

# 94TH GENERAL ASSEMBLY State of Illinois 2005 and 2006 HB3826

Introduced 2/25/2005, by Rep. Aaron Schock - David R. Leitch - Patricia R. Bellock - Sidney H. Mathias

#### 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. Amends the Nursing and Advanced Practice Nursing Act to make changes relating to the purposes of the Compact. Provides that the Department of Financial and Professional Regulation shall adopt any rules necessary for the implementation of this Act. 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 Secretary of Financial and 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. Effective immediately.

LRB094 09526 RAS 39777 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning regulation.

# Be it enacted by the People of the State of Illinois, represented in the General Assembly:

Z	4	ARTICLE	5

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

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

# ARTICLE I. Findings and Declaration of Purpose

- (a) The party states find that:
- (1) the health and safety of the public are affected by the degree of compliance with and the effectiveness of enforcement activities related to state nurse licensure laws;
- (2) violations of nurse licensure and other laws regulating the practice of nursing may result in injury or harm to the public;
- (3) the expanded mobility of nurses and the use of advanced communication technologies as part of our nation's healthcare delivery system require greater coordination and cooperation among states in the areas of nurse licensure and regulation;
- (4) new practice modalities and technology make compliance with individual state nurse licensure laws difficult and complex;
  - (5) the current system of duplicative licensure for

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- nurses practicing in multiple states is cumbersome and redundant to both nurses and states.
  - (b) The general purposes of this Compact are to:
  - (1) facilitate the states' responsibility to protect the public's health and safety;
    - (2) ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation;
    - (3) facilitate the exchange of information between party states in the areas of nurse regulation, investigation and adverse actions;
    - (4) promote compliance with the laws governing the practice of nursing in each jurisdiction;
    - (5) invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state 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.
  - (c) "Coordinated licensure information system" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of and controlled by state nurse licensing boards.
- 30 (d) "Current significant investigative information"
  31 means:
  - (1) investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by

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state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or

- (2) investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.
- (e) "Home state" means the party state which is the nurse's primary state of residence.
- (f) "Home state action" means any administrative, civil, equitable or criminal action permitted by the home state's laws which are imposed on a nurse by the home state's licensing board or other authority including actions against an individual's license such as: revocation, suspension, probation or any other action which affects a nurse's authorization to practice.
- 17 (g) "Licensing board" means a party state's regulatory
  18 body responsible for issuing nurse licenses.
- 19 "Multistate licensure privilege" means 20 official authority from a remote state permitting the practice of nursing as either a registered nurse or a 21 22 practical/vocational nurse in such party state. All party 23 states have the authority, in accordance with existing state due process law, to take actions against the nurse's privilege 24 25 such as: revocation, suspension, probation or any other action 26 which affects a nurse's authorization to practice.
- 27 (i) "Nurse" means a registered nurse or licensed 28 practical/vocational nurse, as those terms are defined by each 29 party's state practice laws.
- 30 (j) "Party state" means any state that has adopted this 31 Compact.
- 32 (k) "Remote state" means a party state, other than the 33 home state,
- 34 (1) where the patient is located at the time nursing 35 care is provided, or,
- 36 (2) in the case of the practice of nursing not

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involving a patient, in such party state where the recipient of nursing practice is located.

- (1) "Remote state action" means
- (1) any administrative, civil, equitable or criminal action permitted by a remote state's laws which are imposed on a nurse by the remote state's licensing board or other authority including actions against an individual's multistate licensure privilege to practice in the remote state, and
- (2) cease and desist and other injunctive or equitable orders issued by remote states or the licensing boards thereof.
  - (m) "State" means a state, territory, or possession of the United States, the District of Columbia or the Commonwealth of Puerto Rico.
  - (n) "State practice laws" means those individual party's state laws and regulations that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. "State practice laws" does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

#### ARTICLE III. General Provisions and Jurisdiction

(a) A license to practice registered nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in such party state. A license to practice licensed practical/vocational nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate privilege licensure to practice as а licensed practical/vocational nurse in such party state. In order to obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as

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well as all other applicable state laws.

- (b) Party states may, in accordance with state due process laws, limit or revoke the multistate licensure privilege of any nurse to practice in their state and may take any other actions under their applicable state laws necessary to protect the health and safety of their citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.
- (c) Every nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but shall include all nursing practice as defined by the state practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing board and the courts, as well as the laws, in that party state.
- This Compact does not affect additional requirements imposed by states for advanced practice registered nursing. multistate However, а licensure privilege to registered nursing granted by a party state shall be recognized by other party states as a license to practice registered nursing if one is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.
- (e) Individuals not residing in a party state shall continue to be able to apply for nurse licensure as provided for under the laws of each party state. However, the license granted to these individuals will not be recognized as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.
- 33 ARTICLE IV. Applications for Licensure in a Party State
  - (a) Upon application for a license, the licensing board in

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- 1 a party state shall ascertain, through the coordinated
- licensure information system, whether the applicant has ever
- 3 held, or is the holder of, a license issued by any other state,
- 4 whether there are any restrictions on the multistate licensure
- 5 privilege, and whether any other adverse action by any state
- 6 has been taken against the license.
- 7 (b) A nurse in a party state shall hold licensure in only one party state at a time, issued by the home state.
  - (c) A nurse who intends to change primary state of residence may apply for licensure in the new home state in advance of such change. However, new licenses will not be issued by a party state until after a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.
    - (d) When a nurse changes primary state of residence by:
    - (1) moving between two party states, and obtains a license from the new home state, the license from the former home state is no longer valid;
    - (2) moving from a non-party state to a party state, and obtains a license from the new home state, the individual state license issued by the non-party state is not affected and will remain in full force if so provided by the laws of the non-party state;
    - (3) moving from a party state to a non-party state, the license issued by the prior home state converts to an individual state license, valid only in the former home state, without the multistate licensure privilege to practice in other party states.

# 29 ARTICLE V. Adverse Actions

- In addition to the General Provisions described in Article III, the following provisions apply:
- 32 (a) The licensing board of a remote state shall promptly 33 report to the administrator of the coordinated licensure 34 information system any remote state actions including the

- factual and legal basis for such action, if known. The licensing board of a remote state shall also promptly report any significant current investigative information yet to result in a remote state action. The administrator of the coordinated licensure information system shall promptly notify the home state of any such reports.
  - (b) The licensing board of a party state shall have the authority to complete any pending investigations for a nurse who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate action(s), and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions.
  - (c) A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the license issued by the home state.
  - (d) For purposes of imposing adverse action, the licensing board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such conduct had occurred within the home state. In so doing, it shall apply its own state laws to determine appropriate action.
  - (e) The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action.
  - (f) Nothing in this Compact shall override a party state's decision that participation in an alternative program may be used in lieu of licensure action and that such participation shall remain non-public if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior

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- 1 authorization from such other party state.
- 2 ARTICLE VI. Additional Authorities Invested in Party State
- 3 Nurse Licensing Boards
- Notwithstanding any other powers, party state nurse licensing boards shall have the authority to:
  - (a) if otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;
    - (b) issue subpoenas for both hearings and investigations which require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses, and/or the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state where the witnesses and/or evidence are located.
    - (c) issue cease and desist orders to limit or revoke a nurse's authority to practice in their state;
- 24 (d) promulgate uniform rules and regulations as provided 25 for in Article VIII(c).

# 26 ARTICLE VII. Coordinated Licensure Information System

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

enforcement efforts.

- (b) Notwithstanding any other provision of law, all party states' licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials, to the coordinated licensure information system.
- (c) Current significant investigative information shall be transmitted through the coordinated licensure information system only to party state licensing boards.
- (d) Notwithstanding any other provision of law, all party states' licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with non-party states or disclosed to other entities or individuals without the express permission of the contributing state.
- (e) Any personally identifiable information obtained by a party states' licensing board from the coordinated licensure information system may not be shared with non-party states or disclosed to other entities or individuals except to the extent permitted by the laws of the party state contributing the information.
- (f) Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information, shall also be expunged from the coordinated licensure information system.
- (g) The Compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection and exchange of information under this Compact.

ARTICLE VIII. Compact Administration and Interchange of Information

- (a) The head of the nurse licensing board, or his/her designee, of each party state shall be the administrator of this Compact for his/her state.
  - (b) The Compact administrator of each party state shall furnish to the Compact administrator of each other party state any information and documents including, but not limited to, a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this Compact.
- (c) Compact administrators shall have the authority to develop uniform rules to facilitate and coordinate implementation of this Compact. These uniform rules shall be adopted by party states, under the authority invested under Article VI (d).

# ARTICLE IX. Immunity

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

# ARTICLE X. Entry into Force, Withdrawal and Amendment

- effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this Compact by enacting a statute repealing the same, but no such withdrawal shall take effect until six months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.
- (b) No withdrawal shall affect the validity or

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- applicability by the licensing boards of states remaining party to the Compact of any report of adverse action occurring prior to the withdrawal.
  - (c) Nothing contained in this Compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this Compact.
  - (d) This Compact may be amended by the party states. No amendment to this Compact shall become effective and binding upon the party states unless and until it is enacted into the laws of all party states.

# ARTICLE XI. Construction and Severability

- 14 (a) This Compact shall be liberally construed so as to 15 effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or 16 17 provision of this Compact is declared to be contrary to the 18 constitution of any party state or of the United States or the applicability thereof to any government, agency, person or 19 circumstance is held invalid, the validity of the remainder of 20 21 this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. 22 23 If this Compact shall be held contrary to the constitution of 24 any state party thereto, the Compact shall remain in full force 25 and effect as to the remaining party states and in full force 26 and effect as to the party state affected as to all severable 27 matters.
  - (b) In the event party states find a need for settling disputes arising under this Compact:
    - (1) The party states may submit the issues in dispute to an arbitration panel which will be comprised of an individual appointed by the Compact administrator in the home state; an individual appointed by the Compact administrator in the remote state(s) involved; and an

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1 individual mutually agreed upon by the Compact administrators of all the party states involved in the 2 3 dispute.

The decision of a majority of the arbitrators (2) 5 shall be final and binding.

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

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

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

Section 5-25. Statutory obligations. This Compact is

- 2 relieve employers from complying with statutorily imposed
- 3 obligations.
- 4 Section 5-30. State labor laws. This Compact does not
- 5 supersede existing State labor laws.

6 ARTICLE 10

- 7 Section 10-1. Short title. This Article may be cited as the
- 8 Advanced Practice Registered Nurse Compact Act. In this
- 9 Article, any reference to this Act means this Article.
- 10 Section 10-5. Ratification and approval of compact. The
- 11 advanced practice registered nurse compact is hereby enacted
- 12 into law and entered into on behalf of this State with any
- 13 state that legally joins therein in substantially the following
- 14 form:
- 15 ARTICLE I. Findings and Declaration of Purpose
- 16 (a) The party states find that:
- 17 (1) The health and safety of the public are affected
- by the degree of compliance with APRN licensure/authority
- 19 to practice requirements and the effectiveness of
- 20 enforcement activities related to state APRN
- 21 licensure/authority to practice laws;
- 22 (2) Violations of APRN licensure/authority to
- practice and other laws regulating the practice of nursing
- 24 may 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
- coordination and cooperation among states in the areas of
- APRN licensure/authority to practice and regulation;
- 30 (4) New practice modalities and technology make

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

- (5) The current system of duplicative APRN licensure/authority to practice for APRNs practicing in multiple states is cumbersome and redundant to both APRNs and states;
- (6) Uniformity of APRN requirements throughout the states promotes public safety and public health benefits; and
- (7) Access to APRN services increases the public's access to health care, particularly in rural and underserved areas.
- (b) The general purposes of this Compact are to:
- (1) Facilitate the states' responsibilities to protect the public's health and safety;
- (2) Ensure and encourage the cooperation of party states in the areas of APRN licensure/authority to practice and regulation including promotion of uniform licensure requirements;
- (3) Facilitate the exchange of information between party states in the areas of APRN regulation, investigation and adverse actions;
- (4) Promote compliance with the laws governing APRN practice in each jurisdiction; and
- (5) Invest all party states with the authority to hold an APRN accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.

# 30 ARTICLE II. Definitions

# 31 As used in this Compact:

32 (a) "Advanced Practice Registered Nurse" or "APRN" means 33 a Nurse Anesthetist; Nurse Practitioner; Nurse Midwife; or 34 Clinical Nurse Specialist to the extent a party state licenses

- or grants authority to practice in that APRN role and title.
- 2 (b) "Adverse Action" means a home or remote state disciplinary action.
- 4 (c) "Alternative program" means a voluntary,
  5 non-disciplinary monitoring program approved by a licensing
  6 board.
  - (d) "APRN Licensure/Authority to Practice" means the regulatory mechanism used by a party state to grant legal authority to practice as an APRN.
- 10 (e) "APRN Uniform Licensure/Authority to Practice
  11 Requirements" means those agreed upon minimum uniform
  12 licensure, education and examination requirements adopted by
  13 licensing boards for the recognized APRN role and title.
  - (f) "Coordinated licensure information system" means an integrated process for collecting, storing and sharing information on APRN licensure/authority to practice and enforcement activities related to APRN licensure/authority to practice laws, which is administered by a non-profit organization composed of and controlled by state licensing boards.
- 21 (g) "Current significant investigative information" 22 means:
  - (1) Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the APRN to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
  - (2) Investigative information that indicates that the APRN represents an immediate threat to public health and safety regardless of whether the APRN has been notified and had an opportunity to respond.
  - (h) "Home state" means the party state that is the APRN's primary state of residence.
    - (i) "Home state action" means any administrative, civil, equitable or criminal action permitted by the home state's laws 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
- 6 body responsible for issuing APRN licensure/authority to
- 7 practice.
- 8 (k) "Multistate advanced practice privilege" means
- 9 current, authority from a remote state permitting an APRN to
- 10 practice in that state in the same role and title as the APRN
- is licensed/authorized to practice in the home state to the
- 12 extent that the remote state laws recognize such APRN role and
- 13 title. A remote state has the authority, in accordance with
- 14 existing state due process laws, to take actions against the
- 15 APRN's privilege, including revocation, suspension, probation,
- or any other action that affects an APRN's multistate privilege
- 17 to practice.
- 18 (1) "Party state" means any state that has adopted this
- 19 Compact.
- 20 (m) "Prescriptive authority" means the legal authority to
- 21 prescribe medications and devices as defined by party state
- laws.
- 23 (n) "Remote state" means a party state, other than the
- home state,
- 25 (1) Where the patient is located at the time APRN care
- is provided, or,
- 27 (2) In the case of APRN practice not involving a
- patient, in such party state where the recipient of APRN
- 29 practice is located.
- 30 (o) "Remote state action" means
- 31 (1) Any administrative, civil, equitable or criminal
- 32 action permitted by a remote state's laws which are imposed
- on an APRN by the remote state's licensing board or other
- 34 authority including actions against an individual's
- 35 multistate advanced practice privilege in the remote
- 36 state, and

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- 1 (2) Cease and desist and other injunctive or 2 equitable orders issued by remote states or the licensing 3 boards thereof.
  - (p) "State" means a state, territory, or possession of the United States.
  - (q) "State practice laws" means a party state's laws and regulations that govern APRN practice, define the scope of advanced nursing practice including prescriptive authority, and create the methods and grounds for imposing discipline. State practice laws do not include the requirements necessary to obtain and retain APRN licensure/authority to practice as an APRN, except for qualifications or requirements of the home state.
- 14 (r) "Unencumbered" means that a state has no current
  15 disciplinary action against an APRN's license/authority to
  16 practice.

# ARTICLE III. 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.
  - (b) No state shall enter the APRN Compact until the state adopts, at a minimum, the APRN Uniform Licensure/Authority to Practice Requirements for each APRN role and title recognized by the state seeking to enter the APRN Compact.
- 26 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 privilege to the extent that the role and title are recognized 29 30 each party state. To obtain or retain APRN licensure/authority to practice as an APRN, an applicant must 31 meet the home state's qualifications for authority or renewal 32 of authority as well as all other applicable state laws. 33
  - (d) The APRN multistate advanced practice privilege does

- not include prescriptive authority, and does not affect any requirements imposed by states to grant to an APRN initial and continuing prescriptive authority according to state practice laws. However, a party state may grant prescriptive authority to an individual on the basis of a multistate advanced practice privilege to the extent permitted by state practice laws.
  - (e) A party state may, in accordance with state due process laws, limit or revoke the multistate advanced practice privilege in the party state and may take any other necessary actions under the party state's applicable laws to protect the health and safety of the party state's citizens. If a party state takes action, the party state shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.
  - (f) An APRN practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is provided. The APRN practice includes patient care and all advanced nursing practice defined by the party state's practice laws. The APRN practice will subject an APRN to the jurisdiction of the licensing board, the courts, and the laws of the party state.
  - (g) Individuals not residing in a party state may apply for APRN licensure/authority to practice as an APRN under the laws of a party state. However, the authority to practice granted to these individuals will not be recognized as granting the privilege to practice as an APRN in any other party state unless explicitly agreed to by that party state.

# 30 ARTICLE IV. Applications for APRN Licensure/Authority to 31 Practice in a Party State

(a) Once an application for APRN licensure/authority to practice is submitted, a party state shall ascertain, through the Coordinated Licensure Information System, whether:

- 1 (1) The applicant has held or is the holder of a 2 nursing license/authority to practice issued by another 3 state;
  - (2) The applicant has had a history of previous disciplinary action by any state;
  - (3) An encumbrance exists on any license/authority to practice; and
  - (4) Any other adverse action by any other state has been taken against a license/authority to practice.

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

- (b) An APRN in a party state shall hold APRN licensure/authority to practice in only one party state at a time, issued by the home state.
- (c) An APRN who intends to change primary state of residence may apply for APRN licensure/authority to practice in the new home state in advance of such change. However, new licensure/authority to practice will not be issued by a party state until after an APRN provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.
  - (d) When an APRN changes primary state of residence by:
  - (1) Moving between two party states, and obtains APRN licensure/authority to practice from the new home state, the APRN licensure/authority to practice from the former home state is no longer valid;
  - (2) Moving from a non-party state to a party state, and obtains APRN licensure/authority to practice from the new home state, the individual state license issued by the nonparty state is not affected and will remain in full force if so provided by the laws of the non-party state;
  - (3) Moving from a party state to a non-party state, the APRN licensure/authority to practice issued by the prior home state converts to an individual state license, valid only in the former home state, without the multistate licensure privilege to practice in other party states.

# ARTICLE V. Adverse Reactions

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

- (a) The licensing board of a remote state shall promptly report to the administrator of the coordinated licensure information system any remote state actions including the factual and legal basis for such action, if known. The licensing board of a remote state shall also promptly report any significant current investigative information yet to result in a remote state action. The administrator of the coordinated licensure information system shall promptly notify the home state of any such reports.
- (b) The licensing board of a party state shall have the authority to complete any pending investigations for an APRN who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate action(s), and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions.
- (c) A remote state may take adverse action affecting the multistate advanced practice privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the APRN licensure/authority to practice issued by the home state.
- (d) For purposes of imposing adverse action, the licensing board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such conduct had occurred within the home state. In so doing, it shall apply its own state laws to determine appropriate action.
- 33 (e) The home state may take adverse action based on the 34 factual findings of the remote state, so long as each state

follows its own procedures for imposing such adverse action.

- (f) Nothing in this Compact shall override a party state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain non-public if required by the party state's laws. Party states must require APRNs who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.
- (g) All home state licensing board disciplinary orders, agreed or otherwise, which limit the scope of the APRN's practice or require monitoring of the APRN as a condition of the order shall include the requirements that the APRN will limit her or his practice to the home state during the pendency of the order. This requirement may allow the APRN to practice in other party states with prior written authorization from both the home state and party state licensing boards.

# 18 ARTICLE VI. Additional Authorities Invested in Party State 19 Licensing Boards

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

- (a) If otherwise permitted by state law, recover from the affected APRN the costs of investigations and disposition of cases resulting from any adverse action taken against that APRN;
- (b) Issue subpoenas for both hearings and investigations, which require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a licensing board in a party state for the attendance and testimony of witnesses, and/or the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay

- 1 any witness fees, travel expenses, mileage and other fees
- 2 required by the service statutes of the state where the
- 3 witnesses and/or evidence are located;
- 4 (c) Issue cease and desist orders to limit or revoke an
- 5 APRN's privilege or licensure/authority to practice in their
- 6 state; and
- 7 (d) Promulgate uniform rules and regulations as provided
- 8 for in Article VIII(c).

#### 9 ARTICLE VII. Coordinated Licensure Information System

- 10 All party states shall participate in a cooperative effort to create a coordinated database of all APRNs. This 11 include information the 12 system will  $\circ$ n APRN licensure/authority to practice and disciplinary history of 13 14 each APRN, as contributed by party states, to assist in the
- 15 coordination of APRN licensure/authority to practice and
- 16 enforcement efforts.
- 17 (b) Notwithstanding any other provision of law, all party
- 18 states' licensing boards shall promptly report adverse
- 19 actions, actions against multistate advanced practice
- 20 privileges, any current significant investigative information
- 21 yet to result in adverse action, denials of applications, and
- 22 the reasons for such denials, to the coordinated licensure
- 23 information system.
- 24 (c) Current significant investigative information shall
- 25 be transmitted through the coordinated licensure information
- 26 system only to party state licensing boards.
- 27 (d) Notwithstanding any other provision of law, all party
- 28 states' licensing boards contributing information to the
- 29 coordinated licensure information system may designate
- 30 information that may not be shared with non-party states or
- 31 disclosed to other entities or individuals without the express
- 32 permission of the contributing state.
- 33 (e) Any personally identifiable information obtained by a
- 34 party states' licensing board from the coordinated licensure

- 1 information system may not be shared with non-party states or
- 2 disclosed to other entities or individuals except to the extent
- 3 permitted by the laws of the party state contributing the
- 4 information.
- 5 (f) Any information contributed to the coordinated
- 6 licensure information system that is subsequently required to
- 7 be expunged by the laws of the party state contributing that
- 8 information, shall also be expunded from the coordinated
- 9 licensure information system.
- 10 (g) The Compact administrators, acting jointly with each
- 11 other and in consultation with the administrator of the
- 12 coordinated licensure information system, shall formulate
- 13 necessary and proper procedures for the identification,
- 14 collection and exchange of information under this Compact.
- 15 ARTICLE VIII. Compact Administration and Interchange of
- 16 Information
- 17 (a) The head of the licensing board, or his/her designee,
- of each party state shall be the administrator of this Compact
- 19 for his/her state.
- 20 (b) The Compact administrator of each party state shall
- 21 furnish to the Compact administrator of each other party state
- 22 any information and documents including, but not limited to, a
- 23 uniform data set of investigations, identifying information,
- 24 licensure data, and disclosable alternative program
- 25 participation information to facilitate the administration of
- this Compact.
- 27 (c) Compact administrators shall have the authority to
- 28 develop uniform rules to facilitate and coordinate
- 29 implementation of this Compact. These uniform rules shall be
- 30 adopted by party states, under the authority invested under
- 31 Article VI (d).

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

# ARTICLE X. Entry into Force, Withdrawal and Amendment

- (a) This Compact shall enter into force and become effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this Compact by enacting a statute repealing the same, but no such withdrawal shall take effect until six months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.
- 16 (b) No withdrawal shall affect the validity or 17 applicability by the licensing boards of states remaining party 18 to the Compact of any report of adverse action occurring prior 19 to the withdrawal.
  - (c) Nothing contained in this Compact shall be construed to invalidate or prevent any APRN licensure/authority to practice agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this Compact.
  - (d) This Compact may be amended by the party states. No amendment to this Compact shall become effective and binding upon the party states unless and until it is enacted into the laws of all party states.

# ARTICLE XI. Construction and Severability

(a) This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or

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provision of this Compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.

- (b) In the event party states find a need for settling disputes arising under this Compact:
  - The party states may submit the issues in dispute (1)to an arbitration panel which will be comprised of an individual appointed by the Compact administrator in the individual appointed by home state; an the Compact administrator in the remote state(s) involved; and an upon by mutually agreed the administrators of all the party states involved in the dispute.
- (2) The decision of a majority of the arbitrators shall be final and binding.
- Section 10-10. Compact administrator; expenses.
- (a) The Secretary of Financial and Professional Regulation shall serve as the compact administrator for this State and any expenses he or she incurs in so serving shall be paid from the appropriation for the ordinary and contingent expenses of the Department of Financial and Professional Regulation.
- (b) The Secretary shall terminate Illinois' participation in the compact if the APRN Uniform Licensure/Authority to Practice Requirements are substantially changed after the effective date of this Act. A substantial change is anything that significantly alters the individual professional qualifications for participation in the compact such as no

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1 requiring either certification by a longer national 2 accreditation body in the APRN's specialty appropriate to 3 educational preparation or completion of a graduate level APRN educational program accredited by a national accreditation 4 5 body. If the Secretary terminates Illinois' participation in 6 the compact, then the Secretary shall provide all APRNs practicing in Illinois under the compact at the time 60 days 7

written notice of the termination.(c) All APRNs practicing in I

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

16 ARTICLE 90

- Section 90-5. The Nursing and Advanced Practice Nursing Act is amended by changing Sections 5-10, 5-15, and 10-30 as follows:
- 20 (225 ILCS 65/5-10)
- 21 (Section scheduled to be repealed on January 1, 2008)
- Sec. 5-10. Definitions. Each of the following terms, when used in this Act, shall have the meaning ascribed to it in this Section, except where the context clearly indicates otherwise:
- 25 (a) "Department" means the Department of Professional 26 Regulation.
- 27 (b) "Director" means the Director of Professional Regulation.
- 29 (c) "Board" means the Board of Nursing appointed by the 30 Director.
- 31 (d) "Academic year" means the customary annual schedule 32 of courses at a college, university, or approved school, 33 customarily regarded as the school year as distinguished from

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- 1 the calendar year.
- "Approved program of professional nursing education" (e) and "approved program of practical nursing education" are programs of professional or practical nursing, respectively, 5 approved by the Department under the provisions of this Act.
  - "Nursing Act Coordinator" means registered a professional nurse appointed by the Director to carry out the administrative policies of the Department.
  - (g) "Assistant Nursing Act Coordinator" а registered professional nurse appointed by the Director to assist in carrying out the administrative policies of the Department.
    - "Registered" is the equivalent of "licensed". (h)
  - "Practical nurse" or "licensed practical nurse" means a person who is licensed as a practical nurse under this Act or holds the privilege to practice under this Act and practices practical nursing as defined in paragraph (j) of this Section. Only a practical nurse licensed or granted the privilege to practice under this Act is entitled to use the title "licensed practical nurse" and the abbreviation "L.P.N.".
  - "Practical nursing" means the performance of nursing acts requiring the basic nursing knowledge, judgement, and skill acquired by means of completion of an approved practical nursing education program. Practical nursing includes assisting in the nursing process as delegated by and under the direction of a registered professional nurse. The practical nurse may work under the direction of a licensed physician, dentist, podiatrist, or other health care professional determined by the Department.
  - "Registered Nurse" or "Registered Professional Nurse" means a person who is licensed as a professional nurse under this Act or holds the privilege to practice under this Act and practices nursing as defined in paragraph (1) of this Section. Only a registered nurse licensed or granted the privilege to practice under this Act is entitled to use the titles "registered nurse" and "registered professional nurse" and the

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abbreviation, "R.N.".

- "Registered professional nursing practice" includes all nursing specialities and means the performance of any nursing act based upon professional knowledge, judgment, and skills acquired by means of completion of an approved registered professional nursing education program. Α professional registered nurse provides nursing care emphasizing the importance of the whole and the interdependence of its parts through the nursing process to individuals, groups, families, or communities, that includes but is not limited to: (1) the assessment of healthcare needs, nursing diagnosis, planning, implementation, and nursing evaluation; (2) the promotion, maintenance, and restoration of health; (3) counseling, patient education, health education, and patient advocacy; (4) the administration of medications and treatments as prescribed by a physician licensed to practice medicine in all of its branches, a licensed dentist, a licensed podiatrist, or a licensed optometrist or as prescribed by a physician assistant in accordance with written guidelines required under the Physician Assistant Practice Act of 1987 or by an advanced practice nurse in accordance with a written collaborative agreement required under the Nursing and Advanced Practice Nursing Act; (5) the coordination and management of the nursing plan of care; (6) the delegation to and supervision of individuals who assist the registered professional nurse implementing the plan of care; and (7) teaching and supervision of nursing students. The foregoing shall not be deemed to include those acts of medical diagnosis or prescription of therapeutic or corrective measures that are properly performed only by physicians licensed in the State of Illinois.
  - (m) "Current nursing practice update course" means a planned nursing education curriculum approved by the Department consisting of activities that have educational objectives, instructional methods, content or subject matter, clinical practice, and evaluation methods, related to basic review and updating content and specifically planned for those

- nurses previously licensed in the United States or its territories and preparing for reentry into nursing practice.
- 3 "Professional assistance program for nurses" means a 4 professional assistance program that meets criteria 5 established by the Board of Nursing and approved by the 6 Director, which provides a non-disciplinary treatment approach for nurses licensed under this Act whose ability to practice is 7 compromised by alcohol or chemical substance addiction. 8
- 9 <u>(o) "Privilege to practice" means the authorization to</u>
  10 <u>practice as a practical nurse or a registered nurse in the</u>
  11 State under the Nurse Licensure Compact.
- 12 <u>(p) "License" or "licensed" means the permission granted</u>
  13 <u>a person to practice nursing under this Act, including the</u>
  14 privilege to practice.
- 15 <u>(q) "Licensee" means a person who has been issued a</u>
  16 <u>license to practice nursing in the state or who holds the</u>
  17 <u>privilege to practice nursing in this State.</u>
- 18 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98; 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)
- 20 (225 ILCS 65/5-15)
- 21 (Section scheduled to be repealed on January 1, 2008)
- 22 Sec. 5-15. Policy; application of Act. For the protection 23 of life and the promotion of health, and the prevention of illness and communicable diseases, any person practicing or 24 25 offering to practice professional and practical nursing in 26 Illinois shall submit evidence that he or she is qualified to 27 practice, and shall be licensed or hold the privilege to practice as provided under this Act. No person shall practice 28 29 or offer to practice professional or practical nursing in 30 Illinois or use any title, sign, card or device to indicate 31 that such a person is practicing professional or practical nursing unless such person has been licensed or holds the 32 33 privilege to practice under the provisions of this Act.
- 34 This Act does not prohibit the following:
- 35 (a) The practice of nursing in Federal employment in

the discharge of the employee's duties by a person who is employed by the United States government or any bureau, division or agency thereof and is a legally qualified and licensed nurse of another state or territory and not in conflict with Sections 10-5, 10-30, and 10-45 of this Act.

- (b) Nursing that is included in their program of study by students enrolled in programs of nursing or in current nurse practice update courses approved by the Department.
- (c) The furnishing of nursing assistance in an emergency.
- (d) The practice of nursing by a nurse who holds an active license in another state when providing services to patients in Illinois during a bonafide emergency or in immediate preparation for or during interstate transit.
- (e) The incidental care of the sick by members of the family, domestic servants or housekeepers, or care of the sick where treatment is by prayer or spiritual means.
- (f) Persons from being employed as nursing aides, attendants, orderlies, and other auxiliary workers in private homes, long term care facilities, nurseries, hospitals or other institutions.
- (g) The practice of practical nursing by one who has applied in writing to the Department in form and substance satisfactory to the Department, for a license as a licensed practical nurse and who has complied with all the provisions under Section 10-30, except the passing of an examination to be eligible to receive such license, until: the decision of the Department that the applicant has failed to pass the next available examination authorized by the Department or has failed, without an approved excuse, to take the next available examination authorized by the Department or until the withdrawal of the application, but not to exceed 3 months. An applicant practicing practical nursing under this Section who passes the examination, however, may continue to practice under this Section until such time as he or she receives his or her license to

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practice or until the Department notifies him or her that the license has been denied. No applicant for licensure practicing under the provisions of this paragraph shall practice practical nursing except under the direct supervision of a registered professional nurse licensed under this Act or a licensed physician, dentist or podiatrist. In no instance shall any such applicant practice or be employed in any supervisory capacity.

- (h) The practice of practical nursing by one who is a licensed practical nurse under the laws of another U.S. jurisdiction and has applied in writing to the Department, in form and substance satisfactory to the Department, for a license as a licensed practical nurse and who is qualified to receive such license under Section 10-30, until (1) the expiration of 6 months after the filing of such written application, (2) the withdrawal of such application, or (3) the denial of such application by the Department.
- (i) The practice of professional nursing by one who has applied in writing to the Department in form and substance satisfactory to the Department for a license as registered professional nurse and has complied with all the provisions under Section 10-30 except the passing of an examination to be eligible to receive such license, until the decision of the Department that the applicant has failed to pass the next available examination authorized by the Department or has failed, without an approved excuse, to take the next available examination authorized by the Department or until the withdrawal of the application, but to exceed 3 months. An applicant practicing professional nursing under this Section who passes the examination, however, may continue to practice under this Section until such time as he or she receives his or her license to practice or until the Department notifies him or her that the license has been denied. No applicant for provisions licensure practicing under the of paragraph shall practice professional nursing except under

the direct supervision of a registered professional nurse licensed under this Act. In no instance shall any such applicant practice or be employed in any supervisory capacity.

- (j) The practice of professional nursing by one who is a registered professional nurse under the laws of another state, territory of the United States or country and has applied in writing to the Department, in form and substance satisfactory to the Department, for a license as a registered professional nurse and who is qualified to receive such license under Section 10-30, until (1) the expiration of 6 months after the filing of such written application, (2) the withdrawal of such application, or (3) the denial of such application by the Department.
- (k) The practice of professional nursing that is included in a program of study by one who is a registered professional nurse under the laws of another state or territory of the United States or foreign country, territory or province and who is enrolled in a graduate nursing education program or a program for the completion of a baccalaureate nursing degree in this State, which includes clinical supervision by faculty as determined by the educational institution offering the program and the health care organization where the practice of nursing occurs. The educational institution will file with the Department each academic term a list of the names and origin of license of all professional nurses practicing nursing as part of their programs under this provision.
- (1) Any person licensed in this State under any other Act from engaging in the practice for which she or he is licensed.
- (m) Delegation to authorized direct care staff trained under Section 15.4 of the Mental Health and Developmental Disabilities Administrative Act.
- An applicant for license practicing under the exceptions set forth in subparagraphs (g), (h), (i), and (j) of this

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- 1 Section shall use the title R.N. Lic. Pend. or L.P.N. Lic.
- 2 Pend. respectively and no other.
- 3 (Source: P.A. 93-265, eff. 7-22-03.)
- 4 (225 ILCS 65/10-30)
- 5 (Section scheduled to be repealed on January 1, 2008)
- 6 Sec. 10-30. Qualifications for licensure.
- 7 (a) Each applicant who successfully meets the requirements 8 of this Section shall be entitled to licensure as a Registered 9 Nurse or Licensed Practical Nurse, whichever is applicable.
  - (b) An applicant for licensure by examination to practice as a registered nurse or licensed practical nurse shall:
    - (1) submit a completed written application, on forms provided by the Department and fees as established by the Department;
    - (2) for registered nurse licensure, have graduated from a professional nursing education program approved by the Department;
    - (2.5) for licensed practical nurse licensure, have graduated graduate from a practical nursing education program approved by the Department;
    - (3) have not violated the provisions of Section 10-45 of this Act. The Department may take into consideration any felony conviction of the applicant, but such a conviction shall not operate as an absolute bar to licensure;
      - (4) meet all other requirements as established by rule;
    - (5) pay, either to the Department or its designated testing service, a fee covering the cost of providing the examination. Failure to appear for the examination on the scheduled date at the time and place specified after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service shall result in the forfeiture of the examination fee.
  - If an applicant neglects, fails, or refuses to take an examination or fails to pass an examination for a license under

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this Act within 3 years after filing the application, the application shall be denied. However, the applicant may make a new application accompanied by the required fee and provide evidence of meeting the requirements in force at the time of the new application.

may take and applicant successfully complete An Department-approved examination in another jurisdiction. However, an applicant who has never been licensed previously in that jurisdiction utilizes а Department-approved examination and who has taken and failed to examination within 3 years after filing the application must submit proof of successful completion Department-authorized education nursing program or recompletion of an approved registered nursing program or licensed practical nursing program, as appropriate, prior to re-application.

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

- (c) An applicant for licensure by endorsement who is a registered professional nurse or a licensed practical nurse licensed by examination under the laws of another state or territory of the United States or a foreign country, jurisdiction, territory, or province shall:
  - (1) submit a completed written application, on forms supplied by the Department, and fees as established by the Department;
    - (2) for registered nurse licensure, have graduated from a professional nursing education program approved by the Department;
- (2.5) for licensed practical nurse licensure, have graduated from a practical nursing education program

approved by the Department;

- (3) submit verification of licensure status directly from the United States jurisdiction of licensure, if applicable, as defined by rule;
- (4) have passed the examination authorized by the Department;
  - (5) meet all other requirements as established by rule.
- (d) All applicants for registered nurse licensure pursuant to item (2) of subsection (b) and item (2) of subsection (c) of this Section who are graduates of nursing educational programs in a country other than the United States or its territories must submit to the Department certification of successful completion of the Commission of Graduates of Foreign Nursing Schools (CGFNS) examination. An applicant who is unable to provide appropriate documentation to satisfy CGFNS of her or his educational qualifications for the CGFNS examination shall be required to pass an examination to test competency in the English language, which shall be prescribed by the Department, if the applicant is determined by the Board to be educationally prepared in nursing. The Board shall make appropriate inquiry into the reasons for any adverse determination by CGFNS before making its own decision.

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

- (1) successful passage of the licensure examination authorized by the Department;
- (2) holds an active, unencumbered license in another state; and
- 33 (3) has been actively practicing for a minimum of 2 34 years in another state.
- 35 (e) (Blank).
- 36 (f) Pending the issuance of a license under subsection (c)

of this Section, the Department may grant an applicant a temporary license to practice nursing as a registered nurse or as a licensed practical nurse if the Department is satisfied that the applicant holds an active, unencumbered license in good standing in another jurisdiction. If the applicant holds more than one current active license, or one or more active temporary licenses from other jurisdictions, the Department shall not issue a temporary license until it is satisfied that each current active license held by the applicant is unencumbered. The temporary license, which shall be issued no later than 14 working days following receipt by the Department of an application for the temporary license, shall be granted upon the submission of the following to the Department:

- (1) a signed and completed application for licensure under subsection (a) of this Section as a registered nurse or a licensed practical nurse;
- (2) proof of a current, active license in at least one other jurisdiction and proof that each current active license or temporary license held by the applicant within the last 5 years is unencumbered;
- (3) a signed and completed application for a temporary license; and
  - (4) the required temporary license fee.
- (g) The Department may refuse to issue an applicant a temporary license authorized pursuant to this Section if, within 14 working days following its receipt of an application for a temporary license, the Department determines that:
  - (1) the applicant has been convicted of a crime under the laws of a jurisdiction of the United States: (i) which is a felony; or (ii) which is a misdemeanor directly related to the practice of the profession, within the last 5 years;
- (2) within the last 5 years the applicant has had a license or permit related to the practice of nursing revoked, suspended, or placed on probation by another jurisdiction, if at least one of the grounds for revoking,

suspending, or placing on probation is the same or substantially equivalent to grounds in Illinois; or

(3) it intends to deny licensure by endorsement.

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

- (h) The Department may revoke a temporary license issued pursuant to this Section if:
  - (1) it determines that the applicant has been convicted of a crime under the law of any jurisdiction of the United States that is (i) a felony or (ii) a misdemeanor directly related to the practice of the profession, within the last 5 years;
  - (2) it determines that within the last 5 years the applicant has had a license or permit related to the practice of nursing revoked, suspended, or placed on probation by another jurisdiction, if at least one of the grounds for revoking, suspending, or placing on probation is the same or substantially equivalent to grounds in Illinois; or
  - (3) it determines that it intends to deny licensure by endorsement.

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

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

1 (j) A practical nurse licensed by a party state under the 2 Nurse Licensure Compact is granted the privilege to practice practical nursing in this State. A registered nurse licensed by 3 a party state under the Nurse Licensure Compact is granted the 4 5 privilege to practice registered nursing in this State. A practical nurse or registered nurse who has been granted the 6 privilege to practice nursing in this State under this 7 subsection, shall notify the Department, prior to commencing 8 9 employment in this State as a practical or registered nurse, of the identity and location of the nurse's prospective employer. 10 11 A practical nurse or registered nurse who has been granted the privilege to practice nursing in this State under this 12 subsection is subject to the schedule of fees authorized under 13 Section 20-35 and the criminal background check required under 14 Section 5-23 of this Act, provided that the practical or 15 16 registered nurse may exercise her privilege to practice pending 17 completion of the criminal background check. (Source: P.A. 92-39, eff. 6-29-01; 92-744, eff. 7-25-02; 18 19 revised 2-17-03.)

20 ARTICLE 99

21 Section 99-5. Effective date. This Act takes effect upon 22 becoming law.