate Illinois' participation
3 in the compact if the APRN Uniform Licensure/Authority to
4 Practice Requirements are substantially changed after the
5 effective date of this Act. A substantial change is anything
6 that significantly alters the individual professional
7 qualifications for participation in the compact such as no
8 longer requiring either certification by a national
9 accreditation body in the APRN's specialty appropriate to
10 educational preparation or completion of a graduate level APRN
11 educational program accredited by a national accreditation
12 body. If the Director terminates Illinois' participation in the
13 compact, then the Director shall provide all APRNs practicing
14 in Illinois under the compact at the time 60 days written
15 notice of the termination.

16 (c) All APRNs practicing in Illinois under the compact at
17 the time of registration with the Department of Professional
18 Regulation shall be required to sign a notarized statement of
19 understanding and agreement to practice within the scope of
20 practice requirements for advanced practice nurses in Illinois
21 under the Nursing and Advanced Practice Nursing Act. The
22 Department shall prepare the form to be used.

23 ARTICLE 90

24 Section 90-5. The Nursing and Advanced Practice Nursing Act
25 is amended by changing Sections 5-10, 5-15, and 10-30 as
26 follows:

27 (225 ILCS 65/5-10)

28 (Section scheduled to be repealed on January 1, 2008)

29 Sec. 5-10. Definitions. Each of the following terms, when
30 used in this Act, shall have the meaning ascribed to it in this
31 Section, except where the context clearly indicates otherwise:

32 (a) "Department" means the Department of Professional
33 Regulation.

1 (b) "Director" means the Director of Professional
2 Regulation.

3 (c) "Board" means the Board of Nursing appointed by the
4 Director.

5 (d) "Academic year" means the customary annual schedule of
6 courses at a college, university, or approved school,
7 customarily regarded as the school year as distinguished from
8 the calendar year.

9 (e) "Approved program of professional nursing education"
10 and "approved program of practical nursing education" are
11 programs of professional or practical nursing, respectively,
12 approved by the Department under the provisions of this Act.

13 (f) "Nursing Act Coordinator" means a registered
14 professional nurse appointed by the Director to carry out the
15 administrative policies of the Department.

16 (g) "Assistant Nursing Act Coordinator" means a registered
17 professional nurse appointed by the Director to assist in
18 carrying out the administrative policies of the Department.

19 (h) "Registered" is the equivalent of "licensed".

20 (i) "Practical nurse" or "licensed practical nurse" means a
21 person who is licensed as a practical nurse under this Act or
22 holds the privilege to practice under this Act and practices
23 practical nursing as defined in paragraph (j) of this Section.
24 Only a practical nurse licensed or granted the privilege to
25 practice under this Act is entitled to use the title "licensed
26 practical nurse" and the abbreviation "L.P.N.".

27 (j) "Practical nursing" means the performance of nursing
28 acts requiring the basic nursing knowledge, judgement, and
29 skill acquired by means of completion of an approved practical
30 nursing education program. Practical nursing includes
31 assisting in the nursing process as delegated by and under the
32 direction of a registered professional nurse. The practical
33 nurse may work under the direction of a licensed physician,
34 dentist, podiatrist, or other health care professional
35 determined by the Department.

36 (k) "Registered Nurse" or "Registered Professional Nurse"

1 means a person who is licensed as a professional nurse under
2 this Act or holds the privilege to practice under this Act and
3 practices nursing as defined in paragraph (1) of this Section.
4 Only a registered nurse licensed or granted the privilege to
5 practice under this Act is entitled to use the titles
6 "registered nurse" and "registered professional nurse" and the
7 abbreviation, "R.N."

8 (1) "Registered professional nursing practice" includes
9 all nursing specialities and means the performance of any
10 nursing act based upon professional knowledge, judgment, and
11 skills acquired by means of completion of an approved
12 registered professional nursing education program. A
13 registered professional nurse provides nursing care
14 emphasizing the importance of the whole and the interdependence
15 of its parts through the nursing process to individuals,
16 groups, families, or communities, that includes but is not
17 limited to: (1) the assessment of healthcare needs, nursing
18 diagnosis, planning, implementation, and nursing evaluation;
19 (2) the promotion, maintenance, and restoration of health; (3)
20 counseling, patient education, health education, and patient
21 advocacy; (4) the administration of medications and treatments
22 as prescribed by a physician licensed to practice medicine in
23 all of its branches, a licensed dentist, a licensed podiatrist,
24 or a licensed optometrist or as prescribed by a physician
25 assistant in accordance with written guidelines required under
26 the Physician Assistant Practice Act of 1987 or by an advanced
27 practice nurse in accordance with a written collaborative
28 agreement required under the Nursing and Advanced Practice
29 Nursing Act; (5) the coordination and management of the nursing
30 plan of care; (6) the delegation to and supervision of
31 individuals who assist the registered professional nurse
32 implementing the plan of care; and (7) teaching and supervision
33 of nursing students. The foregoing shall not be deemed to
34 include those acts of medical diagnosis or prescription of
35 therapeutic or corrective measures that are properly performed
36 only by physicians licensed in the State of Illinois.

1 (m) "Current nursing practice update course" means a
2 planned nursing education curriculum approved by the
3 Department consisting of activities that have educational
4 objectives, instructional methods, content or subject matter,
5 clinical practice, and evaluation methods, related to basic
6 review and updating content and specifically planned for those
7 nurses previously licensed in the United States or its
8 territories and preparing for reentry into nursing practice.

9 (n) "Professional assistance program for nurses" means a
10 professional assistance program that meets criteria
11 established by the Board of Nursing and approved by the
12 Director, which provides a non-disciplinary treatment approach
13 for nurses licensed under this Act whose ability to practice is
14 compromised by alcohol or chemical substance addiction.

15 (o) "Privilege to practice" means the authorization to
16 practice as a practical nurse or a registered nurse in the
17 State under the Nurse Licensure Compact.

18 (p) "License" or "licensed" means the permission granted a
19 person to practice nursing under this Act, including the
20 privilege to practice.

21 (q) "Licensee" means a person who has been issued a license
22 to practice nursing in the state or who holds the privilege to
23 practice nursing in this State.

24 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98;
25 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

26 (225 ILCS 65/5-15)

27 (Section scheduled to be repealed on January 1, 2008)

28 Sec. 5-15. Policy; application of Act. For the protection
29 of life and the promotion of health, and the prevention of
30 illness and communicable diseases, any person practicing or
31 offering to practice professional and practical nursing in
32 Illinois shall submit evidence that he or she is qualified to
33 practice, and shall be licensed or hold the privilege to
34 practice as provided under this Act. No person shall practice
35 or offer to practice professional or practical nursing in

1 Illinois or use any title, sign, card or device to indicate
2 that such a person is practicing professional or practical
3 nursing unless such person has been licensed or holds the
4 privilege to practice under the provisions of this Act.

5 This Act does not prohibit the following:

6 (a) The practice of nursing in Federal employment in
7 the discharge of the employee's duties by a person who is
8 employed by the United States government or any bureau,
9 division or agency thereof and is a legally qualified and
10 licensed nurse of another state or territory and not in
11 conflict with Sections 10-5, 10-30, and 10-45 of this Act.

12 (b) Nursing that is included in their program of study
13 by students enrolled in programs of nursing or in current
14 nurse practice update courses approved by the Department.

15 (c) The furnishing of nursing assistance in an
16 emergency.

17 (d) The practice of nursing by a nurse who holds an
18 active license in another state when providing services to
19 patients in Illinois during a bonafide emergency or in
20 immediate preparation for or during interstate transit.

21 (e) The incidental care of the sick by members of the
22 family, domestic servants or housekeepers, or care of the
23 sick where treatment is by prayer or spiritual means.

24 (f) Persons from being employed as nursing aides,
25 attendants, orderlies, and other auxiliary workers in
26 private homes, long term care facilities, nurseries,
27 hospitals or other institutions.

28 (g) The practice of practical nursing by one who has
29 applied in writing to the Department in form and substance
30 satisfactory to the Department, for a license as a licensed
31 practical nurse and who has complied with all the
32 provisions under Section 10-30, except the passing of an
33 examination to be eligible to receive such license, until:
34 the decision of the Department that the applicant has
35 failed to pass the next available examination authorized by
36 the Department or has failed, without an approved excuse,

1 to take the next available examination authorized by the
2 Department or until the withdrawal of the application, but
3 not to exceed 3 months. An applicant practicing practical
4 nursing under this Section who passes the examination,
5 however, may continue to practice under this Section until
6 such time as he or she receives his or her license to
7 practice or until the Department notifies him or her that
8 the license has been denied. No applicant for licensure
9 practicing under the provisions of this paragraph shall
10 practice practical nursing except under the direct
11 supervision of a registered professional nurse licensed
12 under this Act or a licensed physician, dentist or
13 podiatrist. In no instance shall any such applicant
14 practice or be employed in any supervisory capacity.

15 (h) The practice of practical nursing by one who is a
16 licensed practical nurse under the laws of another U.S.
17 jurisdiction and has applied in writing to the Department,
18 in form and substance satisfactory to the Department, for a
19 license as a licensed practical nurse and who is qualified
20 to receive such license under Section 10-30, until (1) the
21 expiration of 6 months after the filing of such written
22 application, (2) the withdrawal of such application, or (3)
23 the denial of such application by the Department.

24 (i) The practice of professional nursing by one who has
25 applied in writing to the Department in form and substance
26 satisfactory to the Department for a license as a
27 registered professional nurse and has complied with all the
28 provisions under Section 10-30 except the passing of an
29 examination to be eligible to receive such license, until
30 the decision of the Department that the applicant has
31 failed to pass the next available examination authorized by
32 the Department or has failed, without an approved excuse,
33 to take the next available examination authorized by the
34 Department or until the withdrawal of the application, but
35 not to exceed 3 months. An applicant practicing
36 professional nursing under this Section who passes the

1 examination, however, may continue to practice under this
2 Section until such time as he or she receives his or her
3 license to practice or until the Department notifies him or
4 her that the license has been denied. No applicant for
5 licensure practicing under the provisions of this
6 paragraph shall practice professional nursing except under
7 the direct supervision of a registered professional nurse
8 licensed under this Act. In no instance shall any such
9 applicant practice or be employed in any supervisory
10 capacity.

11 (j) The practice of professional nursing by one who is
12 a registered professional nurse under the laws of another
13 state, territory of the United States or country and has
14 applied in writing to the Department, in form and substance
15 satisfactory to the Department, for a license as a
16 registered professional nurse and who is qualified to
17 receive such license under Section 10-30, until (1) the
18 expiration of 6 months after the filing of such written
19 application, (2) the withdrawal of such application, or (3)
20 the denial of such application by the Department.

21 (k) The practice of professional nursing that is
22 included in a program of study by one who is a registered
23 professional nurse under the laws of another state or
24 territory of the United States or foreign country,
25 territory or province and who is enrolled in a graduate
26 nursing education program or a program for the completion
27 of a baccalaureate nursing degree in this State, which
28 includes clinical supervision by faculty as determined by
29 the educational institution offering the program and the
30 health care organization where the practice of nursing
31 occurs. The educational institution will file with the
32 Department each academic term a list of the names and
33 origin of license of all professional nurses practicing
34 nursing as part of their programs under this provision.

35 (l) Any person licensed in this State under any other
36 Act from engaging in the practice for which she or he is

1 licensed.

2 (m) Delegation to authorized direct care staff trained
3 under Section 15.4 of the Mental Health and Developmental
4 Disabilities Administrative Act.

5 An applicant for license practicing under the exceptions
6 set forth in subparagraphs (g), (h), (i), and (j) of this
7 Section shall use the title R.N. Lic. Pend. or L.P.N. Lic.
8 Pend. respectively and no other.

9 (Source: P.A. 93-265, eff. 7-22-03.)

10 (225 ILCS 65/10-30)

11 (Section scheduled to be repealed on January 1, 2008)

12 Sec. 10-30. Qualifications for licensure.

13 (a) Each applicant who successfully meets the requirements
14 of this Section shall be entitled to licensure as a Registered
15 Nurse or Licensed Practical Nurse, whichever is applicable.

16 (b) An applicant for licensure by examination to practice
17 as a registered nurse or licensed practical nurse shall:

18 (1) submit a completed written application, on forms
19 provided by the Department and fees as established by the
20 Department;

21 (2) for registered nurse licensure, have graduated
22 from a professional nursing education program approved by
23 the Department;

24 (2.5) for licensed practical nurse licensure, have
25 graduated ~~graduate~~ from a practical nursing education
26 program approved by the Department;

27 (3) have not violated the provisions of Section 10-45
28 of this Act. The Department may take into consideration any
29 felony conviction of the applicant, but such a conviction
30 shall not operate as an absolute bar to licensure;

31 (4) meet all other requirements as established by rule;

32 (5) pay, either to the Department or its designated
33 testing service, a fee covering the cost of providing the
34 examination. Failure to appear for the examination on the
35 scheduled date at the time and place specified after the

1 applicant's application for examination has been received
2 and acknowledged by the Department or the designated
3 testing service shall result in the forfeiture of the
4 examination fee.

5 If an applicant neglects, fails, or refuses to take an
6 examination or fails to pass an examination for a license under
7 this Act within 3 years after filing the application, the
8 application shall be denied. However, the applicant may make a
9 new application accompanied by the required fee and provide
10 evidence of meeting the requirements in force at the time of
11 the new application.

12 An applicant may take and successfully complete a
13 Department-approved examination in another jurisdiction.
14 However, an applicant who has never been licensed previously in
15 any jurisdiction that utilizes a Department-approved
16 examination and who has taken and failed to pass the
17 examination within 3 years after filing the application must
18 submit proof of successful completion of a
19 Department-authorized nursing education program or
20 recompletion of an approved registered nursing program or
21 licensed practical nursing program, as appropriate, prior to
22 re-application.

23 An applicant shall have one year from the date of
24 notification of successful completion of the examination to
25 apply to the Department for a license. If an applicant fails to
26 apply within one year, the applicant shall be required to again
27 take and pass the examination unless licensed in another
28 jurisdiction of the United States within one year of passing
29 the examination.

30 (c) An applicant for licensure by endorsement who is a
31 registered professional nurse or a licensed practical nurse
32 licensed by examination under the laws of another state or
33 territory of the United States or a foreign country,
34 jurisdiction, territory, or province shall:

35 (1) submit a completed written application, on forms
36 supplied by the Department, and fees as established by the

1 Department;

2 (2) for registered nurse licensure, have graduated
3 from a professional nursing education program approved by
4 the Department;

5 (2.5) for licensed practical nurse licensure, have
6 graduated from a practical nursing education program
7 approved by the Department;

8 (3) submit verification of licensure status directly
9 from the United States jurisdiction of licensure, if
10 applicable, as defined by rule;

11 (4) have passed the examination authorized by the
12 Department;

13 (5) meet all other requirements as established by rule.

14 (d) All applicants for registered nurse licensure pursuant
15 to item (2) of subsection (b) and item (2) of subsection (c) of
16 this Section who are graduates of nursing educational programs
17 in a country other than the United States or its territories
18 must submit to the Department certification of successful
19 completion of the Commission of Graduates of Foreign Nursing
20 Schools (CGFNS) examination. An applicant who is unable to
21 provide appropriate documentation to satisfy CGFNS of her or
22 his educational qualifications for the CGFNS examination shall
23 be required to pass an examination to test competency in the
24 English language, which shall be prescribed by the Department,
25 if the applicant is determined by the Board to be educationally
26 prepared in nursing. The Board shall make appropriate inquiry
27 into the reasons for any adverse determination by CGFNS before
28 making its own decision.

29 An applicant licensed in another state or territory who is
30 applying for licensure and has received her or his education in
31 a country other than the United States or its territories shall
32 be exempt from the completion of the Commission of Graduates of
33 Foreign Nursing Schools (CGFNS) examination if the applicant
34 meets all of the following requirements:

35 (1) successful passage of the licensure examination
36 authorized by the Department;

1 (2) holds an active, unencumbered license in another
2 state; and

3 (3) has been actively practicing for a minimum of 2
4 years in another state.

5 (e) (Blank).

6 (f) Pending the issuance of a license under subsection (c)
7 of this Section, the Department may grant an applicant a
8 temporary license to practice nursing as a registered nurse or
9 as a licensed practical nurse if the Department is satisfied
10 that the applicant holds an active, unencumbered license in
11 good standing in another jurisdiction. If the applicant holds
12 more than one current active license, or one or more active
13 temporary licenses from other jurisdictions, the Department
14 shall not issue a temporary license until it is satisfied that
15 each current active license held by the applicant is
16 unencumbered. The temporary license, which shall be issued no
17 later than 14 working days following receipt by the Department
18 of an application for the temporary license, shall be granted
19 upon the submission of the following to the Department:

20 (1) a signed and completed application for licensure
21 under subsection (a) of this Section as a registered nurse
22 or a licensed practical nurse;

23 (2) proof of a current, active license in at least one
24 other jurisdiction and proof that each current active
25 license or temporary license held by the applicant within
26 the last 5 years is unencumbered;

27 (3) a signed and completed application for a temporary
28 license; and

29 (4) the required temporary license fee.

30 (g) The Department may refuse to issue an applicant a
31 temporary license authorized pursuant to this Section if,
32 within 14 working days following its receipt of an application
33 for a temporary license, the Department determines that:

34 (1) the applicant has been convicted of a crime under
35 the laws of a jurisdiction of the United States: (i) which
36 is a felony; or (ii) which is a misdemeanor directly

1 related to the practice of the profession, within the last
2 5 years;

3 (2) within the last 5 years the applicant has had a
4 license or permit related to the practice of nursing
5 revoked, suspended, or placed on probation by another
6 jurisdiction, if at least one of the grounds for revoking,
7 suspending, or placing on probation is the same or
8 substantially equivalent to grounds in Illinois; or

9 (3) it intends to deny licensure by endorsement.

10 For purposes of this Section, an "unencumbered license"
11 means a license against which no disciplinary action has been
12 taken or is pending and for which all fees and charges are paid
13 and current.

14 (h) The Department may revoke a temporary license issued
15 pursuant to this Section if:

16 (1) it determines that the applicant has been convicted
17 of a crime under the law of any jurisdiction of the United
18 States that is (i) a felony or (ii) a misdemeanor directly
19 related to the practice of the profession, within the last
20 5 years;

21 (2) it determines that within the last 5 years the
22 applicant has had a license or permit related to the
23 practice of nursing revoked, suspended, or placed on
24 probation by another jurisdiction, if at least one of the
25 grounds for revoking, suspending, or placing on probation
26 is the same or substantially equivalent to grounds in
27 Illinois; or

28 (3) it determines that it intends to deny licensure by
29 endorsement.

30 A temporary license shall expire 6 months from the date of
31 issuance. Further renewal may be granted by the Department in
32 hardship cases, as defined by rule and upon approval of the
33 Director. However, a temporary license shall automatically
34 expire upon issuance of the Illinois license or upon
35 notification that the Department intends to deny licensure,
36 whichever occurs first.

1 (i) Applicants have 3 years from the date of application to
2 complete the application process. If the process has not been
3 completed within 3 years from the date of application, the
4 application shall be denied, the fee forfeited, and the
5 applicant must reapply and meet the requirements in effect at
6 the time of reapplication.

7 (j) A practical nurse licensed by a party state under the
8 Nurse Licensure Compact is granted the privilege to practice
9 practical nursing in this State. A registered nurse licensed by
10 a party state under the Nurse Licensure Compact is granted the
11 privilege to practice registered nursing in this State. A
12 practical nurse or registered nurse who has been granted the
13 privilege to practice nursing in this State under this
14 subsection, shall notify the Department, prior to commencing
15 employment in this State as a practical or registered nurse, of
16 the identity and location of the nurse's prospective employer.
17 A practical nurse or registered nurse who has been granted the
18 privilege to practice nursing in this State under this
19 subsection is subject to the schedule of fees authorized under
20 Section 20-35 and the criminal background check required under
21 Section 5-23 of this Act, provided that the practical or
22 registered nurse may exercise her privilege to practice pending
23 completion of the criminal background check.

24 (Source: P.A. 92-39, eff. 6-29-01; 92-744, eff. 7-25-02;
25 revised 2-17-03.)

26 ARTICLE 99

27 Section 99-5. Effective date. This Act takes effect upon
28 becoming law.