

1 AN ACT concerning regulation.

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

4 Section 5. The Regulatory Sunset Act is amended by changing
5 Section 4.18 and by adding Section 4.28 as follows:

6 (5 ILCS 80/4.18)

7 Sec. 4.18. Acts repealed January 1, 2008 and December 31,
8 2008.

9 (a) The following Acts are repealed on January 1, 2008:

10 The Acupuncture Practice Act.

11 The Clinical Social Work and Social Work Practice Act.

12 The Home Medical Equipment and Services Provider
13 License Act.

14 ~~The Nursing and Advanced Practice Nursing Act.~~

15 The Illinois Speech-Language Pathology and Audiology
16 Practice Act.

17 The Marriage and Family Therapy Licensing Act.

18 The Nursing Home Administrators Licensing and
19 Disciplinary Act.

20 The Pharmacy Practice Act of 1987.

21 The Physician Assistant Practice Act of 1987.

22 The Podiatric Medical Practice Act of 1987.

23 The Structural Pest Control Act.

1 (b) The following Acts are repealed on December 31, 2008:

2 The Medical Practice Act of 1987.

3 The Environmental Health Practitioner Licensing Act.

4 (Source: P.A. 94-754, eff. 5-10-06; 94-1075, eff. 12-29-06;
5 94-1085, eff. 1-19-07; revised 1-22-07.)

6 (5 ILCS 80/4.28 new)

7 Sec. 4.28. Act repealed on January 1, 2018. The following
8 Act is repealed on January 1, 2018:

9 The Nurse Practice Act.

10 Section 10. The Mental Health and Developmental
11 Disabilities Administrative Act is amended by changing Section
12 56 as follows:

13 (20 ILCS 1705/56) (from Ch. 91 1/2, par. 100-56)

14 Sec. 56. The Secretary, upon making a determination based
15 upon information in the possession of the Department, that
16 continuation in practice of a licensed health care professional
17 would constitute an immediate danger to the public, shall
18 submit a written communication to the Director of Professional
19 Regulation indicating such determination and additionally
20 providing a complete summary of the information upon which such
21 determination is based, and recommending that the Director of
22 Professional Regulation immediately suspend such person's
23 license. All relevant evidence, or copies thereof, in the

1 Department's possession may also be submitted in conjunction
2 with the written communication. A copy of such written
3 communication, which is exempt from the copying and inspection
4 provisions of the Freedom of Information Act, shall at the time
5 of submittal to the Director of Professional Regulation be
6 simultaneously mailed to the last known business address of
7 such licensed health care professional by certified or
8 registered postage, United States Mail, return receipt
9 requested. Any evidence, or copies thereof, which is submitted
10 in conjunction with the written communication is also exempt
11 from the copying and inspection provisions of the Freedom of
12 Information Act.

13 For the purposes of this Section, "licensed health care
14 professional" means any person licensed under the Illinois
15 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
16 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of
17 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
18 Practice Act of 1987, and the Illinois Optometric Practice Act
19 of 1987.

20 (Source: P.A. 89-507, eff. 7-1-97; 90-742, eff. 8-13-98.)

21 Section 15. The Department of Public Health Powers and
22 Duties Law of the Civil Administrative Code of Illinois is
23 amended by changing Sections 2310-140 and 2310-210 as follows:

24 (20 ILCS 2310/2310-140) (was 20 ILCS 2310/55.37a)

1 Sec. 2310-140. Recommending suspension of licensed health
2 care professional. The Director, upon making a determination
3 based upon information in the possession of the Department that
4 continuation in practice of a licensed health care professional
5 would constitute an immediate danger to the public, shall
6 submit a written communication to the Director of Professional
7 Regulation indicating that determination and additionally (i)
8 providing a complete summary of the information upon which the
9 determination is based and (ii) recommending that the Director
10 of Professional Regulation immediately suspend the person's
11 license. All relevant evidence, or copies thereof, in the
12 Department's possession may also be submitted in conjunction
13 with the written communication. A copy of the written
14 communication, which is exempt from the copying and inspection
15 provisions of the Freedom of Information Act, shall at the time
16 of submittal to the Director of Professional Regulation be
17 simultaneously mailed to the last known business address of the
18 licensed health care professional by certified or registered
19 postage, United States Mail, return receipt requested. Any
20 evidence, or copies thereof, that is submitted in conjunction
21 with the written communication is also exempt from the copying
22 and inspection provisions of the Freedom of Information Act.

23 For the purposes of this Section, "licensed health care
24 professional" means any person licensed under the Illinois
25 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
26 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of

1 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
2 Practice Act of 1987, or the Illinois Optometric Practice Act
3 of 1987.

4 (Source: P.A. 90-742, eff. 8-13-98; 91-239, eff. 1-1-00.)

5 (20 ILCS 2310/2310-210) (was 20 ILCS 2310/55.62a)

6 Sec. 2310-210. Advisory Panel on Minority Health.

7 (a) In this Section:

8 "Health profession" means any health profession regulated
9 under the laws of this State, including, without limitation,
10 professions regulated under the Illinois Athletic Trainers
11 Practice Act, the Clinical Psychologist Licensing Act, the
12 Clinical Social Work and Social Work Practice Act, the Illinois
13 Dental Practice Act, the Dietetic and Nutrition Services
14 Practice Act, the Marriage and Family Therapy Licensing Act,
15 the Medical Practice Act of 1987, the Naprapathic Practice Act,
16 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
17 ~~Act~~, the Illinois Occupational Therapy Practice Act, the
18 Illinois Optometric Practice Act of 1987, the Illinois Physical
19 Therapy Act, the Physician Assistant Practice Act of 1987, the
20 Podiatric Medical Practice Act of 1987, the Professional
21 Counselor and Clinical Professional Counselor Licensing Act,
22 and the Illinois Speech-Language Pathology and Audiology
23 Practice Act.

24 "Minority" has the same meaning as in Section 2310-215.

25 (b) The General Assembly finds as follows:

1 (1) The health status of individuals from ethnic and
2 racial minorities in this State is significantly lower than
3 the health status of the general population of the State.

4 (2) Minorities suffer disproportionately high rates of
5 cancer, stroke, heart disease, diabetes, sickle-cell
6 anemia, lupus, substance abuse, acquired immune deficiency
7 syndrome, other diseases and disorders, unintentional
8 injuries, and suicide.

9 (3) The incidence of infant mortality among minorities
10 is almost double that for the general population.

11 (4) Minorities suffer disproportionately from lack of
12 access to health care and poor living conditions.

13 (5) Minorities are under-represented in the health
14 care professions.

15 (6) Minority participation in the procurement policies
16 of the health care industry is lacking.

17 (7) Minority health professionals historically have
18 tended to practice in low-income areas and to serve
19 minorities.

20 (8) National experts on minority health report that
21 access to health care among minorities can be substantially
22 improved by increasing the number of minority health
23 professionals.

24 (9) Increasing the number of minorities serving on the
25 facilities of health professional schools is an important
26 factor in attracting minorities to pursue a career in

1 health professions.

2 (10) Retaining minority health professionals currently
3 practicing in this State and those receiving training and
4 education in this State is an important factor in
5 maintaining and increasing the number of minority health
6 professionals in Illinois.

7 (11) An Advisory Panel on Minority Health is necessary
8 to address the health issues affecting minorities in this
9 State.

10 (c) The General Assembly's intent is as follows:

11 (1) That all Illinoisans have access to health care.

12 (2) That the gap between the health status of
13 minorities and other Illinoisans be closed.

14 (3) That the health issues that disproportionately
15 affect minorities be addressed to improve the health status
16 of minorities.

17 (4) That the number of minorities in the health
18 professions be increased.

19 (d) The Advisory Panel on Minority Health is created. The
20 Advisory Panel shall consist of 25 members appointed by the
21 Director of Public Health. The members shall represent health
22 professions and the General Assembly.

23 (e) The Advisory Panel shall assist the Department in the
24 following manner:

25 (1) Examination of the following areas as they relate
26 to minority health:

- 1 (A) Access to health care.
 - 2 (B) Demographic factors.
 - 3 (C) Environmental factors.
 - 4 (D) Financing of health care.
 - 5 (E) Health behavior.
 - 6 (F) Health knowledge.
 - 7 (G) Utilization of quality care.
 - 8 (H) Minorities in health care professions.
- 9 (2) Development of monitoring, tracking, and reporting
10 mechanisms for programs and services with minority health
11 goals and objectives.
- 12 (3) Communication with local health departments,
13 community-based organizations, voluntary health
14 organizations, and other public and private organizations
15 statewide, on an ongoing basis, to learn more about their
16 services to minority communities, the health problems of
17 minority communities, and their ideas for improving
18 minority health.
- 19 (4) Promotion of communication among all State
20 agencies that provide services to minority populations.
- 21 (5) Building coalitions between the State and
22 leadership in minority communities.
- 23 (6) Encouragement of recruitment and retention of
24 minority health professionals.
- 25 (7) Improvement in methods for collecting and
26 reporting data on minority health.

1 (8) Improvement in accessibility to health and medical
2 care for minority populations in under-served rural and
3 urban areas.

4 (9) Reduction of communication barriers for
5 non-English speaking residents.

6 (10) Coordination of the development and dissemination
7 of culturally appropriate and sensitive education
8 material, public awareness messages, and health promotion
9 programs for minorities.

10 (f) On or before January 1, 1997 the Advisory Panel shall
11 submit an interim report to the Governor and the General
12 Assembly. The interim report shall include an update on the
13 Advisory Panel's progress in performing its functions under
14 this Section and shall include recommendations, including
15 recommendations for any necessary legislative changes.

16 On or before January 1, 1998 the Advisory Panel shall
17 submit a final report to the Governor and the General Assembly.
18 The final report shall include the following:

19 (1) An evaluation of the health status of minorities in
20 this State.

21 (2) An evaluation of minority access to health care in
22 this State.

23 (3) Recommendations for improving the health status of
24 minorities in this State.

25 (4) Recommendations for increasing minority access to
26 health care in this State.

1 (5) Recommendations for increasing minority
2 participation in the procurement policies of the health
3 care industry.

4 (6) Recommendations for increasing the number of
5 minority health professionals in this State.

6 (7) Recommendations that will ensure that the health
7 status of minorities in this State continues to be
8 addressed beyond the expiration of the Advisory Panel.

9 (Source: P.A. 90-742, eff. 8-13-98; 91-239, eff. 1-1-00.)

10 Section 20. The Department of Veterans Affairs Act is
11 amended by changing Section 2.07 as follows:

12 (20 ILCS 2805/2.07) (from Ch. 126 1/2, par. 67.07)

13 Sec. 2.07. The Department shall employ and maintain
14 sufficient and qualified staff at the veterans' homes to
15 fulfill the requirements of this Act. The Department shall
16 report to the General Assembly, by January 1 and July 1 of each
17 year, the number of staff employed in providing direct patient
18 care at their veterans' homes, the compliance or noncompliance
19 with staffing standards established by the United States
20 Department of Veterans Affairs for such care, and in the event
21 of noncompliance with such standards, the number of staff
22 required for compliance. For purposes of this Section, a nurse
23 who has a license application pending with the State shall not
24 be deemed unqualified by the Department if the nurse is in

1 compliance with Section 50-15 of the Nurse Practice Act ~~225~~
2 ~~ILCS 65/5-15(g) or 225 ILCS 5-15(i) of the Nursing and Advanced~~
3 ~~Practice Nursing Act.~~

4 All contracts between the State and outside contractors to
5 provide workers to staff and service the Anna Veterans Home
6 shall be canceled in accordance with the terms of those
7 contracts. Upon cancellation, each worker or staff member shall
8 be offered certified employment status under the Illinois
9 Personnel Code with the State of Illinois. To the extent it is
10 reasonably practicable, the position offered to each person
11 shall be at the same facility and shall consist of the same
12 duties and hours as previously existed under the canceled
13 contract or contracts.

14 (Source: P.A. 93-597, eff. 8-26-03; 94-703, eff. 6-1-06;
15 revised 9-15-06.)

16 Section 25. The Geriatric Medicine Assistance Act is
17 amended by changing Section 2 as follows:

18 (20 ILCS 3945/2) (from Ch. 144, par. 2002)

19 Sec. 2. There is created the Geriatric Medicine Assistance
20 Commission. The Commission shall receive and approve
21 applications for grants from schools, recognized by the
22 Department of Professional Regulation as being authorized to
23 confer doctor of medicine, doctor of osteopathy, doctor of
24 chiropractic or registered professional nursing degrees in the

1 State, to help finance the establishment of geriatric medicine
2 programs within such schools. In determining eligibility for
3 grants, the Commission shall give preference to those programs
4 which exhibit the greatest potential for directly benefiting
5 the largest number of elderly citizens in the State. The
6 Commission may not approve the application of any institution
7 which is unable to demonstrate its current financial stability
8 and reasonable prospects for future stability. No institution
9 which fails to possess and maintain an open policy with respect
10 to race, creed, color and sex as to admission of students,
11 appointment of faculty and employment of staff shall be
12 eligible for grants under this Act. The Commission shall
13 establish such rules and standards as it deems necessary for
14 the implementation of this Act.

15 The Commission shall be composed of 8 members selected as
16 follows: 2 physicians licensed to practice under the Medical
17 Practice Act of 1987 and specializing in geriatric medicine; a
18 registered professional nurse licensed under the Nurse
19 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ and
20 specializing in geriatric health care; 2 representatives of
21 organizations interested in geriatric medicine or the care of
22 the elderly; and 3 individuals 60 or older who are interested
23 in geriatric health care or the care of the elderly. The
24 members of the Commission shall be selected by the Governor
25 from a list of recommendations submitted to him by
26 organizations concerned with geriatric medicine or the care of

1 the elderly.

2 The terms of the members of the Commission shall be 4
3 years, except that of the members initially appointed, 2 shall
4 be designated to serve until January 1, 1986, 3 until January
5 1, 1988, and 2 until January 1, 1990. Members of the Commission
6 shall receive no compensation, but shall be reimbursed for
7 actual expenses incurred in carrying out their duties.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 Section 30. The State Finance Act is amended by changing
10 Section 8h as follows:

11 (30 ILCS 105/8h)

12 Sec. 8h. Transfers to General Revenue Fund.

13 (a) Except as otherwise provided in this Section and
14 Section 8n of this Act, and ~~(e), (d), or (e)~~, notwithstanding
15 any other State law to the contrary, the Governor may, through
16 June 30, 2007, from time to time direct the State Treasurer and
17 Comptroller to transfer a specified sum from any fund held by
18 the State Treasurer to the General Revenue Fund in order to
19 help defray the State's operating costs for the fiscal year.
20 The total transfer under this Section from any fund in any
21 fiscal year shall not exceed the lesser of (i) 8% of the
22 revenues to be deposited into the fund during that fiscal year
23 or (ii) an amount that leaves a remaining fund balance of 25%
24 of the July 1 fund balance of that fiscal year. In fiscal year

1 2005 only, prior to calculating the July 1, 2004 final
2 balances, the Governor may calculate and direct the State
3 Treasurer with the Comptroller to transfer additional amounts
4 determined by applying the formula authorized in Public Act
5 93-839 to the funds balances on July 1, 2003. No transfer may
6 be made from a fund under this Section that would have the
7 effect of reducing the available balance in the fund to an
8 amount less than the amount remaining unexpended and unreserved
9 from the total appropriation from that fund estimated to be
10 expended for that fiscal year. This Section does not apply to
11 any funds that are restricted by federal law to a specific use,
12 to any funds in the Motor Fuel Tax Fund, the Intercity
13 Passenger Rail Fund, the Hospital Provider Fund, the Medicaid
14 Provider Relief Fund, the Teacher Health Insurance Security
15 Fund, the Reviewing Court Alternative Dispute Resolution Fund,
16 the Voters' Guide Fund, the Foreign Language Interpreter Fund,
17 the Lawyers' Assistance Program Fund, the Supreme Court Federal
18 Projects Fund, the Supreme Court Special State Projects Fund,
19 the Supplemental Low-Income Energy Assistance Fund, the Good
20 Samaritan Energy Trust Fund, the Low-Level Radioactive Waste
21 Facility Development and Operation Fund, the Horse Racing
22 Equity Trust Fund, or the Hospital Basic Services Preservation
23 Fund, or to any funds to which Section 70-50 of the Nurse
24 Practice Act ~~subsection (f) of Section 20-40 of the Nursing and~~
25 ~~Advanced Practice Nursing Act~~ applies. No transfers may be made
26 under this Section from the Pet Population Control Fund.

1 Notwithstanding any other provision of this Section, for fiscal
2 year 2004, the total transfer under this Section from the Road
3 Fund or the State Construction Account Fund shall not exceed
4 the lesser of (i) 5% of the revenues to be deposited into the
5 fund during that fiscal year or (ii) 25% of the beginning
6 balance in the fund. For fiscal year 2005 through fiscal year
7 2007, no amounts may be transferred under this Section from the
8 Road Fund, the State Construction Account Fund, the Criminal
9 Justice Information Systems Trust Fund, the Wireless Service
10 Emergency Fund, or the Mandatory Arbitration Fund.

11 In determining the available balance in a fund, the
12 Governor may include receipts, transfers into the fund, and
13 other resources anticipated to be available in the fund in that
14 fiscal year.

15 The State Treasurer and Comptroller shall transfer the
16 amounts designated under this Section as soon as may be
17 practicable after receiving the direction to transfer from the
18 Governor.

19 (a-5) Transfers directed to be made under this Section on
20 or before February 28, 2006 that are still pending on May 19,
21 2006 (the effective date of Public Act 94-774) ~~this amendatory~~
22 ~~Act of the 94th General Assembly~~ shall be redirected as
23 provided in Section 8n of this Act.

24 (b) This Section does not apply to: (i) the Ticket For The
25 Cure Fund; (ii) any fund established under the Community Senior
26 Services and Resources Act; or (iii) on or after January 1,

1 2006 (the effective date of Public Act 94-511), the Child Labor
2 and Day and Temporary Labor Enforcement Fund.

3 (c) This Section does not apply to the Demutualization
4 Trust Fund established under the Uniform Disposition of
5 Unclaimed Property Act.

6 (d) This Section does not apply to moneys set aside in the
7 Illinois State Podiatric Disciplinary Fund for podiatric
8 scholarships and residency programs under the Podiatric
9 Scholarship and Residency Act.

10 (e) Subsection (a) does not apply to, and no transfer may
11 be made under this Section from, the Pension Stabilization
12 Fund.

13 (Source: P.A. 93-32, eff. 6-20-03; 93-659, eff. 2-3-04; 93-674,
14 eff. 6-10-04; 93-714, eff. 7-12-04; 93-801, eff. 7-22-04;
15 93-839, eff. 7-30-04; 93-1054, eff. 11-18-04; 93-1067, eff.
16 1-15-05; 94-91, eff. 7-1-05; 94-120, eff. 7-6-05; 94-511, eff.
17 1-1-06; 94-535, eff. 8-10-05; 94-639, eff. 8-22-05; 94-645,
18 eff. 8-22-05; 94-648, eff. 1-1-06; 94-686, eff. 11-2-05;
19 94-691, eff. 11-2-05; 94-726, eff. 1-20-06; 94-773, eff.
20 5-18-06; 94-774, eff. 5-19-06; 94-804, eff. 5-26-06; 94-839,
21 eff. 6-6-06; revised 6-19-06.)

22 Section 40. The Nurse Educator Assistance Act is amended by
23 changing Section 5-15 as follows:

24 (110 ILCS 967/5-15)

1 Sec. 5-15. Definitions. In this Act:

2 "Approved program of professional nursing education" and
3 "approved program of practical nursing education" mean
4 programs of professional or practical nursing, respectively,
5 approved by the Department of Financial and Professional
6 Regulation under the provisions of the Nurse Practice Act
7 ~~Nursing and Advanced Practice Nursing Act.~~

8 "Commission" means the Illinois Student Assistance
9 Commission.

10 (Source: P.A. 94-1020, eff. 7-11-06.)

11 Section 45. The Nursing Education Scholarship Law is
12 amended by changing Section 3 as follows:

13 (110 ILCS 975/3) (from Ch. 144, par. 2753)

14 Sec. 3. Definitions.

15 The following terms, whenever used or referred to, have the
16 following meanings except where the context clearly indicates
17 otherwise:

18 (1) "Board" means the Board of Higher Education created by
19 the Board of Higher Education Act.

20 (2) "Department" means the Illinois Department of Public
21 Health.

22 (3) "Approved institution" means a public community
23 college, private junior college, hospital-based diploma in
24 nursing program, or public or private college or university

1 located in this State that has approval by the Department of
2 Professional Regulation for an associate degree in nursing
3 program, associate degree in applied sciences in nursing
4 program, hospital-based diploma in nursing program,
5 baccalaureate degree in nursing program, graduate degree in
6 nursing program, or certificate in practical nursing program.

7 (4) "Baccalaureate degree in nursing program" means a
8 program offered by an approved institution and leading to a
9 bachelor of science degree in nursing.

10 (5) "Enrollment" means the establishment and maintenance
11 of an individual's status as a student in an approved
12 institution, regardless of the terms used at the institution to
13 describe such status.

14 (6) "Academic year" means the period of time from September
15 1 of one year through August 31 of the next year or as
16 otherwise defined by the academic institution.

17 (7) "Associate degree in nursing program or hospital-based
18 diploma in nursing program" means a program offered by an
19 approved institution and leading to an associate degree in
20 nursing, associate degree in applied sciences in nursing, or
21 hospital-based diploma in nursing.

22 (8) "Graduate degree in nursing program" means a program
23 offered by an approved institution and leading to a master of
24 science degree in nursing or a doctorate of philosophy or
25 doctorate of nursing degree in nursing.

26 (9) "Director" means the Director of the Illinois

1 Department of Public Health.

2 (10) "Accepted for admission" means a student has completed
3 the requirements for entry into an associate degree in nursing
4 program, associate degree in applied sciences in nursing
5 program, hospital-based diploma in nursing program,
6 baccalaureate degree in nursing program, graduate degree in
7 nursing program, or certificate in practical nursing program at
8 an approved institution, as documented by the institution.

9 (11) "Fees" means those mandatory charges, in addition to
10 tuition, that all enrolled students must pay, including
11 required course or lab fees.

12 (12) "Full-time student" means a student enrolled for at
13 least 12 hours per term or as otherwise determined by the
14 academic institution.

15 (13) "Law" means the Nursing Education Scholarship Law.

16 (14) "Nursing employment obligation" means employment in
17 this State as a registered professional nurse or licensed
18 practical nurse in direct patient care or as a nurse educator
19 in the case of a graduate degree in nursing program recipient
20 for at least one year for each year of scholarship assistance
21 received through the Nursing Education Scholarship Program.

22 (15) "Part-time student" means a person who is enrolled for
23 at least one-third of the number of hours required per term by
24 a school for its full-time students.

25 (16) "Practical nursing program" means a program offered by
26 an approved institution leading to a certificate in practical

1 nursing.

2 (17) "Registered professional nurse" means a person who is
3 currently licensed as a registered professional nurse by the
4 Department of Professional Regulation under the Nurse Practice
5 Act ~~Nursing and Advanced Practice Nursing Act~~.

6 (18) "Licensed practical nurse" means a person who is
7 currently licensed as a licensed practical nurse by the
8 Department of Professional Regulation under the Nurse Practice
9 Act ~~Nursing and Advanced Practice Nursing Act~~.

10 (19) "School term" means an academic term, such as a
11 semester, quarter, trimester, or number of clock hours, as
12 defined by an approved institution.

13 (20) "Student in good standing" means a student maintaining
14 a cumulative grade point average equivalent to at least the
15 academic grade of a "C".

16 (21) "Total and permanent disability" means a physical or
17 mental impairment, disease, or loss of a permanent nature that
18 prevents nursing employment with or without reasonable
19 accommodation. Proof of disability shall be a declaration from
20 the social security administration, Illinois Workers'
21 Compensation Commission, Department of Defense, or an insurer
22 authorized to transact business in Illinois who is providing
23 disability insurance coverage to a contractor.

24 (22) "Tuition" means the established charges of an
25 institution of higher learning for instruction at that
26 institution.

1 (23) "Nurse educator" means a person who is currently
2 licensed as a registered nurse by the Department of
3 Professional Regulation under the Nurse Practice Act ~~Nursing
4 and Advanced Practice Nursing Act~~, who has a graduate degree in
5 nursing, and who is employed by an approved academic
6 institution to educate registered nursing students, licensed
7 practical nursing students, and registered nurses pursuing
8 graduate degrees.

9 (Source: P.A. 92-43, eff. 1-1-02; 93-721, eff. 1-1-05; 93-879,
10 eff. 1-1-05; revised 10-25-04.)

11 Section 50. The Academic Degree Act is amended by changing
12 Section 11 as follows:

13 (110 ILCS 1010/11) (from Ch. 144, par. 241)

14 Sec. 11. Exemptions. This Act shall not apply to any school
15 or educational institution regulated or approved under the
16 Nurse Practice Act ~~Nursing and Advanced Practice Nursing Act~~.

17 This Act shall not apply to any of the following:

18 (a) in-training programs by corporations or other business
19 organizations for the training of their personnel;

20 (b) education or other improvement programs by business,
21 trade and similar organizations and associations for the
22 benefit of their members only; or

23 (c) apprentice or other training programs by labor unions.

24 (Source: P.A. 90-742, eff. 8-13-98.)

1 Section 55. The Ambulatory Surgical Treatment Center Act is
2 amended by changing Section 6.5 as follows:

3 (210 ILCS 5/6.5)

4 Sec. 6.5. Clinical privileges; advanced practice nurses.
5 All ambulatory surgical treatment centers (ASTC) licensed
6 under this Act shall comply with the following requirements:

7 (1) No ASTC policy, rule, regulation, or practice shall be
8 inconsistent with the provision of adequate collaboration and
9 consultation, ~~including medical direction of licensed advanced~~
10 ~~practice nurses~~, in accordance with Section 54.5 of the Medical
11 Practice Act of 1987.

12 (2) Operative surgical procedures shall be performed only
13 by a physician licensed to practice medicine in all its
14 branches under the Medical Practice Act of 1987, a dentist
15 licensed under the Illinois Dental Practice Act, or a
16 podiatrist licensed under the Podiatric Medical Practice Act of
17 1987, with medical staff membership and surgical clinical
18 privileges granted by the consulting committee of the ASTC. A
19 licensed physician, dentist, or podiatrist may be assisted by a
20 physician licensed to practice medicine in all its branches,
21 dentist, dental assistant, podiatrist, licensed advanced
22 practice nurse, licensed physician assistant, licensed
23 registered nurse, licensed practical nurse, surgical
24 assistant, surgical technician, or other individuals granted

1 clinical privileges to assist in surgery by the consulting
2 committee of the ASTC. Payment for services rendered by an
3 assistant in surgery who is not an ambulatory surgical
4 treatment center employee shall be paid at the appropriate
5 non-physician modifier rate if the payor would have made
6 payment had the same services been provided by a physician.

7 (2.5) A registered nurse licensed under the Nurse Practice
8 Act ~~Nursing and Advanced Practice Nursing Act~~ and qualified by
9 training and experience in operating room nursing shall be
10 present in the operating room and function as the circulating
11 nurse during all invasive or operative procedures. For purposes
12 of this paragraph (2.5), "circulating nurse" means a registered
13 nurse who is responsible for coordinating all nursing care,
14 patient safety needs, and the needs of the surgical team in the
15 operating room during an invasive or operative procedure.

16 (3) An advanced practice nurse is not required to possess
17 prescriptive authority or a written collaborative agreement
18 meeting the requirements of the Nurse Practice Act to provide
19 advanced practice nursing services in an ambulatory surgical
20 treatment center. An advanced practice nurse must possess
21 clinical privileges granted by the consulting medical staff
22 committee and ambulatory surgical treatment center in order to
23 provide services. Individual advanced practice nurses may also
24 be granted clinical privileges to order, select, and administer
25 medications, including controlled substances, to provide
26 delineated care. The attending physician must determine the

1 advance practice nurse's role in providing care for his or her
2 patients, except as otherwise provided in the consulting staff
3 policies. The consulting medical staff committee shall
4 periodically review the services of advanced practice nurses
5 granted privileges.

6 (4) ~~(3)~~ The anesthesia service shall be under the direction
7 of a physician licensed to practice medicine in all its
8 branches who has had specialized preparation or experience in
9 the area or who has completed a residency in anesthesiology. An
10 anesthesiologist, Board certified or Board eligible, is
11 recommended. Anesthesia services may only be administered
12 pursuant to the order of a physician licensed to practice
13 medicine in all its branches, licensed dentist, or licensed
14 podiatrist.

15 (A) The individuals who, with clinical privileges
16 granted by the medical staff and ASTC, may administer
17 anesthesia services are limited to the following:

18 (i) an anesthesiologist; or

19 (ii) a physician licensed to practice medicine in
20 all its branches; or

21 (iii) a dentist with authority to administer
22 anesthesia under Section 8.1 of the Illinois Dental
23 Practice Act; or

24 (iv) a licensed certified registered nurse
25 anesthesiologist.

26 (B) For anesthesia services, an anesthesiologist shall

1 participate through discussion of and agreement with the
2 anesthesia plan and shall remain physically present and be
3 available on the premises during the delivery of anesthesia
4 services for diagnosis, consultation, and treatment of
5 emergency medical conditions. In the absence of 24-hour
6 availability of anesthesiologists with clinical
7 privileges, an alternate policy (requiring participation,
8 presence, and availability of a physician licensed to
9 practice medicine in all its branches) shall be developed
10 by the medical staff consulting committee in consultation
11 with the anesthesia service and included in the medical
12 staff consulting committee policies.

13 (C) A certified registered nurse anesthetist is not
14 required to possess prescriptive authority or a written
15 collaborative agreement meeting the requirements of
16 Section 65-35 of the Nurse Practice Act ~~15-15 of the~~
17 ~~Nursing and Advanced Practice Nursing Act~~ to provide
18 anesthesia services ordered by a licensed physician,
19 dentist, or podiatrist. Licensed certified registered
20 nurse anesthetists are authorized to select, order, and
21 administer drugs and apply the appropriate medical devices
22 in the provision of anesthesia services under the
23 anesthesia plan agreed with by the anesthesiologist or, in
24 the absence of an available anesthesiologist with clinical
25 privileges, agreed with by the operating physician,
26 operating dentist, or operating podiatrist in accordance

1 with the medical staff consulting committee policies of a
2 licensed ambulatory surgical treatment center.

3 (Source: P.A. 93-352, eff. 1-1-04; 94-915, eff. 1-1-07.)

4 Section 60. The Illinois Clinical Laboratory and Blood Bank
5 Act is amended by changing Section 7-101 as follows:

6 (210 ILCS 25/7-101) (from Ch. 111 1/2, par. 627-101)

7 Sec. 7-101. Examination of specimens. A clinical
8 laboratory shall examine specimens only at the request of (i) a
9 licensed physician, (ii) a licensed dentist, (iii) a licensed
10 podiatrist, (iv) a therapeutic optometrist for diagnostic or
11 therapeutic purposes related to the use of diagnostic topical
12 or therapeutic ocular pharmaceutical agents, as defined in
13 subsections (c) and (d) of Section 15.1 of the Illinois
14 Optometric Practice Act of 1987, (v) a licensed physician
15 assistant in accordance with the written guidelines required
16 under subdivision (3) of Section 4 and under Section 7.5 of the
17 Physician Assistant Practice Act of 1987, (v-A) an advanced
18 practice nurse in accordance with the written collaborative
19 agreement required under Section 65-35 of the Nurse Practice
20 Act 15-15 of the Nursing and Advanced Practice Nursing Act, or
21 (vi) an authorized law enforcement agency or, in the case of
22 blood alcohol, at the request of the individual for whom the
23 test is to be performed in compliance with Sections 11-501 and
24 11-501.1 of the Illinois Vehicle Code. If the request to a

1 laboratory is oral, the physician or other authorized person
2 shall submit a written request to the laboratory within 48
3 hours. If the laboratory does not receive the written request
4 within that period, it shall note that fact in its records. For
5 purposes of this Section, a request made by electronic mail or
6 fax constitutes a written request.

7 (Source: P.A. 90-116, eff. 7-14-97; 90-322, eff. 1-1-98;
8 90-655, eff. 7-30-98; 90-666, eff. 7-30-98; 90-742, eff.
9 8-13-98; 91-357, eff. 7-29-99.)

10 Section 65. The Life Care Facilities Act is amended by
11 changing Section 2 as follows:

12 (210 ILCS 40/2) (from Ch. 111 1/2, par. 4160-2)

13 Sec. 2. As used in this Act, unless the context otherwise
14 requires:

15 (a) "Department" means the Department of Public Health.

16 (b) "Director" means the Director of the Department.

17 (c) "Life care contract" means a contract to provide to a
18 person for the duration of such person's life or for a term in
19 excess of one year, nursing services, medical services or
20 personal care services, in addition to maintenance services for
21 such person in a facility, conditioned upon the transfer of an
22 entrance fee to the provider of such services in addition to or
23 in lieu of the payment of regular periodic charges for the care
24 and services involved.

1 (d) "Provider" means a person who provides services
2 pursuant to a life care contract.

3 (e) "Resident" means a person who enters into a life care
4 contract with a provider, or who is designated in a life care
5 contract to be a person provided with maintenance and nursing,
6 medical or personal care services.

7 (f) "Facility" means a place or places in which a provider
8 undertakes to provide a resident with nursing services, medical
9 services or personal care services, in addition to maintenance
10 services for a term in excess of one year or for life pursuant
11 to a life care contract. The term also means a place or places
12 in which a provider undertakes to provide such services to a
13 non-resident.

14 (g) "Living unit" means an apartment, room or other area
15 within a facility set aside for the exclusive use of one or
16 more identified residents.

17 (h) "Entrance fee" means an initial or deferred transfer to
18 a provider of a sum of money or property, made or promised to
19 be made by a person entering into a life care contract, which
20 assures a resident of services pursuant to a life care
21 contract.

22 (i) "Permit" means a written authorization to enter into
23 life care contracts issued by the Department to a provider.

24 (j) "Medical services" means those services pertaining to
25 medical or dental care that are performed in behalf of patients
26 at the direction of a physician licensed under the Medical

1 Practice Act of 1987 or a dentist licensed under the Illinois
2 Dental Practice Act by such physicians or dentists, or by a
3 registered or licensed practical nurse as defined in the Nurse
4 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ or by
5 other professional and technical personnel.

6 (k) "Nursing services" means those services pertaining to
7 the curative, restorative and preventive aspects of nursing
8 care that are performed at the direction of a physician
9 licensed under the Medical Practice Act of 1987 by or under the
10 supervision of a registered or licensed practical nurse as
11 defined in the Nurse Practice Act ~~Nursing and Advanced Practice~~
12 ~~Nursing Act~~.

13 (l) "Personal care services" means assistance with meals,
14 dressing, movement, bathing or other personal needs or
15 maintenance, or general supervision and oversight of the
16 physical and mental well-being of an individual, who is
17 incapable of maintaining a private, independent residence or
18 who is incapable of managing his person whether or not a
19 guardian has been appointed for such individual.

20 (m) "Maintenance services" means food, shelter and laundry
21 services.

22 (n) "Certificates of Need" means those permits issued
23 pursuant to the Illinois Health Facilities Planning Act as now
24 or hereafter amended.

25 (o) "Non-resident" means a person admitted to a facility
26 who has not entered into a life care contract.

1 (Source: P.A. 90-742, eff. 8-13-98.)

2 Section 70. The Nursing Home Care Act is amended by
3 changing Section 1-118 as follows:

4 (210 ILCS 45/1-118) (from Ch. 111 1/2, par. 4151-118)

5 Sec. 1-118. "Nurse" means a registered nurse or a licensed
6 practical nurse as defined in the Nurse Practice Act ~~Nursing~~
7 ~~and Advanced Practice Nursing Act~~.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 Section 75. The Emergency Medical Services (EMS) Systems
10 Act is amended by changing Section 3.80 as follows:

11 (210 ILCS 50/3.80)

12 Sec. 3.80. Pre-Hospital RN and Emergency Communications
13 Registered Nurse.

14 (a) Emergency Communications Registered Nurse or "ECRN"
15 means a registered professional nurse, licensed under the Nurse
16 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ who has
17 successfully completed supplemental education in accordance
18 with rules adopted by the Department, and who is approved by an
19 EMS Medical Director to monitor telecommunications from and
20 give voice orders to EMS System personnel, under the authority
21 of the EMS Medical Director and in accordance with System
22 protocols.

1 Upon the effective date of this amendatory Act of 1995, all
2 existing Registered Professional Nurse/MICNs shall be
3 considered ECRNs.

4 (b) "Pre-Hospital Registered Nurse" or "Pre-Hospital RN"
5 means a registered professional nurse, licensed under the Nurse
6 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ who has
7 successfully completed supplemental education in accordance
8 with rules adopted by the Department pursuant to this Act, and
9 who is approved by an EMS Medical Director to practice within
10 an EMS System as emergency medical services personnel for
11 pre-hospital and inter-hospital emergency care and
12 non-emergency medical transports.

13 Upon the effective date of this amendatory Act of 1995, all
14 existing Registered Professional Nurse/Field RNs shall be
15 considered Pre-Hospital RNs.

16 (c) The Department shall have the authority and
17 responsibility to:

18 (1) Prescribe education and continuing education
19 requirements for Pre-Hospital RN and ECRN candidates
20 through rules adopted pursuant to this Act:

21 (A) Education for Pre-Hospital RN shall include
22 extrication, telecommunications, and pre-hospital
23 cardiac and trauma care;

24 (B) Education for ECRN shall include
25 telecommunications, System standing medical orders and
26 the procedures and protocols established by the EMS

1 Medical Director;

2 (C) A Pre-Hospital RN candidate who is fulfilling
3 clinical training and in-field supervised experience
4 requirements may perform prescribed procedures under
5 the direct supervision of a physician licensed to
6 practice medicine in all of its branches, a qualified
7 registered professional nurse or a qualified EMT, only
8 when authorized by the EMS Medical Director;

9 (D) An EMS Medical Director may impose in-field
10 supervised field experience requirements on System
11 ECRNs as part of their training or continuing
12 education, in which they perform prescribed procedures
13 under the direct supervision of a physician licensed to
14 practice medicine in all of its branches, a qualified
15 registered professional nurse or qualified EMT, only
16 when authorized by the EMS Medical Director;

17 (2) Require EMS Medical Directors to reapprove
18 Pre-Hospital RNs and ECRNs every 4 years, based on
19 compliance with continuing education requirements
20 prescribed by the Department through rules adopted
21 pursuant to this Act;

22 (3) Allow EMS Medical Directors to grant inactive
23 status to any Pre-Hospital RN or ECRN who qualifies, based
24 on standards and procedures established by the Department
25 in rules adopted pursuant to this Act;

26 (4) Require a Pre-Hospital RN to honor Do Not

1 Resuscitate (DNR) orders and powers of attorney for health
2 care only in accordance with rules adopted by the
3 Department pursuant to this Act and protocols of the EMS
4 System in which he or she practices.

5 (Source: P.A. 89-177, eff. 7-19-95; 90-742, eff. 8-13-98.)

6 Section 80. The Home Health, Home Services, and Home
7 Nursing Agency Licensing Act is amended by changing Section
8 2.09 as follows:

9 (210 ILCS 55/2.09)

10 Sec. 2.09. "Home services" or "in-home services" means
11 assistance with activities of daily living, housekeeping,
12 personal laundry, and companionship provided to an individual
13 in his or her personal residence, which are intended to enable
14 that individual to remain safely and comfortably in his or her
15 own personal residence. "Home services" or "in-home services"
16 does not include services that would be required to be
17 performed by an individual licensed under the Nurse Practice
18 Act ~~Nursing and Advanced Practice Nursing Act.~~

19 (Source: P.A. 94-379, eff. 1-1-06.)

20 Section 85. The Home Health, Home Services, and Home
21 Nursing Agency Licensing Act is amended by changing Section 6.3
22 as follows:

1 (210 ILCS 55/6.3)

2 Sec. 6.3. Home services agencies; standards; fees.

3 (a) Before January 1, 2008, the Department shall adopt
4 standards for the licensure and operation of home services
5 agencies operated in this State. The structure of the standards
6 shall be based on the concept of home services and its focus on
7 assistance with activities of daily living, housekeeping,
8 personal laundry, and companionship being provided to an
9 individual intended to enable that individual to remain safely
10 and comfortably in his or her own personal residence. As home
11 services do not include services that would be required to be
12 performed by an individual licensed under the Nurse Practice
13 Act ~~Nursing and Advanced Practice Nursing Act~~, the standards
14 shall be developed from a similar concept. After consideration
15 and recommendations by the Home Health and Home Services
16 Advisory Committee, the Department shall adopt such rules and
17 regulations as are necessary for the proper regulation of home
18 services agencies. Requirements for licensure as a home
19 services agency shall include the following:

20 (1) Compliance with the requirements of the Health Care
21 Worker Background Check Act.

22 (2) Notification, in a form and manner established by
23 the Department by rule, to home services workers and
24 consumers as to the party or parties responsible under
25 State and federal laws for payment of employment taxes,
26 social security taxes, and workers' compensation,

1 liability, the day-to-day supervision of workers, and the
2 hiring, firing, and discipline of workers with the
3 placement arrangement for home services.

4 (3) Compliance with rules, as adopted by the
5 Department, in regard to (i) reporting by the licensee of
6 any known or suspected incidences of abuse, neglect, or
7 financial exploitation of an eligible adult, as defined in
8 the Elder Abuse and Neglect Act, by a home services worker
9 employed by or placed by the licensee or (ii) reports to a
10 law enforcement agency in connection with any other
11 individual protected under the laws of the State of
12 Illinois.

13 (4) Compliance with rules, as adopted by the
14 Department, addressing the health, safety, and well-being
15 of clients receiving home services.

16 (b) The Department may establish fees for home services
17 agency licensure in rules in a manner that will make the
18 program self-supporting. The amount of the licensure fees shall
19 be based on the funding required for operation of the licensure
20 program.

21 (Source: P.A. 94-379, eff. 1-1-06.)

22 Section 90. The End Stage Renal Disease Facility Act is
23 amended by changing Section 5 as follows:

24 (210 ILCS 62/5)

1 Sec. 5. Definitions. As used in this Act:

2 "Committee" means the End Stage Renal Disease Advisory
3 Committee.

4 "Department" means the Department of Public Health.

5 "Dialysis" means a process by which dissolved substances
6 are removed from a patient's body by diffusion from one fluid
7 compartment to another across a semipermeable membrane.

8 "Dialysis technician" means an individual who is not a
9 registered nurse or physician and who provides dialysis care
10 under the supervision of a registered nurse or physician.

11 "Director" means the Director of Public Health.

12 "End stage renal disease" means that stage of renal
13 impairment that appears irreversible and permanent and that
14 requires a regular course of dialysis or kidney transplantation
15 to maintain life.

16 "End stage renal disease facility" or "ESRDF" means a
17 facility that provides dialysis treatment or dialysis training
18 to individuals with end stage renal disease.

19 "Licensee" means an individual or entity licensed by the
20 Department to operate an end stage renal disease facility.

21 "Nurse" means an individual who is licensed to practice
22 nursing under the Nurse Practice Act ~~Nursing and Advanced~~
23 ~~Practice Nursing Act.~~

24 "Patient" means any individual receiving treatment from an
25 end stage renal disease facility.

26 "Person" means any individual, firm, partnership,

1 corporation, company, association, or other legal entity.

2 "Physician" means an individual who is licensed to practice
3 medicine in all of its branches under the Medical Practice Act
4 of 1987.

5 (Source: P.A. 92-794, eff. 7-1-03.)

6 Section 95. The Hospital Licensing Act is amended by
7 changing Sections 10, 10.7, and 10.9 as follows:

8 (210 ILCS 85/10) (from Ch. 111 1/2, par. 151)

9 Sec. 10. Board creation; Department rules.

10 (a) The Governor shall appoint a Hospital Licensing Board
11 composed of 14 persons, which shall advise and consult with the
12 Director in the administration of this Act. The Secretary of
13 Human Services (or his or her designee) shall serve on the
14 Board, along with one additional representative of the
15 Department of Human Services to be designated by the Secretary.
16 Four appointive members shall represent the general public and
17 2 of these shall be members of hospital governing boards; one
18 appointive member shall be a registered professional nurse or
19 advanced practice, nurse as defined in the Nurse Practice Act
20 ~~Nursing and Advanced Practice Nursing Act~~, who is employed in a
21 hospital; 3 appointive members shall be hospital
22 administrators actively engaged in the supervision or
23 administration of hospitals; 2 appointive members shall be
24 practicing physicians, licensed in Illinois to practice

1 medicine in all of its branches; and one appointive member
2 shall be a physician licensed to practice podiatric medicine
3 under the Podiatric Medical Practice Act of 1987; and one
4 appointive member shall be a dentist licensed to practice
5 dentistry under the Illinois Dental Practice Act. In making
6 Board appointments, the Governor shall give consideration to
7 recommendations made through the Director by professional
8 organizations concerned with hospital administration for the
9 hospital administrative and governing board appointments,
10 registered professional nurse organizations for the registered
11 professional nurse appointment, professional medical
12 organizations for the physician appointments, and professional
13 dental organizations for the dentist appointment.

14 (b) Each appointive member shall hold office for a term of
15 3 years, except that any member appointed to fill a vacancy
16 occurring prior to the expiration of the term for which his
17 predecessor was appointed shall be appointed for the remainder
18 of such term and the terms of office of the members first
19 taking office shall expire, as designated at the time of
20 appointment, 2 at the end of the first year, 2 at the end of the
21 second year, and 3 at the end of the third year, after the date
22 of appointment. The initial terms of office of the 2 additional
23 members representing the general public provided for in this
24 Section shall expire at the end of the third year after the
25 date of appointment. The term of office of each original
26 appointee shall commence July 1, 1953; the term of office of

1 the original registered professional nurse appointee shall
2 commence July 1, 1969; the term of office of the original
3 licensed podiatrist appointee shall commence July 1, 1981; the
4 term of office of the original dentist appointee shall commence
5 July 1, 1987; and the term of office of each successor shall
6 commence on July 1 of the year in which his predecessor's term
7 expires. Board members, while serving on business of the Board,
8 shall receive actual and necessary travel and subsistence
9 expenses while so serving away from their places of residence.
10 The Board shall meet as frequently as the Director deems
11 necessary, but not less than once a year. Upon request of 5 or
12 more members, the Director shall call a meeting of the Board.

13 (c) The Director shall prescribe rules, regulations,
14 standards, and statements of policy needed to implement,
15 interpret, or make specific the provisions and purposes of this
16 Act. The Department shall adopt rules which set forth standards
17 for determining when the public interest, safety or welfare
18 requires emergency action in relation to termination of a
19 research program or experimental procedure conducted by a
20 hospital licensed under this Act. No rule, regulation, or
21 standard shall be adopted by the Department concerning the
22 operation of hospitals licensed under this Act which has not
23 had prior approval of the Hospital Licensing Board, nor shall
24 the Department adopt any rule, regulation or standard relating
25 to the establishment of a hospital without consultation with
26 the Hospital Licensing Board.

1 (d) Within one year after the effective date of this
2 amendatory Act of 1984, all hospitals licensed under this Act
3 and providing perinatal care shall comply with standards of
4 perinatal care promulgated by the Department. The Director
5 shall promulgate rules or regulations under this Act which are
6 consistent with "An Act relating to the prevention of
7 developmental disabilities", approved September 6, 1973, as
8 amended.

9 (Source: P.A. 89-507, eff. 7-1-97; 90-742, eff. 8-13-98.)

10 (210 ILCS 85/10.7)

11 Sec. 10.7. Clinical privileges; advanced practice nurses.
12 All hospitals licensed under this Act shall comply with the
13 following requirements:

14 (1) No hospital policy, rule, regulation, or practice shall
15 be inconsistent with the provision of adequate collaboration
16 ~~and consultation, including medical direction of licensed~~
17 ~~advanced practice nurses,~~ in accordance with Section 54.5 of
18 the Medical Practice Act of 1987.

19 (2) Operative surgical procedures shall be performed only
20 by a physician licensed to practice medicine in all its
21 branches under the Medical Practice Act of 1987, a dentist
22 licensed under the Illinois Dental Practice Act, or a
23 podiatrist licensed under the Podiatric Medical Practice Act of
24 1987, with medical staff membership and surgical clinical
25 privileges granted at the hospital. A licensed physician,

1 dentist, or podiatrist may be assisted by a physician licensed
2 to practice medicine in all its branches, dentist, dental
3 assistant, podiatrist, licensed advanced practice nurse,
4 licensed physician assistant, licensed registered nurse,
5 licensed practical nurse, surgical assistant, surgical
6 technician, or other individuals granted clinical privileges
7 to assist in surgery at the hospital. Payment for services
8 rendered by an assistant in surgery who is not a hospital
9 employee shall be paid at the appropriate non-physician
10 modifier rate if the payor would have made payment had the same
11 services been provided by a physician.

12 (2.5) A registered nurse licensed under the Nurse Practice
13 Act ~~Nursing and Advanced Practice Nursing Act~~ and qualified by
14 training and experience in operating room nursing shall be
15 present in the operating room and function as the circulating
16 nurse during all invasive or operative procedures. For purposes
17 of this paragraph (2.5), "circulating nurse" means a registered
18 nurse who is responsible for coordinating all nursing care,
19 patient safety needs, and the needs of the surgical team in the
20 operating room during an invasive or operative procedure.

21 (3) An advanced practice nurse is not required to possess
22 prescriptive authority or a written collaborative agreement
23 meeting the requirements of the Nurse Practice Act to provide
24 advanced practice nursing services in a hospital. An advanced
25 practice nurse must possess clinical privileges recommended by
26 the medical staff and granted by the hospital in order to

1 provide services. Individual advanced practice nurses may also
2 be granted clinical privileges to order, select, and administer
3 medications, including controlled substances, to provide
4 delineated care. The attending physician must determine the
5 advance practice nurse's role in providing care for his or her
6 patients, except as otherwise provided in medical staff bylaws.
7 The medical staff shall periodically review the services of
8 advanced practice nurses granted privileges. This review shall
9 be conducted in accordance with item (2) of subsection (a) of
10 Section 10.8 of this Act for advanced practice nurses employed
11 by the hospital.

12 (4) ~~(3)~~ The anesthesia service shall be under the direction
13 of a physician licensed to practice medicine in all its
14 branches who has had specialized preparation or experience in
15 the area or who has completed a residency in anesthesiology. An
16 anesthesiologist, Board certified or Board eligible, is
17 recommended. Anesthesia services may only be administered
18 pursuant to the order of a physician licensed to practice
19 medicine in all its branches, licensed dentist, or licensed
20 podiatrist.

21 (A) The individuals who, with clinical privileges
22 granted at the hospital, may administer anesthesia
23 services are limited to the following:

24 (i) an anesthesiologist; or

25 (ii) a physician licensed to practice medicine in
26 all its branches; or

1 (iii) a dentist with authority to administer
2 anesthesia under Section 8.1 of the Illinois Dental
3 Practice Act; or

4 (iv) a licensed certified registered nurse
5 anesthetist.

6 (B) For anesthesia services, an anesthesiologist shall
7 participate through discussion of and agreement with the
8 anesthesia plan and shall remain physically present and be
9 available on the premises during the delivery of anesthesia
10 services for diagnosis, consultation, and treatment of
11 emergency medical conditions. In the absence of 24-hour
12 availability of anesthesiologists with medical staff
13 privileges, an alternate policy (requiring participation,
14 presence, and availability of a physician licensed to
15 practice medicine in all its branches) shall be developed
16 by the medical staff and licensed hospital in consultation
17 with the anesthesia service.

18 (C) A certified registered nurse anesthetist is not
19 required to possess prescriptive authority or a written
20 collaborative agreement meeting the requirements of
21 Section 65-35 of the Nurse Practice Act ~~Section 15-15 of~~
22 ~~the Nursing and Advanced Practice Nursing Act~~ to provide
23 anesthesia services ordered by a licensed physician,
24 dentist, or podiatrist. Licensed certified registered
25 nurse anesthetists are authorized to select, order, and
26 administer drugs and apply the appropriate medical devices

1 in the provision of anesthesia services under the
2 anesthesia plan agreed with by the anesthesiologist or, in
3 the absence of an available anesthesiologist with clinical
4 privileges, agreed with by the operating physician,
5 operating dentist, or operating podiatrist in accordance
6 with the hospital's alternative policy.

7 (Source: P.A. 93-352, eff. 1-1-04; 94-915, eff. 1-1-07.)

8 (210 ILCS 85/10.9)

9 Sec. 10.9. Nurse mandated overtime prohibited.

10 (a) Definitions. As used in this Section:

11 "Mandated overtime" means work that is required by the
12 hospital in excess of an agreed-to, predetermined work shift.
13 Time spent by nurses required to be available as a condition of
14 employment in specialized units, such as surgical nursing
15 services, shall not be counted or considered in calculating the
16 amount of time worked for the purpose of applying the
17 prohibition against mandated overtime under subsection (b).

18 "Nurse" means any advanced practice nurse, registered
19 professional nurse, or licensed practical nurse, as defined in
20 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
21 ~~Act~~, who receives an hourly wage and has direct responsibility
22 to oversee or carry out nursing care. For the purposes of this
23 Section, "advanced practice nurse" does not include a certified
24 registered nurse anesthetist who is primarily engaged in
25 performing the duties of a nurse anesthetist.

1 "Unforeseen emergent circumstance" means (i) any declared
2 national, State, or municipal disaster or other catastrophic
3 event, or any implementation of a hospital's disaster plan,
4 that will substantially affect or increase the need for health
5 care services or (ii) any circumstance in which patient care
6 needs require specialized nursing skills through the
7 completion of a procedure. An "unforeseen emergent
8 circumstance" does not include situations in which the hospital
9 fails to have enough nursing staff to meet the usual and
10 reasonably predictable nursing needs of its patients.

11 (b) Mandated overtime prohibited. No nurse may be required
12 to work mandated overtime except in the case of an unforeseen
13 emergent circumstance when such overtime is required only as a
14 last resort. Such mandated overtime shall not exceed 4 hours
15 beyond an agreed-to, predetermined work shift.

16 (c) Off-duty period. When a nurse is mandated to work up to
17 12 consecutive hours, the nurse must be allowed at least 8
18 consecutive hours of off-duty time immediately following the
19 completion of a shift.

20 (d) Retaliation prohibited. No hospital may discipline,
21 discharge, or take any other adverse employment action against
22 a nurse solely because the nurse refused to work mandated
23 overtime as prohibited under subsection (b).

24 (e) Violations. Any employee of a hospital that is subject
25 to this Act may file a complaint with the Department of Public
26 Health regarding an alleged violation of this Section. The

1 complaint must be filed within 45 days following the occurrence
2 of the incident giving rise to the alleged violation. The
3 Department must forward notification of the alleged violation
4 to the hospital in question within 3 business days after the
5 complaint is filed. Upon receiving a complaint of a violation
6 of this Section, the Department may take any action authorized
7 under Section 7 or 9 of this Act.

8 (f) Proof of violation. Any violation of this Section must
9 be proved by clear and convincing evidence that a nurse was
10 required to work overtime against his or her will. The hospital
11 may defeat the claim of a violation by presenting clear and
12 convincing evidence that an unforeseen emergent circumstance,
13 which required overtime work, existed at the time the employee
14 was required or compelled to work.

15 (Source: P.A. 94-349, eff. 7-28-05.)

16 Section 100. The Hospital Report Card Act is amended by
17 changing Section 10 as follows:

18 (210 ILCS 86/10)

19 Sec. 10. Definitions. For the purpose of this Act:

20 "Average daily census" means the average number of
21 inpatients receiving service on any given 24-hour period
22 beginning at midnight in each clinical service area of the
23 hospital.

24 "Clinical service area" means a grouping of clinical

1 services by a generic class of various types or levels of
2 support functions, equipment, care, or treatment provided to
3 inpatients. Hospitals may have, but are not required to have,
4 the following categories of service: behavioral health,
5 critical care, maternal-child care, medical-surgical,
6 pediatrics, perioperative services, and telemetry.

7 "Department" means the Department of Public Health.

8 "Direct-care nurse" and "direct-care nursing staff"
9 includes any registered nurse, licensed practical nurse, or
10 assistive nursing personnel with direct responsibility to
11 oversee or carry out medical regimens or nursing care for one
12 or more patient.

13 "Hospital" means a health care facility licensed under the
14 Hospital Licensing Act.

15 "Nursing care" means care that falls within the scope of
16 practice set forth in the Nurse Practice Act ~~Nursing and~~
17 ~~Advanced Practice Nursing Act~~ or is otherwise encompassed
18 within recognized professional standards of nursing practice,
19 including assessment, nursing diagnosis, planning,
20 intervention, evaluation, and patient advocacy.

21 "Retaliate" means to discipline, discharge, suspend,
22 demote, harass, deny employment or promotion, lay off, or take
23 any other adverse action against direct-care nursing staff as a
24 result of that nursing staff taking any action described in
25 this Act.

26 "Skill mix" means the differences in licensing, specialty,

1 and experiences among direct-care nurses.

2 "Staffing levels" means the numerical nurse to patient
3 ratio by licensed nurse classification within a nursing
4 department or unit.

5 "Unit" means a functional division or area of a hospital in
6 which nursing care is provided.

7 (Source: P.A. 93-563, eff. 1-1-04.)

8 Section 105. The Illinois Dental Practice Act is amended by
9 changing Section 4 as follows:

10 (225 ILCS 25/4) (from Ch. 111, par. 2304)

11 (Section scheduled to be repealed on January 1, 2016)

12 Sec. 4. Definitions. As used in this Act:

13 (a) "Department" means the Illinois Department of
14 Professional Regulation.

15 (b) "Director" means the Director of Professional
16 Regulation.

17 (c) "Board" means the Board of Dentistry established by
18 Section 6 of this Act.

19 (d) "Dentist" means a person who has received a general
20 license pursuant to paragraph (a) of Section 11 of this Act and
21 who may perform any intraoral and extraoral procedure required
22 in the practice of dentistry and to whom is reserved the
23 responsibilities specified in Section 17.

24 (e) "Dental hygienist" means a person who holds a license

1 under this Act to perform dental services as authorized by
2 Section 18.

3 (f) "Dental assistant" means an appropriately trained
4 person who, under the supervision of a dentist, provides dental
5 services as authorized by Section 17.

6 (g) "Dental laboratory" means a person, firm or corporation
7 which:

8 (i) engages in making, providing, repairing or
9 altering dental prosthetic appliances and other artificial
10 materials and devices which are returned to a dentist for
11 insertion into the human oral cavity or which come in
12 contact with its adjacent structures and tissues; and

13 (ii) utilizes or employs a dental technician to provide
14 such services; and

15 (iii) performs such functions only for a dentist or
16 dentists.

17 (h) "Supervision" means supervision of a dental hygienist
18 or a dental assistant requiring that a dentist authorize the
19 procedure, remain in the dental facility while the procedure is
20 performed, and approve the work performed by the dental
21 hygienist or dental assistant before dismissal of the patient,
22 but does not mean that the dentist must be present at all times
23 in the treatment room.

24 (i) "General supervision" means supervision of a dental
25 hygienist requiring that the patient be a patient of record,
26 that the dentist examine the patient in accordance with Section

1 18 prior to treatment by the dental hygienist, and that the
2 dentist authorize the procedures which are being carried out by
3 a notation in the patient's record, but not requiring that a
4 dentist be present when the authorized procedures are being
5 performed. The issuance of a prescription to a dental
6 laboratory by a dentist does not constitute general
7 supervision.

8 (j) "Public member" means a person who is not a health
9 professional. For purposes of board membership, any person with
10 a significant financial interest in a health service or
11 profession is not a public member.

12 (k) "Dentistry" means the healing art which is concerned
13 with the examination, diagnosis, treatment planning and care of
14 conditions within the human oral cavity and its adjacent
15 tissues and structures, as further specified in Section 17.

16 (l) "Branches of dentistry" means the various specialties
17 of dentistry which, for purposes of this Act, shall be limited
18 to the following: endodontics, oral and maxillofacial surgery,
19 orthodontics and dentofacial orthopedics, pediatric dentistry,
20 periodontics, prosthodontics, and oral and maxillofacial
21 radiology.

22 (m) "Specialist" means a dentist who has received a
23 specialty license pursuant to Section 11(b).

24 (n) "Dental technician" means a person who owns, operates
25 or is employed by a dental laboratory and engages in making,
26 providing, repairing or altering dental prosthetic appliances

1 and other artificial materials and devices which are returned
2 to a dentist for insertion into the human oral cavity or which
3 come in contact with its adjacent structures and tissues.

4 (o) "Impaired dentist" or "impaired dental hygienist"
5 means a dentist or dental hygienist who is unable to practice
6 with reasonable skill and safety because of a physical or
7 mental disability as evidenced by a written determination or
8 written consent based on clinical evidence, including
9 deterioration through the aging process, loss of motor skills,
10 abuse of drugs or alcohol, or a psychiatric disorder, of
11 sufficient degree to diminish the person's ability to deliver
12 competent patient care.

13 (p) "Nurse" means a registered professional nurse, a
14 certified registered nurse anesthetist licensed as an advanced
15 practice nurse, or a licensed practical nurse licensed under
16 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
17 ~~Act~~.

18 (q) "Patient of record" means a patient for whom the
19 patient's most recent dentist has obtained a relevant medical
20 and dental history and on whom the dentist has performed an
21 examination and evaluated the condition to be treated.

22 (r) "Dental emergency responder" means a dentist or dental
23 hygienist who is appropriately certified in emergency medical
24 response, as defined by the Department of Public Health.

25 (Source: P.A. 93-821, eff. 7-28-04; 94-409, eff. 12-31-05.)

1 Section 106. If and only if Senate Bill 214 of the 95th
2 General Assembly becomes law, the Illinois Dental Practice Act
3 is amended by changing Section 8.1 as follows:

4 (225 ILCS 25/8.1) (from Ch. 111, par. 2308.1)

5 (Section scheduled to be repealed on January 1, 2016)

6 Sec. 8.1. Permit for the administration of anesthesia and
7 sedation.

8 (a) No licensed dentist shall administer general
9 anesthesia, deep sedation, or conscious sedation without first
10 applying for and obtaining a permit for such purpose from the
11 Department. The Department shall issue such permit only after
12 ascertaining that the applicant possesses the minimum
13 qualifications necessary to protect public safety. A person
14 with a dental degree who administers anesthesia, deep sedation,
15 or conscious sedation in an approved hospital training program
16 under the supervision of either a licensed dentist holding such
17 permit or a physician licensed to practice medicine in all its
18 branches shall not be required to obtain such permit.

19 (b) In determining the minimum permit qualifications that
20 are necessary to protect public safety, the Department, by
21 rule, shall:

22 (1) establish the minimum educational and training
23 requirements necessary for a dentist to be issued an
24 appropriate permit;

25 (2) establish the standards for properly equipped

1 dental facilities (other than licensed hospitals and
2 ambulatory surgical treatment centers) in which general
3 anesthesia, deep sedation, or conscious sedation is
4 administered, as necessary to protect public safety;

5 (3) establish minimum requirements for all persons who
6 assist the dentist in the administration of general
7 anesthesia, deep sedation, or conscious sedation,
8 including minimum training requirements for each member of
9 the dental team, monitoring requirements, recordkeeping
10 requirements, and emergency procedures; and

11 (4) ensure that the dentist and all persons assisting
12 the dentist or monitoring the administration of general
13 anesthesia, deep sedation, or conscious sedation maintain
14 current certification in Basic Life Support (BLS).

15 (5) establish continuing education requirements in
16 sedation techniques for dentists who possess a permit under
17 this Section.

18 When establishing requirements under this Section, the
19 Department shall consider the current American Dental
20 Association guidelines on sedation and general anesthesia, the
21 current "Guidelines for Monitoring and Management of Pediatric
22 Patients During and After Sedation for Diagnostic and
23 Therapeutic Procedures" established by the American Academy of
24 Pediatrics and the American Academy of Pediatric Dentistry, and
25 the current parameters of care and Office Anesthesia Evaluation
26 (OAE) Manual established by the American Association of Oral

1 and Maxillofacial Surgeons.

2 (c) A licensed dentist must hold an appropriate permit
3 issued under this Section in order to perform dentistry while a
4 nurse anesthetist administers conscious sedation, and a valid
5 written collaborative ~~practice~~ agreement must exist between
6 the dentist and the nurse anesthetist, in accordance with the
7 Nursing and Advanced Practice Nursing Act.

8 A licensed dentist must hold an appropriate permit issued
9 under this Section in order to perform dentistry while a nurse
10 anesthetist administers deep sedation or general anesthesia,
11 and a valid written collaborative ~~practice~~ agreement must exist
12 between the dentist and the nurse anesthetist, in accordance
13 with the Nursing and Advanced Practice Nursing Act.

14 For the purposes of this subsection (c), "nurse
15 anesthetist" means a licensed certified registered nurse
16 anesthetist who holds a license as an advanced practice nurse.
17 (Source: 95SB0214enr.)

18 Section 110. The Health Care Worker Background Check Act is
19 amended by changing Section 25 as follows:

20 (225 ILCS 46/25)

21 Sec. 25. Persons ineligible to be hired by health care
22 employers and long-term care facilities.

23 (a) After January 1, 1996, January 1, 1997, or the
24 effective date of this amendatory Act of the 94th General

1 Assembly, as applicable, no health care employer shall
2 knowingly hire, employ, or retain any individual in a position
3 with duties involving direct care for clients, patients, or
4 residents, and no long-term care facility shall knowingly hire,
5 employ, or retain any individual in a position with duties that
6 involve or may involve contact with residents or access to the
7 living quarters or the financial, medical, or personal records
8 of residents, who has been convicted of committing or
9 attempting to commit one or more of the offenses defined in
10 Sections 8-1.1, 8-1.2, 9-1, 9-1.2, 9-2, 9-2.1, 9-3, 9-3.1,
11 9-3.2, 9-3.3, 10-1, 10-2, 10-3, 10-3.1, 10-4, 10-5, 10-7, 11-6,
12 11-9.1, 11-9.5, 11-19.2, 11-20.1, 12-1, 12-2, 12-3, 12-3.1,
13 12-3.2, 12-4, 12-4.1, 12-4.2, 12-4.3, 12-4.4, 12-4.5, 12-4.6,
14 12-4.7, 12-7.4, 12-11, 12-13, 12-14, 12-14.1, 12-15, 12-16,
15 12-19, 12-21, 12-21.6, 12-32, 12-33, 16-1, 16-1.3, 16A-3, 17-3,
16 18-1, 18-2, 18-3, 18-4, 18-5, 19-1, 19-3, 19-4, 20-1, 20-1.1,
17 24-1, 24-1.2, 24-1.5, or 33A-2 of the Criminal Code of 1961;
18 those provided in Section 4 of the Wrongs to Children Act;
19 those provided in Section 53 of the Criminal Jurisprudence Act;
20 those defined in Section 5, 5.1, 5.2, 7, or 9 of the Cannabis
21 Control Act; those defined in the Methamphetamine Control and
22 Community Protection Act; or those defined in Sections 401,
23 401.1, 404, 405, 405.1, 407, or 407.1 of the Illinois
24 Controlled Substances Act, unless the applicant or employee
25 obtains a waiver pursuant to Section 40.

26 (a-1) After January 1, 2004, no health care employer shall

1 knowingly hire any individual in a position with duties
2 involving direct care for clients, patients, or residents, and
3 no long-term care facility shall knowingly hire any individual
4 in a position with duties that involve or may involve contact
5 with residents or access to the living quarters or the
6 financial, medical, or personal records of residents, who has
7 (i) been convicted of committing or attempting to commit one or
8 more of the offenses defined in Section 12-3.3, 12-4.2-5, 16-2,
9 16G-15, 16G-20, 18-5, 20-1.2, 24-1.1, 24-1.2-5, 24-1.6,
10 24-3.2, or 24-3.3 of the Criminal Code of 1961; Section 4, 5,
11 6, 8, or 17.02 of the Illinois Credit Card and Debit Card Act;
12 or Section 5.1 of the Wrongs to Children Act; or (ii) violated
13 Section 50-50 of the Nurse Practice Act ~~Section 10-5 of the~~
14 ~~Nursing and Advanced Practice Nursing Act.~~

15 A UCIA criminal history record check need not be redone for
16 health care employees who have been continuously employed by a
17 health care employer since January 1, 2004, but nothing in this
18 Section prohibits a health care employer from initiating a
19 criminal history check for these employees.

20 A health care employer is not required to retain an
21 individual in a position with duties involving direct care for
22 clients, patients, or residents, and no long-term care facility
23 is required to retain an individual in a position with duties
24 that involve or may involve contact with residents or access to
25 the living quarters or the financial, medical, or personal
26 records of residents, who has been convicted of committing or

1 attempting to commit one or more of the offenses enumerated in
2 this subsection.

3 (b) A health care employer shall not hire, employ, or
4 retain any individual in a position with duties involving
5 direct care of clients, patients, or residents, and no
6 long-term care facility shall knowingly hire, employ, or retain
7 any individual in a position with duties that involve or may
8 involve contact with residents or access to the living quarters
9 or the financial, medical, or personal records of residents, if
10 the health care employer becomes aware that the individual has
11 been convicted in another state of committing or attempting to
12 commit an offense that has the same or similar elements as an
13 offense listed in subsection (a) or (a-1), as verified by court
14 records, records from a state agency, or an FBI criminal
15 history record check. This shall not be construed to mean that
16 a health care employer has an obligation to conduct a criminal
17 history records check in other states in which an employee has
18 resided.

19 (Source: P.A. 93-224, eff. 7-18-03; 94-556, eff. 9-11-05;
20 94-665, eff. 1-1-06; 94-1053, eff. 7-24-06.)

21 Section 115. The Health Care Worker Self-Referral Act is
22 amended by changing Section 15 as follows:

23 (225 ILCS 47/15)

24 Sec. 15. Definitions. In this Act:

1 (a) "Board" means the Health Facilities Planning Board.

2 (b) "Entity" means any individual, partnership, firm,
3 corporation, or other business that provides health services
4 but does not include an individual who is a health care worker
5 who provides professional services to an individual.

6 (c) "Group practice" means a group of 2 or more health care
7 workers legally organized as a partnership, professional
8 corporation, not-for-profit corporation, faculty practice plan
9 or a similar association in which:

10 (1) each health care worker who is a member or employee
11 or an independent contractor of the group provides
12 substantially the full range of services that the health
13 care worker routinely provides, including consultation,
14 diagnosis, or treatment, through the use of office space,
15 facilities, equipment, or personnel of the group;

16 (2) the services of the health care workers are
17 provided through the group, and payments received for
18 health services are treated as receipts of the group; and

19 (3) the overhead expenses and the income from the
20 practice are distributed by methods previously determined
21 by the group.

22 (d) "Health care worker" means any individual licensed
23 under the laws of this State to provide health services,
24 including but not limited to: dentists licensed under the
25 Illinois Dental Practice Act; dental hygienists licensed under
26 the Illinois Dental Practice Act; nurses and advanced practice

1 nurses licensed under the Nurse Practice Act ~~Nursing and~~
2 ~~Advanced Practice Nursing Act~~; occupational therapists
3 licensed under the Illinois Occupational Therapy Practice Act;
4 optometrists licensed under the Illinois Optometric Practice
5 Act of 1987; pharmacists licensed under the Pharmacy Practice
6 Act of 1987; physical therapists licensed under the Illinois
7 Physical Therapy Act; physicians licensed under the Medical
8 Practice Act of 1987; physician assistants licensed under the
9 Physician Assistant Practice Act of 1987; podiatrists licensed
10 under the Podiatric Medical Practice Act of 1987; clinical
11 psychologists licensed under the Clinical Psychologist
12 Licensing Act; clinical social workers licensed under the
13 Clinical Social Work and Social Work Practice Act;
14 speech-language pathologists and audiologists licensed under
15 the Illinois Speech-Language Pathology and Audiology Practice
16 Act; or hearing instrument dispensers licensed under the
17 Hearing Instrument Consumer Protection Act, or any of their
18 successor Acts.

19 (e) "Health services" means health care procedures and
20 services provided by or through a health care worker.

21 (f) "Immediate family member" means a health care worker's
22 spouse, child, child's spouse, or a parent.

23 (g) "Investment interest" means an equity or debt security
24 issued by an entity, including, without limitation, shares of
25 stock in a corporation, units or other interests in a
26 partnership, bonds, debentures, notes, or other equity

1 interests or debt instruments except that investment interest
2 for purposes of Section 20 does not include interest in a
3 hospital licensed under the laws of the State of Illinois.

4 (h) "Investor" means an individual or entity directly or
5 indirectly owning a legal or beneficial ownership or investment
6 interest, (such as through an immediate family member, trust,
7 or another entity related to the investor).

8 (i) "Office practice" includes the facility or facilities
9 at which a health care worker, on an ongoing basis, provides or
10 supervises the provision of professional health services to
11 individuals.

12 (j) "Referral" means any referral of a patient for health
13 services, including, without limitation:

14 (1) The forwarding of a patient by one health care
15 worker to another health care worker or to an entity
16 outside the health care worker's office practice or group
17 practice that provides health services.

18 (2) The request or establishment by a health care
19 worker of a plan of care outside the health care worker's
20 office practice or group practice that includes the
21 provision of any health services.

22 (Source: P.A. 89-72, eff. 12-31-95; 90-742, eff. 8-13-98.)

23 Section 120. The Medical Practice Act of 1987 is amended by
24 changing Sections 23 and 54.5 and by adding Section 8.1 as
25 follows:

1 (225 ILCS 60/8.1 new)

2 Sec. 8.1. Matters concerning advanced practice nurses. Any
3 proposed rules, amendments, second notice materials and
4 adopted rule or amendment materials, and policy statements
5 concerning advanced practice nurses shall be presented to the
6 Medical Licensing Board for review and comment. The
7 recommendations of both the Board of Nursing and the Medical
8 Licensing Board shall be presented to the Secretary for
9 consideration in making final decisions. Whenever the Board of
10 Nursing and the Medical Licensing Board disagree on a proposed
11 rule or policy, the Secretary shall convene a joint meeting of
12 the officers of each Board to discuss the resolution of any
13 such disagreements.

14 (225 ILCS 60/23) (from Ch. 111, par. 4400-23)

15 (Section scheduled to be repealed on December 31, 2008)

16 Sec. 23. Reports relating to professional conduct and
17 capacity.

18 (A) Entities required to report.

19 (1) Health care institutions. The chief administrator
20 or executive officer of any health care institution
21 licensed by the Illinois Department of Public Health shall
22 report to the Disciplinary Board when any person's clinical
23 privileges are terminated or are restricted based on a
24 final determination, in accordance with that institution's

1 by-laws or rules and regulations, that a person has either
2 committed an act or acts which may directly threaten
3 patient care, and not of an administrative nature, or that
4 a person may be mentally or physically disabled in such a
5 manner as to endanger patients under that person's care.
6 Such officer also shall report if a person accepts
7 voluntary termination or restriction of clinical
8 privileges in lieu of formal action based upon conduct
9 related directly to patient care and not of an
10 administrative nature, or in lieu of formal action seeking
11 to determine whether a person may be mentally or physically
12 disabled in such a manner as to endanger patients under
13 that person's care. The Medical Disciplinary Board shall,
14 by rule, provide for the reporting to it of all instances
15 in which a person, licensed under this Act, who is impaired
16 by reason of age, drug or alcohol abuse or physical or
17 mental impairment, is under supervision and, where
18 appropriate, is in a program of rehabilitation. Such
19 reports shall be strictly confidential and may be reviewed
20 and considered only by the members of the Disciplinary
21 Board, or by authorized staff as provided by rules of the
22 Disciplinary Board. Provisions shall be made for the
23 periodic report of the status of any such person not less
24 than twice annually in order that the Disciplinary Board
25 shall have current information upon which to determine the
26 status of any such person. Such initial and periodic

1 reports of impaired physicians shall not be considered
2 records within the meaning of The State Records Act and
3 shall be disposed of, following a determination by the
4 Disciplinary Board that such reports are no longer
5 required, in a manner and at such time as the Disciplinary
6 Board shall determine by rule. The filing of such reports
7 shall be construed as the filing of a report for purposes
8 of subsection (C) of this Section.

9 (2) Professional associations. The President or chief
10 executive officer of any association or society, of persons
11 licensed under this Act, operating within this State shall
12 report to the Disciplinary Board when the association or
13 society renders a final determination that a person has
14 committed unprofessional conduct related directly to
15 patient care or that a person may be mentally or physically
16 disabled in such a manner as to endanger patients under
17 that person's care.

18 (3) Professional liability insurers. Every insurance
19 company which offers policies of professional liability
20 insurance to persons licensed under this Act, or any other
21 entity which seeks to indemnify the professional liability
22 of a person licensed under this Act, shall report to the
23 Disciplinary Board the settlement of any claim or cause of
24 action, or final judgment rendered in any cause of action,
25 which alleged negligence in the furnishing of medical care
26 by such licensed person when such settlement or final

1 judgment is in favor of the plaintiff.

2 (4) State's Attorneys. The State's Attorney of each
3 county shall report to the Disciplinary Board all instances
4 in which a person licensed under this Act is convicted or
5 otherwise found guilty of the commission of any felony. The
6 State's Attorney of each county may report to the
7 Disciplinary Board through a verified complaint any
8 instance in which the State's Attorney believes that a
9 physician has willfully violated the notice requirements
10 of the Parental Notice of Abortion Act of 1995.

11 (5) State agencies. All agencies, boards, commissions,
12 departments, or other instrumentalities of the government
13 of the State of Illinois shall report to the Disciplinary
14 Board any instance arising in connection with the
15 operations of such agency, including the administration of
16 any law by such agency, in which a person licensed under
17 this Act has either committed an act or acts which may be a
18 violation of this Act or which may constitute
19 unprofessional conduct related directly to patient care or
20 which indicates that a person licensed under this Act may
21 be mentally or physically disabled in such a manner as to
22 endanger patients under that person's care.

23 (B) Mandatory reporting. All reports required by items
24 (34), (35), and (36) of subsection (A) of Section 22 and by
25 Section 23 shall be submitted to the Disciplinary Board in a
26 timely fashion. The reports shall be filed in writing within 60

1 days after a determination that a report is required under this
2 Act. All reports shall contain the following information:

3 (1) The name, address and telephone number of the
4 person making the report.

5 (2) The name, address and telephone number of the
6 person who is the subject of the report.

7 (3) The name and date of birth of any patient or
8 patients whose treatment is a subject of the report, if
9 available, or other means of identification if such
10 information is not available, identification of the
11 hospital or other healthcare facility where the care at
12 issue in the report was rendered, provided, however, no
13 medical records may be revealed.

14 (4) A brief description of the facts which gave rise to
15 the issuance of the report, including the dates of any
16 occurrences deemed to necessitate the filing of the report.

17 (5) If court action is involved, the identity of the
18 court in which the action is filed, along with the docket
19 number and date of filing of the action.

20 (6) Any further pertinent information which the
21 reporting party deems to be an aid in the evaluation of the
22 report.

23 The Disciplinary Board or Department may also exercise the
24 power under Section 38 of this Act to subpoena copies of
25 hospital or medical records in mandatory report cases alleging
26 death or permanent bodily injury. Appropriate rules shall be

1 adopted by the Department with the approval of the Disciplinary
2 Board.

3 When the Department has received written reports
4 concerning incidents required to be reported in items (34),
5 (35), and (36) of subsection (A) of Section 22, the licensee's
6 failure to report the incident to the Department under those
7 items shall not be the sole grounds for disciplinary action.

8 Nothing contained in this Section shall act to in any way,
9 waive or modify the confidentiality of medical reports and
10 committee reports to the extent provided by law. Any
11 information reported or disclosed shall be kept for the
12 confidential use of the Disciplinary Board, the Medical
13 Coordinators, the Disciplinary Board's attorneys, the medical
14 investigative staff, and authorized clerical staff, as
15 provided in this Act, and shall be afforded the same status as
16 is provided information concerning medical studies in Part 21
17 of Article VIII of the Code of Civil Procedure, except that the
18 Department may disclose information and documents to a federal,
19 State, or local law enforcement agency pursuant to a subpoena
20 in an ongoing criminal investigation. Furthermore, information
21 and documents disclosed to a federal, State, or local law
22 enforcement agency may be used by that agency only for the
23 investigation and prosecution of a criminal offense.

24 (C) Immunity from prosecution. Any individual or
25 organization acting in good faith, and not in a wilful and
26 wanton manner, in complying with this Act by providing any

1 report or other information to the Disciplinary Board or a peer
2 review committee, or assisting in the investigation or
3 preparation of such information, or by voluntarily reporting to
4 the Disciplinary Board or a peer review committee information
5 regarding alleged errors or negligence by a person licensed
6 under this Act, or by participating in proceedings of the
7 Disciplinary Board or a peer review committee, or by serving as
8 a member of the Disciplinary Board or a peer review committee,
9 shall not, as a result of such actions, be subject to criminal
10 prosecution or civil damages.

11 (D) Indemnification. Members of the Disciplinary Board,
12 the Medical Coordinators, the Disciplinary Board's attorneys,
13 the medical investigative staff, physicians retained under
14 contract to assist and advise the medical coordinators in the
15 investigation, and authorized clerical staff shall be
16 indemnified by the State for any actions occurring within the
17 scope of services on the Disciplinary Board, done in good faith
18 and not wilful and wanton in nature. The Attorney General shall
19 defend all such actions unless he or she determines either that
20 there would be a conflict of interest in such representation or
21 that the actions complained of were not in good faith or were
22 wilful and wanton.

23 Should the Attorney General decline representation, the
24 member shall have the right to employ counsel of his or her
25 choice, whose fees shall be provided by the State, after
26 approval by the Attorney General, unless there is a

1 determination by a court that the member's actions were not in
2 good faith or were wilful and wanton.

3 The member must notify the Attorney General within 7 days
4 of receipt of notice of the initiation of any action involving
5 services of the Disciplinary Board. Failure to so notify the
6 Attorney General shall constitute an absolute waiver of the
7 right to a defense and indemnification.

8 The Attorney General shall determine within 7 days after
9 receiving such notice, whether he or she will undertake to
10 represent the member.

11 (E) Deliberations of Disciplinary Board. Upon the receipt
12 of any report called for by this Act, other than those reports
13 of impaired persons licensed under this Act required pursuant
14 to the rules of the Disciplinary Board, the Disciplinary Board
15 shall notify in writing, by certified mail, the person who is
16 the subject of the report. Such notification shall be made
17 within 30 days of receipt by the Disciplinary Board of the
18 report.

19 The notification shall include a written notice setting
20 forth the person's right to examine the report. Included in
21 such notification shall be the address at which the file is
22 maintained, the name of the custodian of the reports, and the
23 telephone number at which the custodian may be reached. The
24 person who is the subject of the report shall submit a written
25 statement responding, clarifying, adding to, or proposing the
26 amending of the report previously filed. The person who is the

1 subject of the report shall also submit with the written
2 statement any medical records related to the report. The
3 statement and accompanying medical records shall become a
4 permanent part of the file and must be received by the
5 Disciplinary Board no more than 30 days after the date on which
6 the person was notified by the Disciplinary Board of the
7 existence of the original report.

8 The Disciplinary Board shall review all reports received by
9 it, together with any supporting information and responding
10 statements submitted by persons who are the subject of reports.
11 The review by the Disciplinary Board shall be in a timely
12 manner but in no event, shall the Disciplinary Board's initial
13 review of the material contained in each disciplinary file be
14 less than 61 days nor more than 180 days after the receipt of
15 the initial report by the Disciplinary Board.

16 When the Disciplinary Board makes its initial review of the
17 materials contained within its disciplinary files, the
18 Disciplinary Board shall, in writing, make a determination as
19 to whether there are sufficient facts to warrant further
20 investigation or action. Failure to make such determination
21 within the time provided shall be deemed to be a determination
22 that there are not sufficient facts to warrant further
23 investigation or action.

24 Should the Disciplinary Board find that there are not
25 sufficient facts to warrant further investigation, or action,
26 the report shall be accepted for filing and the matter shall be

1 deemed closed and so reported to the Secretary. The Secretary
2 shall then have 30 days to accept the Medical Disciplinary
3 Board's decision or request further investigation. The
4 Secretary shall inform the Board in writing of the decision to
5 request further investigation, including the specific reasons
6 for the decision. The individual or entity filing the original
7 report or complaint and the person who is the subject of the
8 report or complaint shall be notified in writing by the
9 Secretary of any final action on their report or complaint.

10 (F) Summary reports. The Disciplinary Board shall prepare,
11 on a timely basis, but in no event less than once ~~one~~ every
12 other month, a summary report of final actions taken upon
13 disciplinary files maintained by the Disciplinary Board. The
14 summary reports shall be made available to the public upon
15 request and payment of the fees set by the Department. This
16 publication may be made available to the public on the
17 Department's Internet website ~~sent by the Disciplinary Board to~~
18 ~~every health care facility licensed by the Illinois Department~~
19 ~~of Public Health, every professional association and society of~~
20 ~~persons licensed under this Act functioning on a statewide~~
21 ~~basis in this State, the American Medical Association, the~~
22 ~~American Osteopathic Association, the American Chiropractic~~
23 ~~Association, all insurers providing professional liability~~
24 ~~insurance to persons licensed under this Act in the State of~~
25 ~~Illinois, the Federation of State Medical Licensing Boards, and~~
26 ~~the Illinois Pharmacists Association.~~

1 (G) Any violation of this Section shall be a Class A
2 misdemeanor.

3 (H) If any such person violates the provisions of this
4 Section an action may be brought in the name of the People of
5 the State of Illinois, through the Attorney General of the
6 State of Illinois, for an order enjoining such violation or for
7 an order enforcing compliance with this Section. Upon filing of
8 a verified petition in such court, the court may issue a
9 temporary restraining order without notice or bond and may
10 preliminarily or permanently enjoin such violation, and if it
11 is established that such person has violated or is violating
12 the injunction, the court may punish the offender for contempt
13 of court. Proceedings under this paragraph shall be in addition
14 to, and not in lieu of, all other remedies and penalties
15 provided for by this Section.

16 (Source: P.A. 94-677, eff. 8-25-05.)

17 (225 ILCS 60/54.5)

18 (Section scheduled to be repealed on December 31, 2008)

19 Sec. 54.5. Physician delegation of authority.

20 (a) Physicians licensed to practice medicine in all its
21 branches may delegate care and treatment responsibilities to a
22 physician assistant under guidelines in accordance with the
23 requirements of the Physician Assistant Practice Act of 1987. A
24 physician licensed to practice medicine in all its branches may
25 enter into supervising physician agreements with no more than 2

1 physician assistants.

2 (b) A physician licensed to practice medicine in all its
3 branches in active clinical practice may collaborate with an
4 advanced practice nurse in accordance with the requirements of
5 the Nurse Practice Act ~~Title 15 of the Nursing and Advanced~~
6 ~~Practice Nursing Act~~. Collaboration is for the purpose of
7 providing medical consultation ~~direction~~, and no employment
8 relationship is required. A written collaborative agreement
9 shall conform to the requirements of Section 65-35 of the Nurse
10 Practice Act ~~Sections 15 15 and 15 20 of the Nursing and~~
11 ~~Advanced Practice Nursing Act~~. The written collaborative
12 agreement shall be for services the collaborating physician
13 generally provides to his or her patients in the normal course
14 of clinical medical practice. A written collaborative
15 agreement ~~Physician medical direction~~ shall be adequate with
16 respect to collaboration with advanced practice nurses
17 ~~certified nurse practitioners, certified nurse midwives, and~~
18 ~~clinical nurse specialists~~ if all of the following apply a
19 ~~collaborating physician:~~

20 (1) The agreement is written to promote the exercise of
21 professional judgment by the advanced practice nurse
22 commensurate with his or her education and experience. The
23 agreement need not describe the exact steps that an
24 advanced practice nurse must take with respect to each
25 specific condition, disease, or symptom, but must specify
26 those procedures that require a physician's presence as the

1 procedures are being performed. ~~participates in the joint~~
2 ~~formulation and joint approval of orders or guidelines with~~
3 ~~the advanced practice nurse and periodically reviews such~~
4 ~~orders and the services provided patients under such orders~~
5 ~~in accordance with accepted standards of medical practice~~
6 ~~and advanced practice nursing practice;~~

7 (2) Practice guidelines and orders are developed and
8 approved jointly by the advanced practice nurse and
9 collaborating physician, as needed, based on the practice
10 of the practitioners. Such guidelines and orders and the
11 patient services provided thereunder are periodically
12 reviewed by the collaborating physician. ~~is on site at~~
13 ~~least once a month to provide medical direction and~~
14 ~~consultation; and~~

15 (3) The advance practice nurse provides services the
16 collaborating physician generally provides to his or her
17 patients in the normal course of clinical practice, except
18 as set forth in subsection (b-5) of this Section. With
19 respect to labor and delivery, the collaborating physician
20 must provide delivery services in order to participate with
21 a certified nurse midwife. ~~is available through~~
22 ~~telecommunications for consultation on medical problems,~~
23 ~~complications, or emergencies or patient referral.~~

24 (4) The collaborating physician and advanced practice
25 nurse meet in person at least once a month to provide
26 collaboration and consultation.

1 (5) Methods of communication are available with the
2 collaborating physician in person or through
3 telecommunications for consultation, collaboration, and
4 referral as needed to address patient care needs.

5 (6) The agreement contains provisions detailing notice
6 for termination or change of status involving a written
7 collaborative agreement, except when such notice is given
8 for just cause.

9 (b-5) An anesthesiologist or physician licensed to
10 practice medicine in all its branches may collaborate with a
11 certified registered nurse anesthetist in accordance with
12 Section 65-35 of the Nurse Practice Act for the provision of
13 anesthesia services. With respect to the provision of
14 anesthesia services, the collaborating anesthesiologist or
15 physician shall have training and experience in the delivery of
16 anesthesia services consistent with Department rules.
17 ~~Collaboration Section 15-25 of the Nursing and Advanced~~
18 ~~Practice Nursing Act. Medical direction for a certified~~
19 ~~registered nurse anesthetist shall be adequate if:~~

20 (1) an anesthesiologist or a physician participates in
21 the joint formulation and joint approval of orders or
22 guidelines and periodically reviews such orders and the
23 services provided patients under such orders; and

24 (2) for anesthesia services, the anesthesiologist or
25 physician participates through discussion of and agreement
26 with the anesthesia plan and is physically present and

1 available on the premises during the delivery of anesthesia
2 services for diagnosis, consultation, and treatment of
3 emergency medical conditions. Anesthesia services in a
4 hospital shall be conducted in accordance with Section 10.7
5 of the Hospital Licensing Act and in an ambulatory surgical
6 treatment center in accordance with Section 6.5 of the
7 Ambulatory Surgical Treatment Center Act.

8 (b-10) The anesthesiologist or operating physician must
9 agree with the anesthesia plan prior to the delivery of
10 services.

11 (c) The supervising physician shall have access to the
12 medical records of all patients attended by a physician
13 assistant. The collaborating physician shall have access to the
14 medical records of all patients attended to by an advanced
15 practice nurse.

16 (d) Nothing in this Act shall be construed to limit the
17 delegation of tasks or duties by a physician licensed to
18 practice medicine in all its branches to a licensed practical
19 nurse, a registered professional nurse, or other persons
20 ~~personnel~~.

21 (e) A physician shall not be liable for the acts or
22 omissions of a physician assistant or advanced practice nurse
23 solely on the basis of having signed a supervision agreement or
24 guidelines or a collaborative agreement, an order, a standing
25 medical order, a standing delegation order, or other order or
26 guideline authorizing a physician assistant or advanced

1 practice nurse to perform acts, unless the physician has reason
2 to believe the physician assistant or advanced practice nurse
3 lacked the competency to perform the act or acts or commits
4 willful and wanton misconduct.

5 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

6 Section 125. The Nursing and Advanced Practice Nursing Act
7 is amended by changing and renumbering Titles 5, 10, 15, 17,
8 and 20 as follows:

9 (225 ILCS 65/Art. 50 heading new) (was 225 ILCS 65/Tit. 5
10 heading)

11 ARTICLE 50 ~~TITLE 5~~. GENERAL PROVISIONS

12 (225 ILCS 65/50-1 new) (was 225 ILCS 65/5-1)
13 (Section scheduled to be repealed on January 1, 2008)

14 Sec. 50-1 ~~5-1~~. This Act ~~Article~~ may be cited as the Nurse
15 ~~Nursing and Advanced Practice Nursing Act, and throughout this~~
16 ~~Article, references to this Act shall mean this Article.~~

17 (Source: P.A. 90-742, eff. 8-13-98.)

18 (225 ILCS 65/50-5 new) (was 225 ILCS 65/5-5)
19 (Section scheduled to be repealed on January 1, 2008)

20 Sec. 50-5 ~~5-5~~. Legislative purpose. The practice of
21 professional and practical nursing in the State of Illinois is
22 hereby declared to affect the public health, safety, and

1 welfare and to be subject to regulation and control in the
2 public interest. It is further declared to be a matter of
3 public interest and concern that the practice of nursing, as
4 defined in this Act, merit and receive the confidence of the
5 public and that only qualified persons be authorized to so
6 practice in the State of Illinois. This Act shall be liberally
7 construed to best carry out these subjects and purposes.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 (225 ILCS 65/50-10 new) (was 225 ILCS 65/5-10)

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

11 Sec. 50-10 ~~5-10~~. Definitions. Each of the following terms,
12 when used in this Act, shall have the meaning ascribed to it in
13 this Section, except where the context clearly indicates
14 otherwise:

15 ~~(a) "Department" means the Department of Professional~~
16 ~~Regulation.~~

17 ~~(b) "Director" means the Director of Professional~~
18 ~~Regulation.~~

19 ~~(c) "Board" means the Board of Nursing appointed by the~~
20 ~~Director.~~

21 ~~(d) "Academic year" means the customary annual schedule of~~
22 ~~courses at a college, university, or approved school,~~
23 ~~customarily regarded as the school year as distinguished from~~
24 ~~the calendar year.~~

25 "Advanced practice nurse" or "APN" means a person who has

1 met the qualifications for a (i) certified nurse midwife (CNM);
2 (ii) certified nurse practitioner (CNP); (iii) certified
3 registered nurse anesthetist (CRNA); or (iv) clinical nurse
4 specialist (CNS) and has been licensed by the Department. All
5 advanced practice nurses licensed and practicing in the State
6 of Illinois shall use the title APN and may use speciality
7 credentials after their name.

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

12 "Board" means the Board of Nursing appointed by the
13 Secretary.

14 "Collaboration" means a process involving 2 or more health
15 care professionals working together, each contributing one's
16 respective area of expertise to provide more comprehensive
17 patient care.

18 "Consultation" means the process whereby an advanced
19 practice nurse seeks the advice or opinion of another health
20 care professional.

21 "Credentialed" means the process of assessing and
22 validating the qualifications of a health care professional.

23 "Current nursing practice update course" means a planned
24 nursing education curriculum approved by the Department
25 consisting of activities that have educational objectives,
26 instructional methods, content or subject matter, clinical

1 practice, and evaluation methods, related to basic review and
2 updating content and specifically planned for those nurses
3 previously licensed in the United States or its territories and
4 preparing for reentry into nursing practice.

5 "Dentist" means a person licensed to practice dentistry
6 under the Illinois Dental Practice Act.

7 "Department" means the Department of Financial and
8 Professional Regulation.

9 "Impaired nurse" means a nurse licensed under this Act who
10 is unable to practice with reasonable skill and safety because
11 of a physical or mental disability as evidenced by a written
12 determination or written consent based on clinical evidence,
13 including loss of motor skills, abuse of drugs or alcohol, or a
14 psychiatric disorder, of sufficient degree to diminish his or
15 her ability to deliver competent patient care.

16 "License-pending advanced practice nurse" means a
17 registered professional nurse who has completed all
18 requirements for licensure as an advanced practice nurse except
19 the certification examination and has applied to take the next
20 available certification exam and received a temporary license
21 from the Department.

22 "License-pending registered nurse" means a person who has
23 passed the Department-approved registered nurse licensure exam
24 and has applied for a license from the Department. A
25 license-pending registered nurse shall use the title "RN lic
26 pend" on all documentation related to nursing practice.

1 "Physician" means a person licensed to practice medicine in
2 all its branches under the Medical Practice Act of 1987.

3 "Podiatrist" means a person licensed to practice podiatry
4 under the Podiatric Medical Practice Act of 1987.

5 ~~(f) "Nursing Act Coordinator" means a registered~~
6 ~~professional nurse appointed by the Director to carry out the~~
7 ~~administrative policies of the Department.~~

8 ~~(g) "Assistant Nursing Act Coordinator" means a registered~~
9 ~~professional nurse appointed by the Director to assist in~~
10 ~~carrying out the administrative policies of the Department.~~

11 ~~(h) "Registered" is the equivalent of "licensed".~~

12 ~~(i) "Practical nurse" or "licensed practical nurse" means a~~
13 ~~person who is licensed as a practical nurse under this Act and~~
14 ~~practices practical nursing as defined in paragraph (j) of this~~
15 ~~Act Section. Only a practical nurse licensed under this Act is~~
16 ~~entitled to use the title "licensed practical nurse" and the~~
17 ~~abbreviation "L.P.N."~~.

18 ~~(j) "Practical nursing" means the performance of nursing~~
19 ~~acts requiring the basic nursing knowledge, judgement, and~~
20 ~~skill acquired by means of completion of an approved practical~~
21 ~~nursing education program. Practical nursing includes~~
22 ~~assisting in the nursing process as delegated by and under the~~
23 ~~direction of a registered professional nurse or an advanced~~
24 ~~practice nurse. The practical nurse may work under the~~
25 ~~direction of a licensed physician, dentist, podiatrist, or~~
26 ~~other health care professional determined by the Department.~~

1 "Privileged" means the authorization granted by the
2 governing body of a healthcare facility, agency, or
3 organization to provide specific patient care services within
4 well-defined limits, based on qualifications reviewed in the
5 credentialing process.

6 ~~(k)~~ "Registered Nurse" or "Registered Professional Nurse"
7 means a person who is licensed as a professional nurse under
8 this Act and practices nursing as defined in ~~paragraph (l)~~ of
9 this Act Section. Only a registered nurse licensed under this
10 Act is entitled to use the titles "registered nurse" and
11 "registered professional nurse" and the abbreviation, "R.N.".

12 ~~(l)~~ "Registered professional nursing practice" is a
13 scientific process founded on a professional body of knowledge;
14 it is a learned profession based on the understanding of the
15 human condition across the life span and environment and
16 includes all nursing specialities and means the performance of
17 any nursing act based upon professional knowledge, judgment,
18 and skills acquired by means of completion of an approved
19 ~~registered~~ professional nursing education program. A
20 registered professional nurse provides holistic nursing care
21 ~~emphasizing the importance of the whole and the interdependence~~
22 ~~of its parts~~ through the nursing process to individuals,
23 groups, families, or communities, that includes but is not
24 limited to: (1) the assessment of healthcare needs, nursing
25 diagnosis, planning, implementation, and nursing evaluation;
26 (2) the promotion, maintenance, and restoration of health; (3)

1 counseling, patient education, health education, and patient
2 advocacy; (4) the administration of medications and treatments
3 as prescribed by a physician licensed to practice medicine in
4 all of its branches, a licensed dentist, a licensed podiatrist,
5 or a licensed optometrist or as prescribed by a physician
6 assistant in accordance with written guidelines required under
7 the Physician Assistant Practice Act of 1987 or by an advanced
8 practice nurse in accordance with Article 65 of this ~~a written~~
9 ~~collaborative agreement required under the Nursing and~~
10 ~~Advanced Practice Nursing~~ Act; (5) the coordination and
11 management of the nursing plan of care; (6) the delegation to
12 and supervision of individuals who assist the registered
13 professional nurse implementing the plan of care; and (7)
14 teaching ~~and supervision of~~ nursing students. The foregoing
15 shall not be deemed to include those acts of medical diagnosis
16 or prescription of therapeutic or corrective measures ~~that are~~
17 ~~properly performed only by physicians licensed in the State of~~
18 ~~Illinois.~~

19 ~~(m) "Current nursing practice update course" means a~~
20 ~~planned nursing education curriculum approved by the~~
21 ~~Department consisting of activities that have educational~~
22 ~~objectives, instructional methods, content or subject matter,~~
23 ~~clinical practice, and evaluation methods, related to basic~~
24 ~~review and updating content and specifically planned for those~~
25 ~~nurses previously licensed in the United States or its~~
26 ~~territories and preparing for reentry into nursing practice.~~

1 ~~(n)~~ "Professional assistance program for nurses" means a
2 professional assistance program that meets criteria
3 established by the Board of Nursing and approved by the
4 Secretary ~~Director~~, which provides a non-disciplinary
5 treatment approach for nurses licensed under this Act whose
6 ability to practice is compromised by alcohol or chemical
7 substance addiction.

8 "Secretary" means the Secretary of Financial and
9 Professional Regulation.

10 "Unencumbered license" means a license issued in good
11 standing.

12 "Written collaborative agreement" means a written
13 agreement between an advanced practice nurse and a
14 collaborating physician, dentist, or podiatrist pursuant to
15 Section 65-35.

16 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98;
17 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

18 (225 ILCS 65/50-15 new) (was 225 ILCS 65/5-15)

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

20 Sec. 50-15 ~~5-15~~. Policy; application of Act.

21 (a) For the protection of life and the promotion of health,
22 and the prevention of illness and communicable diseases, any
23 person practicing or offering to practice advanced,
24 professional, or ~~and~~ practical nursing in Illinois shall submit
25 evidence that he or she is qualified to practice, and shall be

1 licensed as provided under this Act. No person shall practice
2 or offer to practice advanced, professional, or practical
3 nursing in Illinois or use any title, sign, card or device to
4 indicate that such a person is practicing professional or
5 practical nursing unless such person has been licensed under
6 the provisions of this Act.

7 (b) This Act does not prohibit the following:

8 (1) ~~(a)~~ The practice of nursing in Federal employment
9 in the discharge of the employee's duties by a person who
10 is employed by the United States government or any bureau,
11 division or agency thereof and is a legally qualified and
12 licensed nurse of another state or territory and not in
13 conflict with Sections 50-50, 55-10, 60-10, and 70-5 ~~10-5,~~
14 ~~10-30, and 10-45~~ of this Act.

15 (2) ~~(b)~~ Nursing that is included in the ~~their~~ program
16 of study by students enrolled in programs of nursing or in
17 current nurse practice update courses approved by the
18 Department.

19 (3) ~~(c)~~ The furnishing of nursing assistance in an
20 emergency.

21 (4) ~~(d)~~ The practice of nursing by a nurse who holds an
22 active license in another state when providing services to
23 patients in Illinois during a bonafide emergency or in
24 immediate preparation for or during interstate transit.

25 (5) ~~(e)~~ The incidental care of the sick by members of
26 the family, domestic servants or housekeepers, or care of

1 the sick where treatment is by prayer or spiritual means.

2 (6) ~~(f)~~ Persons from being employed as unlicensed
3 assistive personnel ~~nursing aides, attendants, orderlies,~~
4 ~~and other auxiliary workers~~ in private homes, long term
5 care facilities, nurseries, hospitals or other
6 institutions.

7 ~~(g) The practice of practical nursing by one who has~~
8 ~~applied in writing to the Department in form and substance~~
9 ~~satisfactory to the Department, for a license as a licensed~~
10 ~~practical nurse and who has complied with all the~~
11 ~~provisions under Section 10-30, except the passing of an~~
12 ~~examination to be eligible to receive such license, until:~~
13 ~~the decision of the Department that the applicant has~~
14 ~~failed to pass the next available examination authorized by~~
15 ~~the Department or has failed, without an approved excuse,~~
16 ~~to take the next available examination authorized by the~~
17 ~~Department or until the withdrawal of the application, but~~
18 ~~not to exceed 3 months. An applicant practicing practical~~
19 ~~nursing under this Section who passes the examination,~~
20 ~~however, may continue to practice under this Section until~~
21 ~~such time as he or she receives his or her license to~~
22 ~~practice or until the Department notifies him or her that~~
23 ~~the license has been denied. No applicant for licensure~~
24 ~~practicing under the provisions of this paragraph shall~~
25 ~~practice practical nursing except under the direct~~
26 ~~supervision of a registered professional nurse licensed~~

1 ~~under this Act or a licensed physician, dentist or~~
2 ~~podiatrist. In no instance shall any such applicant~~
3 ~~practice or be employed in any supervisory capacity.~~

4 (7) ~~(h)~~ The practice of practical nursing by one who is
5 a licensed practical nurse under the laws of another U.S.
6 jurisdiction and has applied in writing to the Department,
7 in form and substance satisfactory to the Department, for a
8 license as a licensed practical nurse and who is qualified
9 to receive such license under this Act ~~Section 10-30~~, until
10 (i) ~~(1)~~ the expiration of 6 months after the filing of such
11 written application, (ii) ~~(2)~~ the withdrawal of such
12 application, or (iii) ~~(3)~~ the denial of such application by
13 the Department.

14 ~~(i) The practice of professional nursing by one who has~~
15 ~~applied in writing to the Department in form and substance~~
16 ~~satisfactory to the Department for a license as a~~
17 ~~registered professional nurse and has complied with all the~~
18 ~~provisions under Section 10-30 except the passing of an~~
19 ~~examination to be eligible to receive such license, until~~
20 ~~the decision of the Department that the applicant has~~
21 ~~failed to pass the next available examination authorized by~~
22 ~~the Department or has failed, without an approved excuse,~~
23 ~~to take the next available examination authorized by the~~
24 ~~Department or until the withdrawal of the application, but~~
25 ~~not to exceed 3 months. An applicant practicing~~
26 ~~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 (8) The practice of advanced practice nursing by one
12 who is an advanced practice 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 an
16 advanced practice nurse and who is qualified to receive
17 such license under this Act, until (i) the expiration of 6
18 months after the filing of such written application, (ii)
19 the withdrawal of such application, or (iii) the denial of
20 such application by the Department.

21 (9) ~~(j)~~ The practice of professional nursing by one who
22 is a registered professional nurse under the laws of
23 another state, territory of the United States or country
24 and has applied in writing to the Department, in form and
25 substance satisfactory to the Department, for a license as
26 a registered professional nurse and who is qualified to

1 receive such license under Section 55-10 ~~10-30~~, until (1)
2 the expiration of 6 months after the filing of such written
3 application, (2) the withdrawal of such application, or (3)
4 the denial of such application by the Department.

5 (10) ~~(*)~~ The practice of professional nursing that is
6 included in a program of study by one who is a registered
7 professional nurse under the laws of another state or
8 territory of the United States or foreign country,
9 territory or province and who is enrolled in a graduate
10 nursing education program or a program for the completion
11 of a baccalaureate nursing degree in this State, which
12 includes clinical supervision by faculty as determined by
13 the educational institution offering the program and the
14 health care organization where the practice of nursing
15 occurs. ~~The educational institution will file with the~~
16 ~~Department each academic term a list of the names and~~
17 ~~origin of license of all professional nurses practicing~~
18 ~~nursing as part of their programs under this provision.~~

19 (11) ~~(1)~~ Any person licensed in this State under any
20 other Act from engaging in the practice for which she or he
21 is licensed.

22 (12) ~~(m)~~ Delegation to authorized direct care staff
23 trained under Section 15.4 of the Mental Health and
24 Developmental Disabilities Administrative Act consistent
25 with the policies of the Department.

26 (13) Nothing in this Act shall be construed to limit

1 the delegation of tasks or duties by a physician, dentist,
2 or podiatrist to a licensed practical nurse, a registered
3 professional nurse, or other persons.

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

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

9 (225 ILCS 65/50-20 new) (was 225 ILCS 65/5-20)

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

11 Sec. 50-20 ~~5-20~~. Unlicensed practice; violation; civil
12 penalty.

13 (a) Any person who practices, offers to practice, attempts
14 to practice, or holds oneself out to practice nursing without
15 being licensed under this Act shall, in addition to any other
16 penalty provided by law, pay a civil penalty to the Department
17 in an amount not to exceed \$10,000 ~~\$5,000~~ for each offense as
18 determined by the Department. The civil penalty shall be
19 assessed by the Department after a hearing is held in
20 accordance with the provisions set forth in this Act regarding
21 the provision of a hearing for the discipline of a licensee.

22 (b) The Department has the authority and power to
23 investigate any and all unlicensed activity.

24 (c) The civil penalty shall be paid within 60 days after
25 the effective date of the order imposing the civil penalty. The

1 order shall constitute a judgment and may be filed and
2 execution had thereon in the same manner as any judgment from
3 any court of record.

4 (Source: P.A. 89-474, eff. 6-18-96; 90-742, eff. 8-13-98.)

5 (225 ILCS 65/50-25 new) (was 225 ILCS 65/5-21)

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

7 Sec. 50-25 ~~5-21~~. No registered nurse or licensed practical
8 nurse may perform refractions and other determinations of
9 visual function or eye health diagnosis. A registered nurse or
10 licensed practical nurse may participate in these activities
11 with the direct on-site supervision of an optometrist licensed
12 under the Illinois Optometric Practice Act of 1987 or a
13 physician licensed to practice medicine in all its branches
14 under the Medical Practice Act of 1987.

15 (Source: P.A. 92-367, eff. 8-15-01.)

16 (225 ILCS 65/50-30 new) (was 225 ILCS 65/5-22)

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

18 Sec. 50-30 ~~5-22~~. Social Security Number on license
19 application. In addition to any other information required to
20 be contained in an the application for licensure under this
21 Act, every application for an original, renewal, or restored
22 license under this Act shall include the applicant's Social
23 Security Number.

24 (Source: P.A. 90-144, eff. 7-23-97; 90-742, eff. 8-13-98.)

1 (225 ILCS 65/50-35 new) (was 225 ILCS 65/5-23)

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

3 Sec. 50-35 ~~5-23~~. Criminal history records background
4 check. Each applicant for licensure by examination or
5 restoration shall have his or her fingerprints submitted to the
6 Department of State Police in an electronic format that
7 complies with the form and manner for requesting and furnishing
8 criminal history record information as prescribed by the
9 Department of State Police. These fingerprints shall be checked
10 against the Department of State Police and Federal Bureau of
11 Investigation criminal history record databases now and
12 hereafter filed. The Department of State Police shall charge
13 applicants a fee for conducting the criminal history records
14 check, which shall be deposited into the State Police Services
15 Fund and shall not exceed the actual cost of the records check.
16 The Department of State Police shall furnish, pursuant to
17 positive identification, records of Illinois convictions to
18 the Department. The Department may require applicants to pay a
19 separate fingerprinting fee, either to the Department or to a
20 vendor. The Department, in its discretion, may allow an
21 applicant who does not have reasonable access to a designated
22 vendor to provide his or her fingerprints in an alternative
23 manner. The Department may adopt any rules necessary to
24 implement this Section. ~~After the effective date of this~~
25 ~~amendatory Act of the 91st General Assembly, the Department~~

1 ~~shall require an applicant for initial licensure under this Act~~
2 ~~to submit to a criminal background check by the Illinois State~~
3 ~~Police and the Federal Bureau of Investigation as part of the~~
4 ~~qualification for licensure. If an applicant's criminal~~
5 ~~background check indicates criminal conviction, the applicant~~
6 ~~must further submit to a fingerprint based criminal background~~
7 ~~check. The applicant's name, sex, race, date of birth, and~~
8 ~~social security number shall be forwarded to the Illinois State~~
9 ~~Police to be searched against the Illinois criminal history~~
10 ~~records database in the form and manner prescribed by the~~
11 ~~Illinois State Police. The Illinois State Police shall charge a~~
12 ~~fee for conducting the search, which shall be deposited in the~~
13 ~~State Police Services Fund and shall not exceed the cost of the~~
14 ~~inquiry. If a search of the Illinois criminal history records~~
15 ~~database indicates that the applicant has a conviction record,~~
16 ~~a fingerprint based criminal history records check shall be~~
17 ~~required. Each applicant requiring a fingerprint based search~~
18 ~~shall submit his or her fingerprints to the Illinois State~~
19 ~~Police in the form and manner prescribed by the Illinois State~~
20 ~~Police. These fingerprints shall be checked against the~~
21 ~~fingerprint records now and hereafter filed in the Illinois~~
22 ~~State Police and Federal Bureau of Investigation criminal~~
23 ~~history records databases. The Illinois State Police shall~~
24 ~~charge a fee for conducting the criminal history records check,~~
25 ~~which shall be deposited in the State Police Services Fund and~~
26 ~~shall not exceed the actual cost of the records check. The~~

1 ~~Illinois State Police shall furnish, pursuant to positive~~
2 ~~identification, records of Illinois convictions to the~~
3 ~~Department. The Department shall adopt rules to implement this~~
4 ~~Section.~~

5 (Source: P.A. 92-744, eff. 7-25-02; 93-418, eff. 1-1-04.)

6 (225 ILCS 65/50-40 new) (was 225 ILCS 65/5-25)

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

8 Sec. 50-40 ~~5-25~~. Emergency care; civil liability.

9 Exemption from civil liability for emergency care is as
10 provided in the Good Samaritan Act.

11 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

12 (225 ILCS 65/50-45 new) (was 225 ILCS 65/5-30)

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

14 Sec. 50-45 ~~5-30~~. Services rendered without compensation;

15 civil liability. Exemption from civil liability for services
16 rendered without compensation is as provided in the Good
17 Samaritan Act.

18 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

19 (225 ILCS 65/50-50 new) (was 225 ILCS 65/10-5)

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

21 Sec. 50-50 ~~10-5~~. Prohibited acts.

22 (a) No person shall:

23 (1) Practice as an advanced practice nurse without a

1 valid license as an advanced practice nurse, except as
2 provided in Section 50-15 of this Act;

3 (2) ~~(a)~~ Practice professional nursing without a valid
4 license as a registered professional nurse except as
5 provided in ~~paragraphs (i) and (j) of Section 50-15~~ 5-15 of
6 this Act;

7 (3) ~~(b)~~ Practice practical nursing without a valid
8 license as a licensed practical nurse~~r~~ or practice
9 practical nursing, ~~other than under the direction of a~~
10 ~~licensed physician, licensed dentist, or registered~~
11 ~~professional nurse;~~ except as provided in ~~paragraphs (g),~~
12 ~~(h), and (j) of Section 50-15~~ 5-15 of this Act;

13 (4) ~~(c)~~ Practice nursing under cover of any diploma,
14 license, or record illegally or fraudulently obtained or
15 signed or issued unlawfully or under fraudulent
16 representation;

17 (5) ~~(d)~~ Practice nursing during the time her or his
18 license is suspended, revoked, expired or on inactive
19 status;

20 (6) ~~(e)~~ Use any words, abbreviations, figures,
21 letters, title, sign, card, or device tending to imply that
22 she or he is a registered professional nurse, including the
23 titles or initials, "Nurse," "Registered Nurse,"
24 "Professional Nurse," "Registered Professional Nurse,"
25 "Certified Nurse," "Trained Nurse," "Graduate Nurse,"
26 "P.N.," or "R.N.," or "R.P.N." or similar titles or

1 initials with intention of indicating practice without a
2 valid license as a registered professional nurse;

3 (7) Use any words, abbreviations, figures, letters,
4 titles, signs, cards, or devices tending to imply that she
5 or he is an advanced practice nurse, including the titles
6 or initials "Advanced Practice Nurse", "A.P.N.", or
7 similar titles or initials, with the intention of
8 indicating practice as an advanced practice nurse without a
9 valid license as an advanced practice nurse under this Act.

10 (8) ~~(f)~~ Use any words, abbreviations figures, letters,
11 title, sign, card, or device tending to imply that she or
12 he is a licensed practical nurse including the titles or
13 initials "Practical Nurse," "Licensed Practical Nurse,"
14 "P.N.," or "L.P.N.," or similar titles or initials with
15 intention of indicated practice as a licensed practical
16 nurse without a valid license as a licensed practical nurse
17 under this Act;

18 (9) ~~(f-5)~~ Advertise services regulated under this Act
19 without including in every advertisement his or her title
20 as it appears on the license or the initials authorized
21 under this Act;

22 (10) ~~(g)~~ Obtain or furnish a license by or for money or
23 any other thing of value other than the fees required under
24 this Act ~~by Section 20-35,~~ or by any fraudulent
25 representation or act;

26 (11) ~~(h)~~ Make any wilfully false oath or affirmation

1 required by this Act;

2 (12) ~~(i)~~ Conduct a nursing education program preparing
3 persons for licensure that has not been approved by the
4 Department;

5 (13) ~~(j)~~ Represent that any school or course is
6 approved or accredited as a school or course for the
7 education of registered professional nurses or licensed
8 practical nurses unless such school or course is approved
9 by the Department under the provisions of this Act;

10 (14) ~~(k)~~ Attempt or offer to do any of the acts
11 enumerated in this Section, or knowingly aid, abet, assist
12 in the doing of any such acts or in the attempt or offer to
13 do any of such acts;

14 ~~(l) Seek employment as a registered professional nurse~~
15 ~~under the terms of paragraphs (i) and (j) of Section 5-15 of~~
16 ~~this Act without possessing a written authorization which has~~
17 ~~been issued by the Department or designated testing service and~~
18 ~~which evidences the filing of the written application referred~~
19 ~~to in paragraphs (i) and (j) of Section 5-15 of this Act;~~

20 ~~(m) Seek employment as a licensed practical nurse under the~~
21 ~~terms of paragraphs (g) and (h) of Section 5-15 of this Act~~
22 ~~without possessing a written authorization which has been~~
23 ~~issued by the Department or designated testing service and~~
24 ~~which evidences the filing of the written application referred~~
25 ~~to in paragraphs (g) and (h) of Section 5-15 of this Act;~~

26 (15) ~~(n)~~ Employ ~~or utilize~~ persons not licensed under

1 this Act to practice professional nursing or practical
2 nursing; and

3 (16) ~~(e)~~ Otherwise intentionally violate any provision
4 of this Act.

5 (17) Retaliate against any nurse who reports unsafe,
6 unethical, or illegal health care practices or conditions.

7 (18) Be deemed a supervisor when delegating nursing
8 activities or tasks as authorized under this Act.

9 (b) Any person, including a firm, association or
10 corporation who violates any provision of this Section shall be
11 guilty of a Class A misdemeanor.

12 (Source: P.A. 90-742, eff. 8-13-98; 91-310, eff. 1-1-00.)

13 (225 ILCS 65/50-55 new) (was 225 ILCS 65/10-10)

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

15 Sec. 50-55 ~~10-10~~. Department powers and duties.

16 (a) The Department shall exercise the powers and duties
17 prescribed by the Civil Administrative Code of Illinois for
18 administration of licensing acts and shall exercise other
19 powers and duties necessary for effectuating the purpose of
20 this Act. None of the functions, powers, or duties of the
21 Department with respect to licensure and examination shall be
22 exercised by the Department except upon review by the Board.
23 The Department shall adopt rules to implement, interpret, or
24 make specific the provisions and purposes of this Act; however
25 no such rules shall be adopted by the Department except upon

1 review by the Board.

2 (b) The Department shall ~~:(1)~~ prepare and maintain a list
3 of approved programs of professional nursing education and
4 programs of practical nursing education in this State, whose
5 graduates, if they have the other necessary qualifications
6 provided in this Act, shall be eligible to apply for a license
7 to practice nursing in this State. ~~.~~

8 ~~(2) promulgate rules defining what constitutes an~~
9 ~~approved program of professional nursing education and~~
10 ~~what constitutes an approved program of practical nursing~~
11 ~~education; and~~

12 ~~(3) adopt rules for examination of candidates for~~
13 ~~licenses and for issuance of licenses authorizing~~
14 ~~candidates upon passing an examination to practice under~~
15 ~~this Act.~~

16 (c) The Department may act upon the recommendations of the
17 Center for Nursing Advisory Board.

18 (Source: P.A. 94-1020, eff. 7-11-06.)

19 (225 ILCS 65/50-60 new) (was 225 ILCS 65/10-15)

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

21 Sec. 50-60 ~~10-15~~. Nursing ~~Act~~ Coordinator; Assistant
22 Nursing Coordinator. The Secretary Department shall appoint
23 ~~obtain~~, pursuant to the Personnel Code, a Nursing ~~Act~~
24 Coordinator and an Assistant Nursing Coordinator ~~assistants~~.
25 The Nursing Coordinator and Assistant Nursing Coordinator

1 ~~assistants~~ shall be registered professional nurses licensed in
2 this State who have ~~and~~ graduated from an approved school
3 ~~schools~~ of nursing and ~~each shall have been actively engaged in~~
4 ~~nursing education not less than one year prior to appointment.~~
5 ~~The Nursing Act Coordinator shall~~ hold at least a master's
6 degree in nursing from an accredited ~~approved~~ college or
7 university ~~and shall have at least 5 years experience since~~
8 ~~graduation in progressively responsible positions in nursing~~
9 ~~education. Each assistant shall hold at least a master's degree~~
10 ~~in nursing from an approved college or university and shall~~
11 ~~have at least 3 years experience since graduation in~~
12 ~~progressively responsible positions in nursing education. The~~
13 ~~Nursing Act Coordinator and assistants shall perform such~~
14 ~~administrative functions as may be delegated to them by the~~
15 ~~Director.~~

16 (Source: P.A. 90-742, eff. 8-13-98.)

17 (225 ILCS 65/50-65 new) (was 225 ILCS 65/10-25)

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

19 Sec. 50-65 ~~10-25~~. Board.

20 (a) The term of each member of the Board of Nursing and the
21 Advanced Practice Nursing Board serving before the effective
22 date of this amendatory Act of the 95th General Assembly shall
23 terminate on the effective date of this amendatory Act of the
24 95th General Assembly. Beginning on the effective date of this
25 amendatory Act of the 95th General Assembly, the Secretary ~~The~~

1 ~~Director~~ shall solicit recommendations from nursing
2 organizations and appoint the Board of Nursing, which, ~~beginning~~
3 ~~January 1, 2000,~~ shall consist of 13 members, one of
4 whom shall be a practical nurse; one of whom shall be a
5 practical nurse educator; one of whom shall be a registered
6 professional nurse in practice; one of whom shall be an
7 associate degree nurse educator; one of whom shall be a
8 baccalaureate degree nurse educator; one of whom shall be a
9 nurse who is actively engaged in direct care; one of whom shall
10 be a registered professional nurse actively engaged in direct
11 care; one of whom shall be a nursing administrator; 4 of whom
12 shall be advanced practice nurses representing CNS, CNP, CNM,
13 and CRNA practice; and one of whom shall be a public member who
14 is not employed in and has no material interest in any health
15 care field. The Board shall receive actual and necessary
16 expenses incurred in the performance of their duties.

17 Members of the Board of Nursing and the Advanced Practice
18 Nursing Board whose terms were terminated by this amendatory
19 Act of the 95th General Assembly shall be considered for
20 membership positions on the Board.

21 All nursing members of the Board must be (i) residents of
22 this State, (ii) licensed in good standing to practice nursing
23 in this State, (iii) graduates of an approved nursing program,
24 with a minimum of 5 years experience in the field of nursing,
25 and (iv) at the time of appointment to the Board, actively
26 engaged in nursing or work related to nursing.

1 Membership terms shall be for 3 years, except that in
2 making initial appointments, the Secretary shall appoint all
3 members for initial terms of 2, 3, and 4 years and these terms
4 shall be staggered as follows: 3 shall be appointed for terms
5 of 2 years; 4 shall be appointed for terms of 3 years; and 6
6 shall be appointed for terms of 4 years. No member shall be
7 appointed to more than 2 consecutive terms. In the case of a
8 vacated position, an individual may be appointed to serve the
9 unexpired portion of that term; if the term is less than half
10 of a full term, the individual is eligible to serve 2 full
11 terms. ~~be composed of 7 registered professional nurses, 2~~
12 ~~licensed practical nurses and one public member who shall also~~
13 ~~be a voting member and who is not a licensed health care~~
14 ~~provider. Two registered nurses shall hold at least a master's~~
15 ~~degree in nursing and be educators in professional nursing~~
16 ~~programs, one representing baccalaureate nursing education,~~
17 ~~one representing associate degree nursing education; one~~
18 ~~registered nurse shall hold at least a bachelor's degree with a~~
19 ~~major in nursing and be an educator in a licensed practical~~
20 ~~nursing program; one registered nurse shall hold a master's~~
21 ~~degree in nursing and shall represent nursing service~~
22 ~~administration; 2 registered nurses shall represent clinical~~
23 ~~nursing practice, one of whom shall have at least a master's~~
24 ~~degree in nursing; and, until January 1, 2000, 2 registered~~
25 ~~nurses shall represent advanced specialty practice. Each of the~~
26 ~~nurses shall have had a minimum of 5 years experience in~~

1 ~~nursing, 3 of which shall be in the area they represent on the~~
2 ~~Board and be actively engaged in the area of nursing they~~
3 ~~represent at the time of appointment and during their tenure on~~
4 ~~the Board. Members shall be appointed for a term of 3 years. No~~
5 ~~member shall be eligible for appointment to more than 2~~
6 ~~consecutive terms and any appointment to fill a vacancy shall~~
7 ~~be for the unexpired portion of the term. In making Board~~
8 ~~appointments, the Director shall give consideration to~~
9 ~~recommendations submitted by nursing organizations.~~
10 ~~Consideration shall be given to equal geographic~~
11 ~~representation. The Board shall receive actual and necessary~~
12 ~~expenses incurred in the performance of their duties.~~

13 ~~In making the initial appointments, the Director shall~~
14 ~~appoint all new members for terms of 2, 3, and 4 years and such~~
15 ~~terms shall be staggered as follows: 3 shall be appointed for~~
16 ~~terms of 2 years; 3 shall be appointed for terms of 3 years;~~
17 ~~and 3 shall be appointed for terms of 4 years.~~

18 The Secretary ~~Director~~ may remove any member of the Board
19 for misconduct, incapacity, or neglect of duty. The Secretary
20 ~~Director~~ shall reduce to writing any causes for removal.

21 The Board shall meet annually to elect a chairperson and
22 vice chairperson. The Board shall ~~may~~ hold regularly scheduled
23 ~~such other~~ meetings during the year ~~as may be necessary to~~
24 ~~conduct its business.~~ A simple majority ~~Six voting members~~ of
25 the Board shall constitute a quorum at any meeting. Any action
26 taken by the Board must be on the affirmative vote of a simple

1 majority of 6 members. Voting by proxy shall not be permitted.
2 In the case of an emergency where all Board members cannot meet
3 in person, the Board may convene a meeting via an electronic
4 format in accordance with the Open Meetings Act.

5 ~~The Board shall submit an annual report to the Director.~~

6 ~~The members of the Board shall be immune from suit in any~~
7 ~~action based upon any disciplinary proceedings or other acts~~
8 ~~performed in good faith as members of the Board.~~

9 (b) The Board may perform each of the following activities
10 ~~is authorized to:~~

11 (1) Recommend to the Department ~~recommend~~ the adoption
12 and, ~~from time to time,~~ the revision of ~~such~~ rules ~~that may~~
13 ~~be~~ necessary for the administration ~~to carry out the~~
14 ~~provisions~~ of this Act;

15 ~~(2) conduct hearings and disciplinary conferences upon~~
16 ~~charges calling for discipline of a licensee as provided in~~
17 ~~Section 10-45;~~

18 ~~(3) report to the Department, upon completion of a~~
19 ~~hearing, the disciplinary actions recommended to be taken~~
20 ~~against persons violating this Act;~~

21 (2) Recommend ~~(4) recommend~~ the approval, denial of
22 approval, withdrawal of approval, or discipline of nursing
23 education programs;

24 ~~(5) participate in a national organization of state~~
25 ~~boards of nursing; and~~

26 ~~(6) recommend a list of the registered nurses to serve~~

1 ~~as Nursing Act Coordinator and Assistant Nursing Act~~
2 ~~Coordinator, respectively.~~

3 (c) The Board shall participate in disciplinary
4 conferences and hearings and make recommendations to the
5 Department regarding disciplinary action taken against a
6 licensee as provided under this Act. Disciplinary conference
7 hearings and proceedings regarding scope of practice issues
8 shall be conducted by a Board member at the same or higher
9 licensure level as the respondent. Participation in an informal
10 conference shall not bar members of the Board from future
11 participation or decisions relating to that matter.

12 (d) With the exception of emergency rules, any proposed
13 rules, amendments, second notice materials, and adopted rule or
14 amendment materials or policy statements concerning advanced
15 practice nurses shall be presented to the Medical Licensing
16 Board for review and comment. The recommendations of both the
17 Board of Nursing and the Medical Licensing Board shall be
18 presented to the Secretary for consideration in making final
19 decisions. Whenever the Board of Nursing and Medical Licensing
20 Board disagree on a proposed rule or policy, the Secretary
21 shall convene a joint meeting of the officers of each Board to
22 discuss resolution of any disagreements.

23 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
24 91-414, eff. 8-6-99.)

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

2 Sec. 50-70 ~~40-35~~. Concurrent theory and clinical practice
3 education requirements of this Act. The educational
4 requirements of Sections 55-10 and 60-10 of this Act ~~Section~~
5 ~~40-30~~ relating to registered professional nursing and licensed
6 practical nursing shall not be deemed to have been satisfied by
7 the completion of any correspondence course or any program of
8 nursing that does not require coordinated or concurrent theory
9 and clinical practice. The Department may, upon recommendation
10 of the Board, grant an Illinois license to those applicants who
11 have received advanced graduate degrees in nursing from an
12 approved program with concurrent theory and clinical practice
13 or to those applicants who are currently licensed in another
14 state and have been actively practicing clinical nursing for a
15 minimum of 2 years.

16 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
17 91-43, eff. 1-1-00.)

18 (225 ILCS 65/50-75 new)

19 Sec. 50-75. Nursing delegation.

20 (a) For the purposes of this Section:

21 "Delegation" means transferring to an individual the
22 authority to perform a selected nursing activity or task, in a
23 selected situation.

24 "Nursing activity" means any work requiring the use of
25 knowledge acquired by completion of an approved program for

1 licensure, including advanced education, continuing education,
2 and experience as a licensed practical nurse or professional
3 nurse, as defined by the Department by rule.

4 "Task" means work not requiring nursing knowledge,
5 judgment, or decision-making, as defined by the Department by
6 rule.

7 (b) Nursing shall be practiced by licensed practical
8 nurses, registered professional nurses, and advanced practice
9 nurses. In the delivery of nursing care, nurses work with many
10 other licensed professionals and other persons. An advanced
11 practice nurse may delegate to registered professional nurses,
12 licensed practical nurses, and others persons.

13 (c) A registered professional nurse shall not delegate any
14 nursing activity requiring the specialized knowledge,
15 judgment, and skill of a licensed nurse to an unlicensed
16 person, including medication administration. A registered
17 professional nurse may delegate nursing activities to other
18 registered professional nurses or licensed practical nurses.

19 A registered nurse may delegate tasks to other licensed and
20 unlicensed persons. A licensed practical nurse who has been
21 delegated a nursing activity shall not re-delegate the nursing
22 activity. A registered professional nurse or advanced practice
23 nurse retains the right to refuse to delegate or to stop or
24 rescind a previously authorized delegation.

1 heading)

2 ARTICLE 55 ~~TITLE 10~~. NURSING LICENSURE-LICENSED PRACTICAL

3 NURSES REGISTERED NURSES

4 AND LICENSED PRACTICAL NURSES

5 (225 ILCS 65/55-5 new)

6 Sec. 55-5. LPN education program requirements.

7 (a) All Illinois practical nurse education programs must be
8 reviewed by the Board and approved by the Department before the
9 successful completion of such a program may be applied toward
10 meeting the requirements for practical nurse licensure under
11 this Act. Any program changing the level of educational
12 preparation or the relationship with or to the parent
13 institution or establishing an extension of an existing program
14 must request a review by the Board and approval by the
15 Department. The Board shall review and make a recommendation
16 for the approval or disapproval of a program by the Department
17 based on the following criteria:

18 (1) a feasibility study that describes the need for the
19 program and the facilities used, the potential of the
20 program to recruit faculty and students, financial support
21 for the program, and other criteria, as established by
22 rule;

23 (2) program curriculum that meets all State
24 requirements;

25 (3) the administration of the program by a Nurse

1 Administrator and the involvement of a Nurse Administrator
2 in the development of the program; and

3 (4) the occurrence of a site visit prior to approval.

4 (b) In order to obtain initial Department approval and to
5 maintain Department approval, a practical nursing program must
6 meet all of the following requirements:

7 (1) The program must continually be administered by a
8 Nurse Administrator.

9 (2) The institution responsible for conducting the
10 program and the Nurse Administrator must ensure that
11 individual faculty members are academically and
12 professionally competent.

13 (3) The program curriculum must contain all applicable
14 requirements established by rule, including both theory
15 and clinical components.

16 (4) The passage rates of the program's graduating
17 classes on the State-approved licensure exam must be deemed
18 satisfactory by the Department.

19 (c) Program site visits to an institution conducting or
20 hosting a practical nursing program may be made at the
21 discretion of the Nursing Coordinator or upon recommendation of
22 the Board.

23 (d) Any institution conducting a practical nursing program
24 that wishes to discontinue the program must do each of the
25 following:

26 (1) Notify the Department, in writing, of its intent to

1 discontinue the program.

2 (2) Continue to meet the requirements of this Act and
3 the rules adopted thereunder until the official date of
4 termination of the program.

5 (3) Notify the Department of the date on which the last
6 student shall graduate from the program and the program
7 shall terminate.

8 (4) Assist remaining students in the continuation of
9 their education in the event of program termination prior
10 to the graduation of the program's final student.

11 (5) Upon the closure of the program, notify the
12 Department, in writing, of the location of student and
13 graduate records storage.

14 (225 ILCS 65/55-10 new) (was 225 ILCS 65/10-30)

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

16 Sec. 55-10 ~~10-30~~. Qualifications for LPN licensure.

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

20 (b) An applicant for licensure by examination to practice
21 as a ~~registered nurse or licensed~~ practical nurse must do each
22 of the following shall:

23 (1) Submit ~~submit~~ a completed written application, on
24 forms provided by the Department and fees as established by
25 the Department. ~~.~~

1 (2) Have graduated from a practical nursing education
2 program approved by the Department or have been granted a
3 certificate of completion of pre-licensure requirements
4 from another United States jurisdiction.

5 (3) Successfully complete a licensure examination
6 approved by the Department. ~~for registered nurse~~
7 ~~licensure, have graduated from a professional nursing~~
8 ~~education program approved by the Department;~~

9 ~~(2.5) for licensed practical nurse licensure, have~~
10 ~~graduated from a practical nursing education program~~
11 ~~approved by the Department;~~

12 (4) Have ~~(3) have~~ not violated the provisions of
13 ~~Section 10-45 of~~ this Act concerning the grounds for
14 disciplinary action. The Department may take into
15 consideration any felony conviction of the applicant, but
16 such a conviction shall not operate as an absolute bar to
17 licensure.~~†~~

18 (5) Submit to the criminal history records check
19 required under Section 50-35 of this Act.

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

21 (6) Submit ~~(5) pay,~~ either to the Department or its
22 designated testing service, a fee covering the cost of
23 providing the examination. Failure to appear for the
24 examination on the scheduled date at the time and place
25 specified after the applicant's application for
26 examination has been received and acknowledged by the

1 Department or the designated testing service shall result
2 in the forfeiture of the examination fee.

3 (7) Meet all other requirements established by rule.

4 An applicant for licensure by examination may take the
5 Department-approved examination in another jurisdiction.

6 (b-5) If an applicant for licensure by examination
7 neglects, fails, or refuses to take an examination or fails to
8 pass an examination for a license under this Act within 3 years
9 after filing the application, the application shall be denied.
10 The ~~However, the~~ applicant must enroll in and complete an
11 approved practical nursing education program prior to
12 submitting an additional ~~may make a new~~ application for the
13 licensure exam ~~accompanied by the required fee and provide~~
14 ~~evidence of meeting the requirements in force at the time of~~
15 ~~the new application.~~

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

1 (c) An applicant for licensure by examination shall have
2 one year from the date of notification of successful completion
3 of the examination to apply to the Department for a license. If
4 an applicant fails to apply within one year, the applicant
5 shall be required to retake ~~again take~~ and pass the examination
6 unless licensed in another jurisdiction of the United States
7 ~~within one year of passing the examination.~~

8 (d) A licensed practical nurse applicant who passes the
9 Department-approved licensure examination and has applied to
10 the Department for licensure may obtain employment as a
11 license-pending practical nurse and practice as delegated by a
12 registered professional nurse or an advanced practice nurse or
13 physician. An individual may be employed as a license-pending
14 practical nurse if all of the following criteria are met:

15 (1) He or she has completed and passed the
16 Department-approved licensure exam and presents to the
17 employer the official written notification indicating
18 successful passage of the licensure examination.

19 (2) He or she has completed and submitted to the
20 Department an application for licensure under this Section
21 as a practical nurse.

22 (3) He or she has submitted the required licensure fee.

23 (4) He or she has met all other requirements
24 established by rule, including having submitted to a
25 criminal history records check.

26 (e) The privilege to practice as a license-pending

1 practical nurse shall terminate with the occurrence of any of
2 the following:

3 (1) Three months have passed since the official date of
4 passing the licensure exam as inscribed on the formal
5 written notification indicating passage of the exam. This
6 3-month period may be extended as determined by rule.

7 (2) Receipt of the practical nurse license from the
8 Department.

9 (3) Notification from the Department that the
10 application for licensure has been denied.

11 (4) A request by the Department that the individual
12 terminate practicing as a license-pending practical nurse
13 until an official decision is made by the Department to
14 grant or deny a practical nurse license.

15 (f) ~~(e)~~ An applicant for licensure by endorsement who is a
16 ~~registered professional nurse or a~~ licensed practical nurse
17 licensed by examination under the laws of another state or
18 territory of the United States or a foreign country,
19 jurisdiction, territory, or province must do each of the
20 following ~~shall~~:

21 (1) Submit ~~submit~~ a completed written application, on
22 forms supplied by the Department, and fees as established
23 by the Department.~~†~~

24 (2) Have graduated from a practical nursing education
25 program approved by the Department. ~~for registered nurse~~
26 ~~licensure, have graduated from a professional nursing~~

1 ~~education program approved by the Department;~~

2 ~~(2.5) for licensed practical nurse licensure, have~~
3 ~~graduated from a practical nursing education program~~
4 ~~approved by the Department;~~

5 (3) Submit ~~submit~~ verification of licensure status
6 directly from the United States jurisdiction of licensure,
7 if applicable, as defined by rule.~~†~~

8 (4) Submit to the criminal history records check
9 required under Section 50-35 of this Act. ~~have passed the~~
10 ~~examination authorized by the Department;~~

11 (5) Meet ~~meet~~ all other requirements as established by
12 the Department by rule.

13 (g) ~~(d)~~ All applicants for practical ~~registered~~ nurse
14 licensure by examination or endorsement pursuant to item (2) of
15 ~~subsection (b) and item (2) of subsection (c) of this Section~~
16 who are graduates of nursing educational programs in a country
17 other than the United States or its territories shall have
18 their nursing education credentials evaluated by a
19 Department-approved nursing credentialing evaluation service.
20 No such applicant may be issued a license under this Act unless
21 the applicant's program is deemed by the nursing credentialing
22 evaluation service to be equivalent to a professional nursing
23 education program approved by the Department. An applicant who
24 has graduated from a nursing educational program outside of the
25 United States or its territories and whose first language is
26 not English shall submit certification of passage of the Test

1 of English as a Foreign Language (TOEFL), as defined by rule.
2 The Department may, upon recommendation from the nursing
3 evaluation service, waive the requirement that the applicant
4 pass the TOEFL examination if the applicant submits
5 verification of the successful completion of a nursing
6 education program conducted in English. The requirements of
7 this subsection (d) may be satisfied by the showing of proof of
8 a certificate from the Certificate Program or the VisaScreen
9 Program of the Commission on Graduates of Foreign Nursing
10 Schools.

11 (h) ~~(d-5)~~ An applicant licensed in another state or
12 territory who is applying for licensure and has received her or
13 his education in a country other than the United States or its
14 territories shall have her or his nursing education credentials
15 evaluated by a Department-approved nursing credentialing
16 evaluation service. No such applicant may be issued a license
17 under this Act unless the applicant's program is deemed by the
18 nursing credentialing evaluation service to be equivalent to a
19 professional nursing education program approved by the
20 Department. An applicant who has graduated from a nursing
21 educational program outside of the United States or its
22 territories and whose first language is not English shall
23 submit certification of passage of the Test of English as a
24 Foreign Language (TOEFL), as defined by rule. The Department
25 may, upon recommendation from the nursing evaluation service,
26 waive the requirement that the applicant pass the TOEFL

1 examination if the applicant submits verification of the
2 successful completion of a nursing education program conducted
3 in English or the successful passage of an approved licensing
4 examination given in English. The requirements of this
5 subsection (d-5) may be satisfied by the showing of proof of a
6 certificate from the Certificate Program or the VisaScreen
7 Program of the Commission on Graduates of Foreign Nursing
8 Schools.

9 ~~(e) (Blank).~~

10 (i) A ~~(f) Pending the issuance of a license under~~
11 ~~subsection (e) of this Section, the Department may grant an~~
12 ~~applicant a temporary license to practice nursing as a~~
13 ~~registered nurse or as a licensed practical nurse who if the~~
14 ~~Department is satisfied that the applicant holds an active,~~
15 unencumbered license in good standing in another United States
16 jurisdiction and who has applied for practical nurse licensure
17 under this Act by endorsement may be issued a temporary
18 license, if satisfactory proof of such licensure in another
19 jurisdiction is presented to the Department. The ~~If the~~
20 ~~applicant holds more than one current active license, or one or~~
21 ~~more active temporary licenses from other jurisdictions, the~~
22 Department shall not issue an applicant a temporary practical
23 nurse license until it is satisfied that the applicant holds an
24 ~~each current active,~~ license held by the applicant is
25 unencumbered license in good standing in another jurisdiction.
26 If the applicant holds more than one current active license or

1 one or more active temporary licenses from another
2 jurisdiction, the Department may not issue a temporary license
3 until the Department is satisfied that each current active
4 license held by the applicant is unencumbered. The temporary
5 license, which shall be issued no later than 14 working days
6 following receipt by the Department of an application for the
7 temporary license, shall be granted upon the submission of all
8 of the following to the Department:

9 (1) A ~~a signed and~~ completed application for licensure
10 ~~under subsection (a) of this Section as a registered nurse~~
11 ~~or a licensed practical nurse.~~

12 (2) Proof ~~proof~~ of a current, active license in at
13 least one other jurisdiction of the United States and proof
14 that each current active license or temporary license held
15 by the applicant within the last 5 years is unencumbered.

16 (3) A ~~a~~ signed and completed application for a
17 temporary license.

18 (4) The ~~the~~ required temporary license fee.

19 (j) ~~(g)~~ The Department may refuse to issue an applicant a
20 temporary license authorized pursuant to this Section if,
21 within 14 working days following its receipt of an application
22 for a temporary license, the Department determines that:

23 (1) the applicant has been convicted of a crime under
24 the laws of a jurisdiction of the United States that is:

25 (i) ~~which is~~ a felony; or (ii) ~~which is~~ a misdemeanor
26 directly related to the practice of the profession, within

1 the last 5 years;

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

9 (3) the Department ~~it~~ intends to deny licensure by
10 endorsement.

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

15 (k) ~~(h)~~ The Department may revoke a temporary license
16 issued pursuant to this Section if it determines any of the
17 following:

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

23 (2) That ~~it determines that~~ within the last 5 years the
24 applicant has had a license or permit related to the
25 practice of nursing revoked, suspended, or placed on
26 probation by another jurisdiction, and if at least one of

1 the grounds for revoking, suspending, or placing on
2 probation is the same or substantially equivalent to
3 grounds for disciplinary action under this Act. in
4 Illinois; or

5 (3) That the Department ~~it determines that it~~ intends
6 to deny licensure by endorsement.

7 (1) A temporary license shall expire 6 months from the date
8 of issuance. Further renewal may be granted by the Department
9 in hardship cases, as defined by rule and upon approval of the
10 Secretary ~~Director~~. However, a temporary license shall
11 automatically expire upon issuance of a valid ~~the Illinois~~
12 license under this Act or upon notification that the Department
13 intends to deny licensure, whichever occurs first.

14 (m) All applicants for practical nurse licensure ~~(i)~~
15 ~~Applicants~~ have 3 years from the date of application to
16 complete the application process. If the process has not been
17 completed within 3 years from the date of application, the
18 application shall be denied, the fee forfeited, and the
19 applicant must reapply and meet the requirements in effect at
20 the time of reapplication.

21 (Source: P.A. 94-352, eff. 7-28-05; 94-932, eff. 1-1-07.)

22 (225 ILCS 65/55-15 new)

23 Sec. 55-15. LPN license expiration; renewal. The
24 expiration date and renewal period for each license to practice
25 practical nursing issued under this Act shall be set by rule.

1 The holder of a license may renew the license during the month
2 preceding the expiration date of the license by paying the
3 required fee. It is the responsibility of the licensee to
4 notify the Department in writing of a change of address.

5 (225 ILCS 65/55-20 new)

6 Sec. 55-20. Restoration of LPN license; temporary permit.

7 (a) Any license to practice practical nursing issued under
8 this Act that has expired or that is on inactive status may be
9 restored by making application to the Department and filing
10 proof of fitness acceptable to the Department, as specified by
11 rule, to have the license restored, and by paying the required
12 restoration fee. Such proof of fitness may include evidence
13 certifying active lawful practice in another jurisdiction.

14 (b) A practical nurse licensee seeking restoration of a
15 license after it has expired or been placed on inactive status
16 for more than 5 years shall file an application, on forms
17 supplied by the Department, and submit the restoration or
18 renewal fees set forth by the Department. The licensee must
19 also submit proof of fitness to practice, including one of the
20 following:

21 (1) certification of active practice in another
22 jurisdiction, which may include a statement from the
23 appropriate board or licensing authority in the other
24 jurisdiction that the licensee was authorized to practice
25 during the term of said active practice;

1 (2) proof of the successful completion of a
2 Department-approved licensure examination; or

3 (3) an affidavit attesting to military service as
4 provided in subsection (c) of this Section; however, if
5 application is made within 2 years after discharge and if
6 all other provisions of subsection (c) of this Section are
7 satisfied, the applicant shall be required to pay the
8 current renewal fee.

9 (c) Notwithstanding any other provision of this Act, any
10 license to practice practical nursing issued under this Act
11 that expired while the licensee was (i) in federal service on
12 active duty with the Armed Forces of the United States or in
13 the State Militia and called into service or training or (ii)
14 in training or education under the supervision of the United
15 States preliminary to induction into the military service may
16 have the license restored without paying any lapsed renewal
17 fees if, within 2 years after honorable termination of such
18 service, training, or education, the applicant furnishes the
19 Department with satisfactory evidence to the effect that the
20 applicant has been so engaged and that the individual's
21 service, training, or education has been so terminated.

22 (d) Any practical nurse licensee who shall engage in the
23 practice of practical nursing with a lapsed license or while on
24 inactive status shall be considered to be practicing without a
25 license, which shall be grounds for discipline under Section
26 70-5 of this Act.

1 (e) Pending restoration of a license under this Section,
2 the Department may grant an applicant a temporary permit to
3 practice as a practical nurse if the Department is satisfied
4 that the applicant holds an active, unencumbered license in
5 good standing in another jurisdiction. If the applicant holds
6 more than one current active license or one or more active
7 temporary licenses from another jurisdiction, the Department
8 shall not issue a temporary permit until it is satisfied that
9 each current active license held by the applicant is
10 unencumbered. The temporary permit, which shall be issued no
11 later than 14 working days after receipt by the Department of
12 an application for the permit, shall be granted upon the
13 submission of all of the following to the Department:

14 (1) A signed and completed application for restoration
15 of licensure under this Section as a licensed practical
16 nurse.

17 (2) Proof of (i) a current, active license in at least
18 one other jurisdiction and proof that each current, active
19 license or temporary permit held by the applicant is
20 unencumbered or (ii) fitness to practice nursing in this
21 State, as specified by rule.

22 (3) A signed and completed application for a temporary
23 permit.

24 (4) The required permit fee.

25 (f) The Department may refuse to issue to an applicant a
26 temporary permit authorized under this Section if, within 14

1 working days after its receipt of an application for a
2 temporary permit, the Department determines that:

3 (1) the applicant has been convicted within the last 5
4 years of any crime under the laws of any jurisdiction of
5 the United States that is (i) a felony or (ii) a
6 misdemeanor directly related to the practice of the
7 profession;

8 (2) within the last 5 years, the applicant has had a
9 license or permit related to the practice of nursing
10 revoked, suspended, or placed on probation by another
11 jurisdiction, if at least one of the grounds for revoking,
12 suspending, or placing on probation is the same or
13 substantially equivalent to grounds for disciplinary
14 action under this Act; or

15 (3) the Department intends to deny restoration of the
16 license.

17 (g) The Department may revoke a temporary permit issued
18 under this Section if:

19 (1) the Department determines that the applicant has
20 been convicted within the last 5 years of any crime under
21 the laws of any jurisdiction of the United States that is
22 (i) a felony or (ii) a misdemeanor directly related to the
23 practice of the profession;

24 (2) within the last 5 years, the applicant had a
25 license or permit related to the practice of nursing
26 revoked, suspended, or placed on probation by another

1 jurisdiction and at least one of the grounds for revoking,
2 suspending, or placing on probation is the same or
3 substantially equivalent to grounds for disciplinary
4 action under this Act; or

5 (3) the Department intends to deny restoration of the
6 license.

7 (h) A temporary permit or renewed temporary permit shall
8 expire (i) upon issuance of a valid license under this Act or
9 (ii) upon notification that the Department intends to deny
10 restoration of licensure. Except as otherwise provided in this
11 Section, the temporary permit shall expire 6 months after the
12 date of issuance. Further renewal may be granted by the
13 Department in hardship cases that shall automatically expire
14 upon issuance of a valid license under this Act or upon
15 notification that the Department intends to deny licensure,
16 whichever occurs first. No extensions shall be granted beyond
17 the 6-month period, unless approved by the Secretary.
18 Notification by the Department under this Section must be by
19 certified or registered mail.

20 (225 ILCS 65/55-25 new)

21 Sec. 55-25. Inactive status of a LPN license. Any licensed
22 practical nurse who notifies the Department in writing on forms
23 prescribed by the Department may elect to place his or her
24 license on inactive status and shall, subject to rules of the
25 Department, be excused from payment of renewal fees until

1 notice is given to the Department, in writing, of his or her
2 intent to restore the license.

3 Any practical nurse requesting restoration from inactive
4 status shall be required to pay the current renewal fee and
5 shall be required to restore his or her license, as provided by
6 rule of the Department.

7 Any practical nurse whose license is on an inactive status
8 shall not practice nursing as defined by this Act in the State
9 of Illinois.

10 (225 ILCS 65/55-30 new)

11 Sec. 55-30. LPN scope of practice.

12 (a) Practice as a licensed practical nurse means a scope of
13 basic nursing practice, with or without compensation, as
14 delegated by a registered professional nurse or an advanced
15 practice nurse or as directed by a physician assistant,
16 physician, dentist, or podiatrist, and includes, but is not
17 limited to, all of the following:

18 (1) Collecting data and collaborating in the
19 assessment of the health status of a patient.

20 (2) Collaborating in the development and modification
21 of the registered professional nurse's or advanced
22 practice nurse's comprehensive nursing plan of care for all
23 types of patients.

24 (3) Implementing aspects of the plan of care as
25 delegated.

1 (4) Participating in health teaching and counseling to
2 promote, attain, and maintain the optimum health level of
3 patients, as delegated.

4 (5) Serving as an advocate for the patient by
5 communicating and collaborating with other health service
6 personnel, as delegated.

7 (6) Participating in the evaluation of patient
8 responses to interventions.

9 (7) Communicating and collaborating with other health
10 care professionals as delegated.

11 (8) Providing input into the development of policies
12 and procedures to support patient safety.

13 (225 ILCS 65/55-35 new)

14 Sec. 55-35. Continuing education for LPN licensees. The
15 Department may adopt rules of continuing education for licensed
16 practical nurses that require 20 hours of continuing education
17 per 2-year license renewal cycle. The rules shall address
18 variances in part or in whole for good cause, including without
19 limitation illness or hardship. The continuing education rules
20 must ensure that licensees are given the opportunity to
21 participate in programs sponsored by or through their State or
22 national professional associations, hospitals, or other
23 providers of continuing education. Each licensee is
24 responsible for maintaining records of completion of
25 continuing education and shall be prepared to produce the

1 records when requested by the Department.

2 (225 ILCS 65/Art. 60 heading new)

3 ARTICLE 60. NURSING LICENSURE-RN

4 (225 ILCS 65/60-5 new)

5 Sec. 60-5. RN education program requirements; out-of-State
6 programs.

7 (a) All registered professional nurse education programs
8 must be reviewed by the Board and approved by the Department
9 before the successful completion of such a program may be
10 applied toward meeting the requirements for registered
11 professional nurse licensure under this Act. Any program
12 changing the level of educational preparation or the
13 relationship with or to the parent institution or establishing
14 an extension of an existing program must request a review by
15 the Board and approval by the Department. The Board shall
16 review and make a recommendation for the approval or
17 disapproval of a program by the Department based on the
18 following criteria:

19 (1) a feasibility study that describes the need for the
20 program and the facilities used, the potential of the
21 program to recruit faculty and students, financial support
22 for the program, and other criteria, as established by
23 rule;

24 (2) program curriculum that meets all State

1 requirements;

2 (3) the administration of the program by a Nurse
3 Administrator and the involvement of a Nurse Administrator
4 in the development of the program; and

5 (4) the occurrence of a site visit prior to approval.

6 (b) In order to obtain initial Department approval and to
7 maintain Department approval, a registered professional
8 nursing program must meet all of the following requirements:

9 (1) The institution responsible for conducting the
10 program and the Nurse Administrator must ensure that
11 individual faculty members are academically and
12 professionally competent.

13 (2) The program curriculum must contain all applicable
14 requirements established by rule, including both theory
15 and clinical components.

16 (3) The passage rates of the program's graduating
17 classes on the State-approved licensure exam must be deemed
18 satisfactory by the Department.

19 (c) Program site visits to an institution conducting or
20 hosting a professional nursing program may be made at the
21 discretion of the Nursing Coordinator or upon recommendation of
22 the Board. Full routine site visits shall be conducted by the
23 Department for periodic evaluation. The visits shall be used to
24 determine compliance with this Act. Full routine site visits
25 must be announced and may be waived at the discretion of the
26 Department if the program maintains accreditation with the

1 National League for Nursing Accrediting Commission (NLNAC) or
2 the Commission on Collegiate Nursing Education (CCNE).

3 (d) Any institution conducting a registered professional
4 nursing program that wishes to discontinue the program must do
5 each of the following:

6 (1) Notify the Department, in writing, of its intent to
7 discontinue the program.

8 (2) Continue to meet the requirements of this Act and
9 the rules adopted thereunder until the official date of
10 termination of the program.

11 (3) Notify the Department of the date on which the last
12 student shall graduate from the program and the program
13 shall terminate.

14 (4) Assist remaining students in the continuation of
15 their education in the event of program termination prior
16 to the graduation of the program's final student.

17 (5) Upon the closure of the program, notify the
18 Department, in writing, of the location of student and
19 graduate records' storage.

20 (e) Out-of-State registered professional nursing education
21 programs planning to offer clinical practice experiences in
22 this State must meet the requirements set forth in this Section
23 and must meet the clinical and faculty requirements for
24 institutions outside of this State, as established by rule. The
25 institution responsible for conducting an out-of-State
26 registered professional nursing education program and the

1 administrator of the program shall be responsible for ensuring
2 that the individual faculty and preceptors overseeing the
3 clinical experience are academically and professionally
4 competent.

5 (225 ILCS 65/60-10 new)

6 Sec. 60-10. Qualifications for RN licensure.

7 (a) Each applicant who successfully meets the requirements
8 of this Section shall be entitled to licensure as a registered
9 professional nurse.

10 (b) An applicant for licensure by examination to practice
11 as a registered professional nurse must do each of the
12 following:

13 (1) Submit a completed written application, on forms
14 provided by the Department, and fees, as established by the
15 Department.

16 (2) Have graduated from a professional nursing
17 education program approved by the Department or have been
18 granted a certificate of completion of pre-licensure
19 requirements from another United States jurisdiction.

20 (3) Successfully complete a licensure examination
21 approved by the Department.

22 (4) Have not violated the provisions of this Act
23 concerning the grounds for disciplinary action. The
24 Department may take into consideration any felony
25 conviction of the applicant, but such a conviction may not

1 operate as an absolute bar to licensure.

2 (5) Submit to the criminal history records check
3 required under Section 50-35 of this Act.

4 (6) Submit, either to the Department or its designated
5 testing service, a fee covering the cost of providing the
6 examination. Failure to appear for the examination on the
7 scheduled date at the time and place specified after the
8 applicant's application for examination has been received
9 and acknowledged by the Department or the designated
10 testing service shall result in the forfeiture of the
11 examination fee.

12 (7) Meet all other requirements established by the
13 Department by rule. An applicant for licensure by
14 examination may take the Department-approved examination
15 in another jurisdiction.

16 (b-5) If an applicant for licensure by examination
17 neglects, fails, or refuses to take an examination or fails to
18 pass an examination for a license within 3 years after filing
19 the application, the application shall be denied. The applicant
20 may make a new application accompanied by the required fee,
21 evidence of meeting the requirements in force at the time of
22 the new application, and proof of the successful completion of
23 at least 2 additional years of professional nursing education.

24 (c) An applicant for licensure by examination shall have
25 one year after the date of notification of the successful
26 completion of the examination to apply to the Department for a

1 license. If an applicant fails to apply within one year, the
2 applicant shall be required to retake and pass the examination
3 unless licensed in another jurisdiction of the United States.

4 (d) An applicant for licensure by examination who passes
5 the Department-approved licensure examination for professional
6 nursing may obtain employment as a license-pending registered
7 nurse and practice under the direction of a registered
8 professional nurse or an advanced practice nurse until such
9 time as he or she receives his or her license to practice or
10 until the license is denied. In no instance shall any such
11 applicant practice or be employed in any management capacity.
12 An individual may be employed as a license-pending registered
13 nurse if all of the following criteria are met:

14 (1) He or she has completed and passed the
15 Department-approved licensure exam and presents to the
16 employer the official written notification indicating
17 successful passage of the licensure examination.

18 (2) He or she has completed and submitted to the
19 Department an application for licensure under this Section
20 as a registered professional nurse.

21 (3) He or she has submitted the required licensure fee.

22 (4) He or she has met all other requirements
23 established by rule, including having submitted to a
24 criminal history records check.

25 (e) The privilege to practice as a license-pending
26 registered nurse shall terminate with the occurrence of any of

1 the following:

2 (1) Three months have passed since the official date of
3 passing the licensure exam as inscribed on the formal
4 written notification indicating passage of the exam. The
5 3-month license pending period may be extended if more time
6 is needed by the Department to process the licensure
7 application.

8 (2) Receipt of the registered professional nurse
9 license from the Department.

10 (3) Notification from the Department that the
11 application for licensure has been refused.

12 (4) A request by the Department that the individual
13 terminate practicing as a license-pending registered nurse
14 until an official decision is made by the Department to
15 grant or deny a registered professional nurse license.

16 (f) An applicant for registered professional nurse
17 licensure by endorsement who is a registered professional nurse
18 licensed by examination under the laws of another state or
19 territory of the United States must do each of the following:

20 (1) Submit a completed written application, on forms
21 supplied by the Department, and fees as established by the
22 Department.

23 (2) Have graduated from a registered professional
24 nursing education program approved by the Department.

25 (3) Submit verification of licensure status directly
26 from the United States jurisdiction of licensure, if

1 applicable, as defined by rule.

2 (4) Submit to the criminal history records check
3 required under Section 50-35 of this Act.

4 (5) Meet all other requirements as established by the
5 Department by rule.

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

20 (1) A completed application for licensure as a
21 registered professional nurse.

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

26 (3) A completed application for a temporary license.

1 (4) The required temporary license fee.

2 (h) The Department may refuse to issue an applicant a
3 temporary license authorized pursuant to this Section if,
4 within 14 working days after its receipt of an application for
5 a temporary license, the Department determines that:

6 (1) the applicant has been convicted of a crime under
7 the laws of a jurisdiction of the United States that is (i)
8 a felony or (ii) a misdemeanor directly related to the
9 practice of the profession, within the last 5 years;

10 (2) the applicant has had a license or permit related
11 to the practice of nursing revoked, suspended, or placed on
12 probation by another jurisdiction within the last 5 years,
13 if at least one of the grounds for revoking, suspending, or
14 placing on probation is the same or substantially
15 equivalent to grounds for disciplinary action under this
16 Act; or

17 (3) the Department intends to deny licensure by
18 endorsement.

19 (i) The Department may revoke a temporary license issued
20 pursuant to this Section if it determines any of the following:

21 (1) That the applicant has been convicted of a crime
22 under the laws of any jurisdiction of the United States
23 that is (i) a felony or (ii) a misdemeanor directly related
24 to the practice of the profession, within the last 5 years.

25 (2) That within the last 5 years, the applicant has had
26 a license or permit related to the practice of nursing

1 revoked, suspended, or placed on probation by another
2 jurisdiction, if at least one of the grounds for revoking,
3 suspending, or placing on probation is the same or
4 substantially equivalent to grounds for disciplinary
5 action under this Act.

6 (3) That it intends to deny licensure by endorsement.

7 (j) A temporary license issued under this Section shall
8 expire 6 months after the date of issuance. Further renewal may
9 be granted by the Department in hardship cases, as defined by
10 rule and upon approval of the Secretary. However, a temporary
11 license shall automatically expire upon issuance of the
12 Illinois license or upon notification that the Department
13 intends to deny licensure, whichever occurs first.

14 (k) All applicants for registered professional nurse
15 licensure have 3 years after the date of application to
16 complete the application process. If the process has not been
17 completed within 3 years after the date of application, the
18 application shall be denied, the fee forfeited, and the
19 applicant must reapply and meet the requirements in effect at
20 the time of reapplication.

21 (l) All applicants for registered nurse licensure by
22 examination or endorsement who are graduates of practical
23 nursing educational programs in a country other than the United
24 States and its territories shall have their nursing education
25 credentials evaluated by a Department-approved nursing
26 credentialing evaluation service. No such applicant may be

1 issued a license under this Act unless the applicant's program
2 is deemed by the nursing credentialing evaluation service to be
3 equivalent to a professional nursing education program
4 approved by the Department. An applicant who has graduated from
5 a nursing educational program outside of the United States or
6 its territories and whose first language is not English shall
7 submit certification of passage of the Test of English as a
8 Foreign Language (TOEFL), as defined by rule. The Department
9 may, upon recommendation from the nursing evaluation service,
10 waive the requirement that the applicant pass the TOEFL
11 examination if the applicant submits verification of the
12 successful completion of a nursing education program conducted
13 in English. The requirements of this subsection (l) may be
14 satisfied by the showing of proof of a certificate from the
15 Certificate Program or the VisaScreen Program of the Commission
16 on Graduates of Foreign Nursing Schools.

17 (m) An applicant licensed in another state or territory who
18 is applying for licensure and has received her or his education
19 in a country other than the United States or its territories
20 shall have her or his nursing education credentials evaluated
21 by a Department-approved nursing credentialing evaluation
22 service. No such applicant may be issued a license under this
23 Act unless the applicant's program is deemed by the nursing
24 credentialing evaluation service to be equivalent to a
25 professional nursing education program approved by the
26 Department. An applicant who has graduated from a nursing

1 educational program outside of the United States or its
2 territories and whose first language is not English shall
3 submit certification of passage of the Test of English as a
4 Foreign Language (TOEFL), as defined by rule. The Department
5 may, upon recommendation from the nursing evaluation service,
6 waive the requirement that the applicant pass the TOEFL
7 examination if the applicant submits verification of the
8 successful completion of a nursing education program conducted
9 in English or the successful passage of an approved licensing
10 examination given in English. The requirements of this
11 subsection (m) may be satisfied by the showing of proof of a
12 certificate from the Certificate Program or the VisaScreen
13 Program of the Commission on Graduates of Foreign Nursing
14 Schools.

15 (225 ILCS 65/60-15 new) (was 225 ILCS 65/10-37)

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

17 Sec. 60-15 ~~10-37~~. Registered nurse ~~Nurse~~ externship
18 permit.

19 (a) The Department shall establish a ~~2-year~~ program under
20 which the Department may issue a nurse externship permit to a
21 registered nurse who is licensed under the laws of another
22 state or territory of the United States and who has not taken
23 the National Council Licensure Examination (NCLEX). A nurse who
24 is issued a permit shall be allowed to practice as a nurse
25 extern under the direct, on-site supervision of a registered

1 professional nurse licensed under this Act. There shall be one
2 supervising registered professional nurse for every one nurse
3 extern.

4 (b) An applicant shall be qualified to receive a nurse
5 externship permit if that applicant:

6 (1) Has submitted a completed written application to
7 the Department, on forms provided by the Department, and
8 submitted ~~paid~~ any fees established by the Department.

9 (2) Has graduated from a professional nursing
10 education program approved by the Department.

11 (3) Is licensed as a professional nurse in another
12 state or territory of the United States and has submitted a
13 verification of active and unencumbered licensure in all of
14 the states and territories in which the applicant is
15 licensed.

16 (4) Has submitted verification of an offer of
17 employment in Illinois as a nurse extern. The Department
18 may prescribe the information necessary to determine if
19 this employment meets the requirements of the permit
20 program. This information shall include a copy of the
21 written employment offer.

22 (5) Has submitted a written statement from the
23 applicant's prospective employer stating that the
24 prospective employer agrees to pay the full tuition for the
25 Bilingual Nurse Consortium course or other course approved
26 by rule.

1 (6) Has submitted proof of taking the Test of English
2 as a Foreign Language (TOEFL) with a minimum score as set
3 by rule. Applicants with the highest TOEFL scores shall be
4 given first consideration to entrance into an extern
5 program.

6 (7) Has submitted written verification that the
7 applicant has been enrolled in the Bilingual Nurse
8 Consortium course or other course approved by rule. This
9 verification must state that the applicant shall be able to
10 complete the course within the year for which the permit is
11 issued.

12 (8) Has agreed to submit to the Department a mid-year
13 exam as determined by rule that demonstrates proficiency
14 towards passing the NCLEX.

15 (9) Has not violated the provisions of Section 70-5
16 ~~10-45~~ of this Act. The Department may take into
17 consideration any felony conviction of the applicant, but
18 such a conviction shall not operate as an absolute bar to
19 licensure.

20 (10) Has met all other requirements established by
21 rule.

22 (c) A nurse extern shall be issued no more than one permit
23 in a lifetime. The permit shall expire one calendar year after
24 it is issued. Before being issued a license under this Act, the
25 nurse extern must submit proof of the successful completion of
26 the Bilingual Nurse Consortium course or other course approved

1 by rule and successful passage of the NCLEX. The nurse extern
2 shall not practice autonomous, professional nursing until he or
3 she is licensed under this Act. The nurse extern shall carry
4 out progressive nursing skills under the direct supervision of
5 a registered nurse licensed under this Act and shall not be
6 employed in a supervisory capacity. The nurse extern shall work
7 only in the sponsoring facility. A nurse extern may work for a
8 period not to exceed one calendar year from the date of
9 issuance of the permit or until he or she fails the NCLEX.
10 While working as a nurse extern, the nurse extern is subject to
11 the provisions of this Act and all rules adopted by the
12 Department for the administration of this Act.

13 (d) The Secretary shall convene a task force ~~within 2~~
14 ~~months after the effective date of this amendatory Act of the~~
15 ~~94th General Assembly~~ to establish clinical guidelines that
16 allow for the gradual progression of nursing skills in
17 culturally diverse practice settings. The Nursing Act
18 Coordinator or his or her designee shall serve as chairperson
19 of the task force. The task force shall include, but not be
20 limited to, 2 representatives of the Illinois Nurses
21 Association, 2 representatives of the Illinois Hispanic Nurses
22 Association, a nurse engaged in nursing education who possesses
23 a master's degree or higher, one representative from the
24 Humboldt Park Vocational Educational Center, 2 registered
25 nurses from United States territories who each hold a current
26 State nursing license, one representative from the Chicago

1 Bilingual Nurse Consortium, and one member of the Illinois
2 Hospital Association. The task force shall complete this work
3 no longer than 4 months after convening. After the nurse
4 externship permit program has been in effect for 2 years, the
5 task force shall evaluate the effectiveness of the program and
6 make appropriate recommendations to the Secretary.

7 (Source: P.A. 94-351, eff. 7-28-05.)

8 (225 ILCS 65/60-20 new)

9 Sec. 60-20. Expiration of RN license; renewal. The
10 expiration date and renewal period for each registered
11 professional nurse license issued under this Act shall be set
12 by rule. The holder of a license may renew the license during
13 the month preceding the expiration date of the license by
14 paying the required fee. It is the responsibility of the
15 licensee to notify the Department in writing of a change of
16 address.

17 (225 ILCS 65/60-25 new)

18 Sec. 60-25. Restoration of RN license; temporary permit.
19 (a) Any license to practice professional nursing issued
20 under this Act that has expired or that is on inactive status
21 may be restored by making application to the Department and
22 filing proof of fitness acceptable to the Department as
23 specified by rule to have the license restored and by paying
24 the required restoration fee. Such proof of fitness may include

1 evidence certifying active lawful practice in another
2 jurisdiction.

3 (b) A licensee seeking restoration of a license after it
4 has expired or been placed on inactive status for more than 5
5 years shall file an application, on forms supplied by the
6 Department, and submit the restoration or renewal fees set
7 forth by the Department. The licensee shall also submit proof
8 of fitness to practice, including one of the following:

9 (1) Certification of active practice in another
10 jurisdiction, which may include a statement from the
11 appropriate board or licensing authority in the other
12 jurisdiction that the licensee was authorized to practice
13 during the term of said active practice.

14 (2) Proof of the successful completion of a
15 Department-approved licensure examination.

16 (3) An affidavit attesting to military service as
17 provided in subsection (c) of this Section; however, if
18 application is made within 2 years after discharge and if
19 all other provisions of subsection (c) of this Section are
20 satisfied, the applicant shall be required to pay the
21 current renewal fee.

22 (c) Any registered professional nurse license issued under
23 this Act that expired while the licensee was (1) in federal
24 service on active duty with the Armed Forces of the United
25 States or in the State Militia called into service or training
26 or (2) in training or education under the supervision of the

1 United States preliminary to induction into the military
2 service may have the license restored without paying any lapsed
3 renewal fees if, within 2 years after honorable termination of
4 such service, training, or education, the applicant furnishes
5 the Department with satisfactory evidence to the effect that
6 the applicant has been so engaged and that the individual's
7 service, training, or education has been so terminated.

8 (d) Any licensee who engages in the practice of
9 professional nursing with a lapsed license or while on inactive
10 status shall be considered to be practicing without a license,
11 which shall be grounds for discipline under Section 70-5 of
12 this Act.

13 (e) Pending restoration of a registered professional nurse
14 license under this Section, the Department may grant an
15 applicant a temporary permit to practice as a registered
16 professional nurse if the Department is satisfied that the
17 applicant holds an active, unencumbered license in good
18 standing in another jurisdiction. If the applicant holds more
19 than one current active license or one or more active temporary
20 licenses from another jurisdiction, the Department shall not
21 issue a temporary permit until it is satisfied that each
22 current active license held by the applicant is unencumbered.
23 The temporary permit, which shall be issued no later than 14
24 working days after receipt by the Department of an application
25 for the permit, shall be granted upon the submission of all of
26 the following to the Department:

1 (1) A signed and completed application for restoration
2 of licensure under this Section as a registered
3 professional nurse.

4 (2) Proof of (i) a current, active license in at least
5 one other jurisdiction and proof that each current, active
6 license or temporary permit held by the applicant is
7 unencumbered or (ii) fitness to practice nursing in
8 Illinois, as specified by rule.

9 (3) A signed and completed application for a temporary
10 permit.

11 (4) The required permit fee.

12 (f) The Department may refuse to issue to an applicant a
13 temporary permit authorized under this Section if, within 14
14 working days after its receipt of an application for a
15 temporary permit, the Department determines that:

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

21 (2) within the last 5 years the applicant had a license
22 or permit related to the practice of nursing revoked,
23 suspended, or placed on probation by another jurisdiction
24 if at least one of the grounds for revoking, suspending, or
25 placing on probation is the same or substantially
26 equivalent to grounds for disciplinary action under this

1 Act; or

2 (3) the Department intends to deny restoration of the
3 license.

4 (g) The Department may revoke a temporary permit issued
5 under this Section if:

6 (1) the Department determines that the applicant has
7 been convicted within the last 5 years of any crime under
8 the laws of any jurisdiction of the United States that is
9 (i) a felony or (ii) a misdemeanor directly related to the
10 practice of the profession;

11 (2) within the last 5 years, the applicant had a
12 license or permit related to the practice of nursing
13 revoked, suspended, or placed on probation by another
14 jurisdiction, if at least one of the grounds for revoking,
15 suspending, or placing on probation is the same or
16 substantially equivalent to grounds in Illinois; or

17 (3) the Department intends to deny restoration of the
18 license.

19 (h) A temporary permit or renewed temporary permit shall
20 expire (i) upon issuance of an Illinois license or (ii) upon
21 notification that the Department intends to deny restoration of
22 licensure. A temporary permit shall expire 6 months from the
23 date of issuance. Further renewal may be granted by the
24 Department, in hardship cases, that shall automatically expire
25 upon issuance of the Illinois license or upon notification that
26 the Department intends to deny licensure, whichever occurs

1 first. No extensions shall be granted beyond the 6-month period
2 unless approved by the Secretary. Notification by the
3 Department under this Section must be by certified or
4 registered mail.

5 (225 ILCS 65/60-30 new)

6 Sec. 60-30. Inactive status of a RN license. Any registered
7 professional nurse, who notifies the Department in writing on
8 forms prescribed by the Department, may elect to place his or
9 her license on inactive status and shall, subject to rules of
10 the Department, be excused from payment of renewal fees until
11 notice is given to the Department, in writing, of his or her
12 intent to restore the license.

13 Any registered professional nurse requesting restoration
14 from inactive status shall be required to pay the current
15 renewal fee and shall be required to restore his or her
16 license, as provided by rule of the Department.

17 Any registered professional nurse whose license is on
18 inactive status shall not practice professional nursing as
19 defined by this Act in the State of Illinois.

20 (225 ILCS 65/60-35 new)

21 Sec. 60-35. RN scope of practice.

22 (a) Practice as a registered professional nurse means the
23 full scope of nursing, with or without compensation, that
24 incorporates caring for all patients in all settings, through

1 nursing standards recognized by the Department, and includes,
2 but is not limited to, all of the following:

3 (1) The comprehensive nursing assessment of the health
4 status of patients that addresses changes to patient
5 conditions.

6 (2) The development of a plan of nursing care to be
7 integrated within the patient-centered health care plan
8 that establishes nursing diagnoses, and setting goals to
9 meet identified health care needs, determining nursing
10 interventions, and implementation of nursing care through
11 the execution of nursing strategies and regimens ordered or
12 prescribed by authorized healthcare professionals.

13 (3) The administration of medication or delegation of
14 medication administration to licensed practical nurses.

15 (4) Delegation of nursing interventions to implement
16 the plan of care.

17 (5) The provision for the maintenance of safe and
18 effective nursing care rendered directly or through
19 delegation.

20 (6) Advocating for patients.

21 (7) The evaluation of responses to interventions and
22 the effectiveness of the plan of care.

23 (8) Communicating and collaborating with other health
24 care professionals.

25 (9) The procurement and application of new knowledge
26 and technologies.

1 (10) The provision of health education and counseling.

2 (11) Participating in development of policies,
3 procedures, and systems to support patient safety.

4 (225 ILCS 65/60-40 new)

5 Sec. 60-40. Continuing education for RN licensees. The
6 Department may adopt rules of continuing education for
7 registered professional nurses licensed under this Act that
8 require 20 hours of continuing education per 2-year license
9 renewal cycle. The rules shall address variances in part or in
10 whole for good cause, including without limitation illness or
11 hardship. The continuing education rules must ensure that
12 licensees are given the opportunity to participate in programs
13 sponsored by or through their State or national professional
14 associations, hospitals, or other providers of continuing
15 education. Each licensee is responsible for maintaining
16 records of completion of continuing education and shall be
17 prepared to produce the records when requested by the
18 Department.

19 (225 ILCS 65/Art. 65 heading new) (was 225 ILCS 65/Tit. 15
20 heading)

21 ARTICLE 65 ~~TITLE 15~~. ADVANCED PRACTICE NURSES

22 (225 ILCS 65/65-5 new) (was 225 ILCS 65/15-10)

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

1 Sec. 65-5 15-10. Qualifications for APN licensure ~~Advanced~~
2 ~~practice nurse; qualifications; roster.~~

3 (a) Each applicant who successfully meets the requirements
4 of this Section shall be entitled to licensure as an advanced
5 practice nurse.

6 (b) An applicant for licensure to practice as an advanced
7 practice nurse must do each of the following: ~~A person shall be~~
8 ~~qualified for licensure as an advanced practice nurse if that~~
9 ~~person:~~

10 (1) Submit a completed application and any fees as
11 established by the Department. ~~has applied in writing in~~
12 ~~form and substance satisfactory to the Department and has~~
13 ~~not violated a provision of this Act or the rules adopted~~
14 ~~under this Act. The Department may take into consideration~~
15 ~~any felony conviction of the applicant but a conviction~~
16 ~~shall not operate as an absolute bar to licensure;~~

17 (2) Hold ~~holds~~ a current license to practice as a
18 registered professional nurse under this Act. ~~in Illinois;~~

19 (3) Have ~~has~~ successfully completed requirements to
20 practice as, and holds a current, national certification
21 as, a nurse midwife, clinical nurse specialist, nurse
22 practitioner, or certified registered nurse anesthetist
23 from the appropriate national certifying body as
24 determined by rule of the Department. ~~+~~

25 ~~(4) has paid the required fees as set by rule; and~~

26 (4) Have ~~(5) has~~ obtained a graduate degree appropriate

1 for national certification in a clinical advanced practice
2 nursing specialty or a graduate degree or post-master's
3 certificate from a graduate level program in a clinical
4 advanced practice nursing specialty.

5 (5) Have not violated the provisions of this Act
6 concerning the grounds for disciplinary action. The
7 Department may take into consideration any felony
8 conviction of the applicant, but such a conviction may not
9 operate as an absolute bar to licensure.

10 (6) Submit to the criminal history records check
11 required under Section 50-35 of this Act.

12 (c) ~~(b)~~ Those applicants seeking licensure in more than one
13 advanced practice nursing specialty category need not possess
14 multiple graduate degrees. Applicants may be eligible for
15 licenses for multiple advanced practice nurse licensure
16 specialties categories, provided that the applicant (i) has met
17 the requirements for at least one advanced practice nursing
18 specialty under paragraphs (3) and (5) of subsection (a) of
19 this Section, (ii) possesses an additional graduate education
20 that results in a certificate for another clinical advanced
21 practice nurse specialty category and that meets the
22 requirements for the national certification from the
23 appropriate nursing specialty, and (iii) holds a current
24 national certification from the appropriate national
25 certifying body for that additional advanced practice nursing
26 specialty category.

1 ~~(b-5) A registered professional nurse seeking licensure as~~
2 ~~an advanced practice nurse in the category of certified~~
3 ~~registered nurse anesthetist who applies on or before December~~
4 ~~31, 2006 and does not have a graduate degree as described in~~
5 ~~subsection (b) shall be qualified for licensure if that person:~~

6 ~~(1) submits evidence of having successfully completed~~
7 ~~a nurse anesthesia program described in item (5) of~~
8 ~~subsection (a) of this Section prior to January 1, 1999;~~

9 ~~(2) submits evidence of certification as a registered~~
10 ~~nurse anesthetist by an appropriate national certifying~~
11 ~~body, as determined by rule of the Department; and~~

12 ~~(3) has continually maintained active, up-to-date~~
13 ~~recertification status as a certified registered nurse~~
14 ~~anesthetist by an appropriate national recertifying body,~~
15 ~~as determined by rule of the Department.~~

16 ~~(c) The Department shall provide by rule for APN licensure~~
17 ~~of registered professional nurses who (1) apply for licensure~~
18 ~~before July 1, 2001 and (2) submit evidence of completion of a~~
19 ~~program described in item (5) of subsection (a) or in~~
20 ~~subsection (b) and evidence of practice for at least 10 years~~
21 ~~as a nurse practitioner.~~

22 (d) Any person who holds a valid license as an advanced
23 practice nurse issued under this Act as this Act existed before
24 the effective date of this amendatory Act of the 95th General
25 Assembly shall be subject only to the advanced practice nurse
26 license renewal requirements of this Act as this Act exists on

1 and after the effective date of this amendatory Act of the 95th
2 General Assembly upon the expiration of that license. The
3 ~~Department shall maintain a separate roster of advanced~~
4 ~~practice nurses licensed under this Title and their licenses~~
5 ~~shall indicate "Registered Nurse/Advanced Practice Nurse".~~

6 (Source: P.A. 93-296, eff. 7-22-03; 94-348, eff. 7-28-05.)

7 (225 ILCS 65/65-10 new) (was 225 ILCS 65/15-13)

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

9 Sec. 65-10 ~~15-13~~. APN license ~~License~~ pending status.

10 (a) A graduate of an advanced practice nursing program may
11 practice in the State of Illinois in the role of certified
12 clinical nurse specialist, certified nurse midwife, certified
13 nurse practitioner, or certified registered nurse anesthetist
14 for not longer than 6 months provided he or she submits all of
15 the following:

16 (1) An application for licensure as an advanced
17 practice nurse in Illinois and all fees established by
18 rule.

19 (2) Proof of an application to take the national
20 certification examination in the specialty.

21 (3) Proof of completion of a graduate advanced practice
22 education program that allows the applicant to be eligible
23 for national certification in a clinical advanced practice
24 nursing speciality and that allows the applicant to be
25 eligible for licensure in Illinois in the area of his or

1 her specialty.

2 (4) Proof that he or she is licensed in Illinois as a
3 registered professional nurse.

4 ~~(5) Proof that he or she has a completed proposed~~
5 ~~collaborative agreement or practice agreement as required~~
6 ~~under Section 15-15 or 15-25 of this Act.~~

7 ~~(6) The license application fee as set by rule.~~

8 (b) License pending status shall preclude delegation of
9 prescriptive authority.

10 (c) A graduate practicing in accordance with this Section
11 must use the title "license pending certified clinical nurse
12 specialist", "license pending certified nurse midwife",
13 "license pending certified nurse practitioner", or "license
14 pending certified registered nurse anesthetist", whichever is
15 applicable.

16 (Source: P.A. 92-744, eff. 7-25-02.)

17 (225 ILCS 65/65-15 new)

18 Sec. 65-15. Expiration of APN license; renewal. The
19 expiration date and renewal period for each advanced practice
20 nurse license issued under this Act shall be set by rule. The
21 holder of a license may renew the license during the month
22 preceding the expiration date of the license by paying the
23 required fee. It is the responsibility of the licensee to
24 notify the Department in writing of a change of address. Each
25 advanced practice nurse is required to show proof of continued,

1 current national certification in the specialty.

2 (225 ILCS 65/65-20 new)

3 Sec. 65-20. Restoration of APN license; temporary permit.

4 (a) Any license issued under this Act that has expired or
5 that is on inactive status may be restored by making
6 application to the Department and filing proof of fitness
7 acceptable to the Department as specified by rule to have the
8 license restored and by paying the required restoration fee.
9 Such proof of fitness may include evidence certifying active
10 lawful practice in another jurisdiction.

11 (b) A licensee seeking restoration of a license after it
12 has expired or been placed on inactive status for more than 5
13 years shall file an application, on forms supplied by the
14 Department, and submit the restoration or renewal fees set
15 forth by the Department. The licensee shall also submit proof
16 of fitness to practice, including one of the following:

17 (1) Certification of active practice in another
18 jurisdiction, which may include a statement from the
19 appropriate board or licensing authority in the other
20 jurisdiction in which the licensee was authorized to
21 practice during the term of said active practice.

22 (2) Proof of the successful completion of a
23 Department-approved licensure examination.

24 (3) An affidavit attesting to military service as
25 provided in subsection (c) of this Section; however, if

1 application is made within 2 years after discharge and if
2 all other provisions of subsection (c) of this Section are
3 satisfied, the applicant shall be required to pay the
4 current renewal fee.

5 (4) Other proof as established by rule.

6 (c) Any advanced practice nurse license issued under this
7 Act that expired while the licensee was (1) in federal service
8 on active duty with the Armed Forces of the United States or in
9 the State Militia called into service or training or (2) in
10 training or education under the supervision of the United
11 States preliminary to induction into the military service may
12 have the license restored without paying any lapsed renewal
13 fees if, within 2 years after honorable termination of such
14 service, training, or education, the applicant furnishes the
15 Department with satisfactory evidence to the effect that the
16 applicant has been so engaged and that the individual's
17 service, training, or education has been so terminated.

18 (d) Any licensee who engages in the practice of advanced
19 practice nursing with a lapsed license or while on inactive
20 status shall be considered to be practicing without a license,
21 which shall be grounds for discipline under Section 70-5 of
22 this Act.

23 (e) Pending restoration of an advanced practice nurse
24 license under this Section, the Department may grant an
25 applicant a temporary permit to practice as an advanced
26 practice nurse if the Department is satisfied that the

1 applicant holds an active, unencumbered license in good
2 standing in another jurisdiction. If the applicant holds more
3 than one current active license or one or more active temporary
4 licenses from another jurisdiction, the Department shall not
5 issue a temporary permit until it is satisfied that each
6 current active license held by the applicant is unencumbered.
7 The temporary permit, which shall be issued no later than 14
8 working days after receipt by the Department of an application
9 for the permit, shall be granted upon the submission of all of
10 the following to the Department:

11 (1) A signed and completed application for restoration
12 of licensure under this Section as an advanced practice
13 nurse.

14 (2) Proof of (i) a current, active license in at least
15 one other jurisdiction and proof that each current, active
16 license or temporary permit held by the applicant is
17 unencumbered or (ii) fitness to practice nursing in
18 Illinois, as specified by rule.

19 (3) A signed and completed application for a temporary
20 permit.

21 (4) The required permit fee.

22 (5) Other proof as established by rule.

23 (f) The Department may refuse to issue to an applicant a
24 temporary permit authorized under this Section if, within 14
25 working days after its receipt of an application for a
26 temporary permit, the Department determines that:

1 (1) the applicant has been convicted within the last 5
2 years of any crime under the laws of any jurisdiction of
3 the United States that is (i) a felony or (ii) a
4 misdemeanor directly related to the practice of the
5 profession;

6 (2) within the last 5 years, the applicant had a
7 license or permit related to the practice of nursing
8 revoked, suspended, or placed on probation by another
9 jurisdiction if at least one of the grounds for revoking,
10 suspending, or placing on probation is the same or
11 substantially equivalent to grounds for disciplinary
12 action under this Act; or

13 (3) the Department intends to deny restoration of the
14 license.

15 (g) The Department may revoke a temporary permit issued
16 under this Section if:

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

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

1 substantially equivalent to grounds in Illinois; or

2 (3) the Department intends to deny restoration of the
3 license.

4 (h) A temporary permit or renewed temporary permit shall
5 expire (i) upon issuance of an Illinois license or (ii) upon
6 notification that the Department intends to deny restoration of
7 licensure. Except as otherwise provided in this Section, a
8 temporary permit shall expire 6 months from the date of
9 issuance. Further renewal may be granted by the Department in
10 hardship cases that shall automatically expire upon issuance of
11 the Illinois license or upon notification that the Department
12 intends to deny licensure, whichever occurs first. No
13 extensions shall be granted beyond the 6-month period unless
14 approved by the Secretary. Notification by the Department under
15 this Section must be by certified or registered mail.

16 (225 ILCS 65/65-25 new)

17 Sec. 65-25. Inactive status of a APN license. Any advanced
18 practice nurse who notifies the Department in writing on forms
19 prescribed by the Department may elect to place his or her
20 license on inactive status and shall, subject to rules of the
21 Department, be excused from payment of renewal fees until
22 notice is given to the Department in writing of his or her
23 intent to restore the license.

24 Any advanced practice nurse requesting restoration from
25 inactive status shall be required to pay the current renewal

1 fee and shall be required to restore his or her license, as
2 provided by rule of the Department.

3 Any advanced practice nurse whose license is on inactive
4 status shall not practice advanced practice nursing, as defined
5 by this Act in the State of Illinois.

6 (225 ILCS 65/65-30 new)

7 Sec. 65-30. APN scope of practice.

8 (a) Advanced practice nursing by certified nurse
9 practitioners, certified nurse anesthetists, certified nurse
10 midwives, or clinical nurse specialists is based on knowledge
11 and skills acquired throughout an advanced practice nurse's
12 nursing education, training, and experience.

13 (b) Practice as an advanced practice nurse means a scope of
14 nursing practice, with or without compensation, and includes
15 the registered nurse scope of practice.

16 (c) The scope of practice of an advanced practice nurse
17 includes, but is not limited to, each of the following:

18 (1) Advanced nursing patient assessment and diagnosis.

19 (2) Ordering diagnostic and therapeutic tests and
20 procedures, performing those tests and procedures when using
21 health care equipment, and interpreting and using the results
22 of diagnostic and therapeutic tests and procedures ordered by
23 the advanced practice nurse or another health care
24 professional.

25 (3) Ordering treatments, ordering or applying

1 appropriate medical devices, and using nursing medical,
2 therapeutic, and corrective measures to treat illness and
3 improve health status.

4 (4) Providing palliative and end-of-life care.

5 (5) Providing advanced counseling, patient education,
6 health education, and patient advocacy.

7 (6) Prescriptive authority as defined in Section 65-40
8 of this Act.

9 (7) Delegating selected nursing activities or tasks to
10 a licensed practical nurse, a registered professional nurse, or
11 other personnel.

12 (225 ILCS 65/65-35 new) (was 225 ILCS 65/15-15)

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

14 Sec. 65-35 ~~15-15~~. Written collaborative agreements.

15 (a) A written collaborative agreement is required for all
16 advanced practice nurses engaged in clinical practice, except
17 for advanced practice nurses who are authorized to practice in
18 a hospital or ambulatory surgical treatment center.

19 (a-5) If an advanced practice nurse engages in clinical
20 practice outside of a hospital or ambulatory surgical treatment
21 center in which he or she is authorized to practice, the
22 advanced practice nurse must have a written collaborative
23 agreement. ~~Except as provided in Section 15-25, no person shall~~
24 ~~engage in the practice of advanced practice nursing except when~~
25 ~~licensed under this Title and pursuant to a written~~

1 ~~collaborative agreement with a collaborating physician.~~

2 (b) A written collaborative agreement shall describe the
3 working relationship of the advanced practice nurse with the
4 collaborating physician or podiatrist and shall authorize the
5 categories of care, treatment, or procedures to be performed by
6 the advanced practice nurse. A collaborative agreement with a
7 dentist must be in accordance with subsection (c-10) of this
8 Section. Collaboration does not require an employment
9 relationship between the collaborating physician and advanced
10 practice nurse. Collaboration means the relationship under
11 which an advanced practice nurse works with a collaborating
12 physician or podiatrist in an active clinical practice to
13 deliver health care services in accordance with (i) the
14 advanced practice nurse's training, education, and experience
15 and (ii) collaboration and consultation ~~medical direction~~ as
16 documented in a jointly developed written collaborative
17 agreement.

18 The agreement shall be defined to promote the exercise of
19 professional judgment by the advanced practice nurse
20 commensurate with his or her education and experience. The
21 services to be provided by the advanced practice nurse shall be
22 services that the collaborating physician or podiatrist is
23 authorized to and generally provides to his or her patients in
24 the normal course of his or her clinical medical practice,
25 except as set forth in subsection (c-5) of this Section. The
26 agreement need not describe the exact steps that an advanced

1 practice nurse must take with respect to each specific
2 condition, disease, or symptom but must specify which
3 authorized procedures require the a physician's presence of the
4 collaborating physician or podiatrist as the procedures are
5 being performed. The collaborative relationship under an
6 agreement shall not be construed to require the personal
7 presence of a physician or podiatrist at all times at the place
8 where services are rendered. Methods of communication shall be
9 available for consultation with the collaborating physician or
10 podiatrist in person or by telecommunications in accordance
11 with established written guidelines as set forth in the written
12 agreement.

13 (c) Collaboration and consultation ~~Physician medical~~
14 ~~direction~~ under all collaboration agreements ~~an agreement~~
15 shall be adequate if a collaborating physician or podiatrist
16 does each of the following:

17 (1) Participates ~~participates~~ in the joint formulation
18 and joint approval of orders or guidelines with the
19 advanced practice nurse APN and he or she periodically
20 reviews such orders and the services provided patients
21 under such orders in accordance with accepted standards of
22 medical practice and advanced practice nursing practice.†

23 (2) Meets in person with the advanced practice nurse ~~is~~
24 ~~on-site~~ at least once a month to provide collaboration
25 ~~medical direction~~ and consultation. In the case of
26 anesthesia services provided by a certified registered

1 nurse anesthetist, an anesthesiologist, physician,
2 dentist, or podiatrist must participate through discussion
3 of and agreement with the anesthesia plan and remain
4 physically present and available on the premises during the
5 delivery of anesthesia services for diagnosis,
6 consultation, and treatment of emergency medical
7 conditions. ~~and~~

8 (3) Is ~~is~~ available through telecommunications for
9 consultation on medical problems, complications, or
10 emergencies or patient referral. In the case of anesthesia
11 services provided by a certified registered nurse
12 anesthetist, an anesthesiologist, physician, dentist, or
13 podiatrist must participate through discussion of and
14 agreement with the anesthesia plan and remain physically
15 present and available on the premises during the delivery
16 of anesthesia services for diagnosis, consultation, and
17 treatment of emergency medical conditions.

18 The agreement must contain provisions detailing notice for
19 termination or change of status involving a written
20 collaborative agreement, except when such notice is given for
21 just cause.

22 (c-5) A certified registered nurse anesthetist, who
23 provides anesthesia services outside of a hospital or
24 ambulatory surgical treatment center shall enter into a written
25 collaborative agreement with an anesthesiologist or the
26 physician licensed to practice medicine in all its branches or

1 the podiatrist performing the procedure. Outside of a hospital
2 or ambulatory surgical treatment center, the certified
3 registered nurse anesthetist may provide only those services
4 that the collaborating podiatrist is authorized to provide
5 pursuant to the Podiatric Medical Practice Act of 1987 and
6 rules adopted thereunder. A certified registered nurse
7 anesthetist may select, order, and administer medication,
8 including controlled substances, and apply appropriate medical
9 devices for delivery of anesthesia services under the
10 anesthesia plan agreed with by the anesthesiologist or the
11 operating physician or operating podiatrist.

12 (c-10) A certified registered nurse anesthetist who
13 provides anesthesia services in a dental office shall enter
14 into a written collaborative agreement with an
15 anesthesiologist or the physician licensed to practice
16 medicine in all its branches or the operating dentist
17 performing the procedure. The agreement shall describe the
18 working relationship of the certified registered nurse
19 anesthetist and dentist and shall authorize the categories of
20 care, treatment, or procedures to be performed by the certified
21 registered nurse anesthetist. In a collaborating dentist's
22 office, the certified registered nurse anesthetist may only
23 provide those services that the operating dentist with the
24 appropriate permit is authorized to provide pursuant to the
25 Illinois Dental Practice Act and rules adopted thereunder. For
26 anesthesia services, an anesthesiologist, physician, or

1 operating dentist shall participate through discussion of and
2 agreement with the anesthesia plan and shall remain physically
3 present and be available on the premises during the delivery of
4 anesthesia services for diagnosis, consultation, and treatment
5 of emergency medical conditions. A certified registered nurse
6 anesthetist may select, order, and administer medication,
7 including controlled substances, and apply appropriate medical
8 devices for delivery of anesthesia services under the
9 anesthesia plan agreed with by the operating dentist.

10 (d) A copy of the signed, written collaborative agreement
11 must be available to the Department upon request from both the
12 advanced practice nurse and the collaborating physician or
13 podiatrist ~~and shall be annually updated.~~

14 (e) Nothing in this Act shall be construed to limit the
15 delegation of tasks or duties by a physician to a licensed
16 practical nurse, a registered professional nurse, or other
17 persons.

18 (f) An advanced practice nurse shall inform each
19 collaborating physician, dentist, or podiatrist of all
20 collaborative agreements he or she has signed and provide a
21 copy of these to any collaborating physician, dentist, or
22 podiatrist upon request.

23 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

24 (225 ILCS 65/65-40 new) (was 225 ILCS 65/15-20)

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

1 Sec. 65-40 15-20. Prescriptive authority.

2 (a) A collaborating physician or podiatrist may, but is not
3 required to, delegate ~~limited~~ prescriptive authority to an
4 advanced practice nurse as part of a written collaborative
5 agreement. This authority may, but is not required to, include
6 prescription of, selection of, orders for, administration of,
7 storage of, acceptance of samples of, and dispensing over the
8 counter medications, legend drugs, medical gases, and
9 ~~dispensing of legend drugs and legend~~ controlled substances
10 categorized as Schedule III, III-N, IV, or V controlled
11 substances, as defined in Article II of the Illinois Controlled
12 Substances Act, and other preparations, including, but not
13 limited to, botanical and herbal remedies. The collaborating
14 physician or podiatrist must have a valid current Illinois
15 controlled substance license and federal registration to
16 delegate authority to prescribe delegated controlled
17 substances.

18 (b) To prescribe ~~Schedule III, IV, or V~~ controlled
19 substances under this Section, an advanced practice nurse must
20 obtain a mid-level practitioner controlled substance license.
21 Medication orders shall be reviewed periodically by the
22 collaborating physician or podiatrist.

23 (c) The collaborating physician or podiatrist shall file
24 with the Department notice of delegation of prescriptive
25 authority and termination of such delegation, in accordance
26 with rules of the Department. Upon receipt of this notice

1 delegating authority to prescribe Schedule III, III-N, IV, or V
2 controlled substances, the licensed advanced practice nurse
3 shall be eligible to register for a mid-level practitioner
4 controlled substance license under Section 303.05 of the
5 Illinois Controlled Substances Act.

6 (d) In addition to the requirements of subsections (a),
7 (b), and (c) of this Section, a collaborating physician may,
8 but is not required to, delegate authority to an advanced
9 practice nurse to prescribe Schedule II or II-N controlled
10 substances, if all of the following conditions apply:

11 (1) No more than 5 Schedule II or II-N controlled
12 substances by oral dosage may be delegated.

13 (2) Any delegation must be controlled substances that
14 the collaborating physician prescribes.

15 (3) Any prescription must be limited to no more than a
16 30-day oral dosage, with any continuation authorized only
17 after prior approval of the collaborating physician.

18 (4) The advanced practice nurse must discuss the
19 condition of any patients for whom a controlled substance
20 is prescribed monthly with the delegating physician.

21 (e) ~~(d)~~ Nothing in this Act shall be construed to limit the
22 delegation of tasks or duties by a physician to a licensed
23 practical nurse, a registered professional nurse, or other
24 persons ~~personnel~~.

25 (Source: P.A. 90-742, eff. 8-13-98; 90-818, eff. 3-23-99.)

1 (225 ILCS 65/65-45 new) (was 225 ILCS 65/15-25)

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

3 Sec. 65-45 ~~15-25~~. Advanced practice nursing in hospitals or
4 ambulatory surgical treatment centers ~~Certified registered~~
5 ~~nurse anesthetists~~.

6 (a) An advanced practice nurse ~~A licensed certified~~
7 ~~registered nurse anesthetist~~ may provide ~~anesthesia~~ services
8 ~~pursuant to the order of a licensed physician, licensed~~
9 ~~dentist, or licensed podiatrist~~ in a licensed hospital or a
10 licensed ambulatory surgical treatment center without
11 prescriptive authority or a written collaborative agreement
12 pursuant to Section 65-35 of this Act, ~~or the office of a~~
13 ~~licensed physician, the office of a licensed dentist, or the~~
14 ~~office of a licensed podiatrist~~. An advanced practice nurse
15 must possess clinical privileges recommended by the hospital
16 medical staff and granted by the hospital or the consulting
17 medical staff committee and ambulatory surgical treatment
18 center in order to provide services. The medical staff or
19 consulting medical staff committee shall periodically review
20 the services of advanced practice nurses granted clinical
21 privileges. Authority may also be granted to individual
22 advanced practice nurses to select, order, and administer
23 medications, including controlled substances, to provide
24 delineated care. The attending physician shall determine an
25 advanced practice nurse's role in providing care for his or her
26 patients, except as otherwise provided in the medical staff

1 bylaws or consulting committee policies.

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

20 (b) An advanced practice ~~A certified registered~~ nurse
21 ~~anesthetist~~ who provides ~~anesthesia~~ services in a hospital
22 shall do so in accordance with Section 10.7 of the Hospital
23 Licensing Act and, in an ambulatory surgical treatment center,
24 in accordance with Section 6.5 of the Ambulatory Surgical
25 Treatment Center Act.

26 ~~(c) A certified registered nurse anesthetist who provides~~

1 ~~anesthesia services in a physician office, dental office, or~~
2 ~~podiatric office shall enter into a written practice agreement~~
3 ~~with an anesthesiologist or the physician licensed to practice~~
4 ~~medicine in all its branches, the dentist, or the podiatrist~~
5 ~~performing the procedure. The agreement shall describe the~~
6 ~~working relationship of the certified registered nurse~~
7 ~~anesthetist and anesthesiologist, physician, dentist, or~~
8 ~~podiatrist and shall authorize the categories of care,~~
9 ~~treatment, or procedures to be performed by the certified~~
10 ~~registered nurse anesthetist. In a dentist's office, the~~
11 ~~certified registered nurse anesthetist may only provide those~~
12 ~~services the dentist is authorized to provide pursuant to the~~
13 ~~Illinois Dental Practice Act and rules. In a podiatrist's~~
14 ~~office, the certified registered nurse anesthetist may only~~
15 ~~provide those services the podiatrist is authorized to provide~~
16 ~~pursuant to the Podiatric Medical Practice Act of 1987 and~~
17 ~~rules. For anesthesia services, an anesthesiologist,~~
18 ~~physician, dentist, or podiatrist shall participate through~~
19 ~~discussion of and agreement with the anesthesia plan and shall~~
20 ~~remain physically present and be available on the premises~~
21 ~~during the delivery of anesthesia services for diagnosis,~~
22 ~~consultation, and treatment of emergency medical conditions.~~

23 ~~(d) A certified registered nurse anesthetist is not~~
24 ~~required to possess prescriptive authority or a written~~
25 ~~collaborative agreement meeting the requirements of Section~~
26 ~~15 15 to provide anesthesia services ordered by a licensed~~

1 ~~physician, dentist, or podiatrist. Certified registered nurse~~
2 ~~anesthetists are authorized to select, order, and administer~~
3 ~~drugs and apply the appropriate medical devices in the~~
4 ~~provision of anesthesia services under the anesthesia plan~~
5 ~~agreed with by the anesthesiologist or the physician in~~
6 ~~accordance with hospital alternative policy or the medical~~
7 ~~staff consulting committee policies of a licensed ambulatory~~
8 ~~surgical treatment center. In a physician's office, dentist's~~
9 ~~office, or podiatrist's office, the anesthesiologist,~~
10 ~~operating physician, operating dentist, or operating~~
11 ~~podiatrist shall agree with the anesthesia plan, in accordance~~
12 ~~with the written practice agreement.~~

13 ~~(c) A certified registered nurse anesthetist may be~~
14 ~~delegated limited prescriptive authority under Section 15-20~~
15 ~~in a written collaborative agreement meeting the requirements~~
16 ~~of Section 15-15.~~

17 (Source: P.A. 91-414, eff. 8-6-99.)

18 (225 ILCS 65/65-50 new) (was 225 ILCS 65/15-30)

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

20 Sec. 65-50 ~~15-30~~. APN title ~~Title~~.

21 (a) No person shall use any words, abbreviations, figures,
22 letters, title, sign, card, or device tending to imply that he
23 or she is an advanced practice nurse, including but not limited
24 to using the titles or initials "Advanced Practice Nurse",
25 "Certified Nurse Midwife", "Certified Nurse Practitioner",

1 "Certified Registered Nurse Anesthetist", "Clinical Nurse
2 Specialist", "A.P.N.", "C.N.M.", "C.N.P.", "C.R.N.A.",
3 "C.N.S.", or similar titles or initials, with the intention of
4 indicating practice as an advanced practice nurse without
5 meeting the requirements of this Act.

6 (b) No advanced practice nurse shall indicate to other
7 persons that he or she is qualified to engage in the practice
8 of medicine. ~~No advanced practice nurse shall use the title of~~
9 ~~doctor or associate with his or her name or any other term to~~
10 ~~indicate to other persons that he or she is qualified to engage~~
11 ~~in the general practice of medicine.~~

12 (c) ~~(b)~~ An advanced practice nurse shall verbally identify
13 himself or herself as an advanced practice nurse, including
14 specialty certification, to each patient.

15 (d) ~~(e)~~ Nothing in this Act shall be construed to relieve ~~a~~
16 ~~physician of professional or legal responsibility for the care~~
17 ~~and treatment of persons attended by him or her or to relieve~~
18 an advanced practice nurse of the professional or legal
19 responsibility for the care and treatment of persons attended
20 by him or her.

21 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

22 (225 ILCS 65/65-55 new) (was 225 ILCS 65/15-40)

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

24 Sec. 65-55 ~~15-40~~. Advertising as an APN.

25 (a) A person licensed under this Act as an advanced

1 practice nurse ~~Title~~ may advertise the availability of
2 professional services in the public media or on the premises
3 where the professional services are rendered. The advertising
4 shall be limited to the following information:

5 (1) publication of the person's name, title, office
6 hours, address, and telephone number;

7 (2) information pertaining to the person's areas of
8 specialization, including but not limited to appropriate
9 board certification or limitation of professional
10 practice;

11 (3) publication of the person's collaborating
12 physician's, dentist's, or podiatrist's name, title, and
13 areas of specialization;

14 (4) information on usual and customary fees for routine
15 professional services offered, which shall include
16 notification that fees may be adjusted due to complications
17 or unforeseen circumstances;

18 (5) announcements of the opening of, change of, absence
19 from, or return to business;

20 (6) announcement of additions to or deletions from
21 professional licensed staff; and

22 (7) the issuance of business or appointment cards.

23 (b) It is unlawful for a person licensed under this Act as
24 an advanced practice nurse ~~Title~~ to use testimonials or claims
25 of superior quality of care to entice the public. It shall be
26 unlawful to advertise fee comparisons of available services

1 with those of other licensed persons.

2 (c) This Article ~~Title~~ does not authorize the advertising
3 of professional services that the offeror of the services is
4 not licensed or authorized to render. Nor shall the advertiser
5 use statements that contain false, fraudulent, deceptive, or
6 misleading material or guarantees of success, statements that
7 play upon the vanity or fears of the public, or statements that
8 promote or produce unfair competition.

9 (d) It is unlawful and punishable under the penalty
10 provisions of this Act for a person licensed under this Article
11 ~~Title~~ to knowingly advertise that the licensee will accept as
12 payment for services rendered by assignment from any third
13 party payor the amount the third party payor covers as payment
14 in full, if the effect is to give the impression of eliminating
15 the need of payment by the patient of any required deductible
16 or copayment applicable in the patient's health benefit plan.

17 (e) ~~(d-5)~~ A licensee shall include in every advertisement
18 for services regulated under this Act his or her title as it
19 appears on the license or the initials authorized under this
20 Act.

21 (f) ~~(e)~~ As used in this Section, "advertise" means
22 solicitation by the licensee or through another person or
23 entity by means of handbills, posters, circulars, motion
24 pictures, radio, newspapers, or television or any other manner.
25 (Source: P.A. 90-742, eff. 8-13-98; 91-310, eff. 1-1-00.)

1 (225 ILCS 65/65-60 new) (was 225 ILCS 65/15-45)

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

3 Sec. 65-60 ~~15-45~~. Continuing education. The Department
4 shall adopt rules of continuing education for persons licensed
5 under this Article ~~Title~~ that require 50 hours of continuing
6 education per 2-year license renewal cycle. Completion of the
7 50 hours of continuing education shall be deemed to satisfy the
8 continuing education requirements for renewal of a registered
9 professional nurse license as required by this Act. The rules
10 shall not be inconsistent with requirements of relevant
11 national certifying bodies or State or national professional
12 associations. The rules shall also address variances in part or
13 in whole for good cause, including but not limited to illness
14 or hardship. The continuing education rules shall assure that
15 licensees are given the opportunity to participate in programs
16 sponsored by or through their State or national professional
17 associations, hospitals, or other providers of continuing
18 education. Each licensee is responsible for maintaining
19 records of completion of continuing education and shall be
20 prepared to produce the records when requested by the
21 Department.

22 (Source: P.A. 92-750, eff. 1-1-03.)

23 (225 ILCS 65/65-65 new) (was 225 ILCS 65/15-55)

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

25 Sec. 65-65 ~~15-55~~. Reports relating to APN professional

1 conduct and capacity.

2 (a) Entities Required to Report.

3 (1) Health Care Institutions. The chief administrator
4 or executive officer of a health care institution licensed
5 by the Department of Public Health, which provides the
6 minimum due process set forth in Section 10.4 of the
7 Hospital Licensing Act, shall report to the ~~APN~~ Board when
8 an advanced practice nurse's ~~a licensee's~~ organized
9 professional staff clinical privileges are terminated or
10 are restricted based on a final determination, in
11 accordance with that institution's bylaws or rules and
12 regulations, that (i) a person has either committed an act
13 or acts that may directly threaten patient care and that
14 are not of an administrative nature or (ii) that a person
15 may be mentally or physically disabled in a manner that may
16 endanger patients under that person's care. The chief
17 administrator or officer shall also report if an advanced
18 practice nurse ~~a licensee~~ accepts voluntary termination or
19 restriction of clinical privileges in lieu of formal action
20 based upon conduct related directly to patient care and not
21 of an administrative nature, or in lieu of formal action
22 seeking to determine whether a person may be mentally or
23 physically disabled in a manner that may endanger patients
24 under that person's care. The ~~APN~~ Board shall provide by
25 rule for the reporting to it of all instances in which a
26 person licensed under this Article ~~Title~~, who is impaired

1 by reason of age, drug, or alcohol abuse or physical or
2 mental impairment, is under supervision and, where
3 appropriate, is in a program of rehabilitation. Reports
4 submitted under this subsection shall be strictly
5 confidential and may be reviewed and considered only by the
6 members of the ~~APN~~ Board or authorized staff as provided by
7 rule of the ~~APN~~ Board. Provisions shall be made for the
8 periodic report of the status of any such reported person
9 not less than twice annually in order that the ~~APN~~ Board
10 shall have current information upon which to determine the
11 status of that person. Initial and periodic reports of
12 impaired advanced practice nurses shall not be considered
13 records within the meaning of the State Records Act and
14 shall be disposed of, following a determination by the ~~APN~~
15 Board that such reports are no longer required, in a manner
16 and at an appropriate time as the ~~APN~~ Board shall determine
17 by rule. The filing of reports submitted under this
18 subsection shall be construed as the filing of a report for
19 purposes of subsection (c) of this Section.

20 (2) Professional Associations. The President or chief
21 executive officer of an association or society of persons
22 licensed under this Article ~~Title~~, operating within this
23 State, shall report to the ~~APN~~ Board when the association
24 or society renders a final determination that a person
25 licensed under this Article ~~Title~~ has committed
26 unprofessional conduct related directly to patient care or

1 that a person may be mentally or physically disabled in a
2 manner that may endanger patients under the person's care.

3 (3) Professional Liability Insurers. Every insurance
4 company that offers policies of professional liability
5 insurance to persons licensed under this Article Title, or
6 any other entity that seeks to indemnify the professional
7 liability of a person licensed under this Article Title,
8 shall report to the ~~APN~~ Board the settlement of any claim
9 or cause of action, or final judgment rendered in any cause
10 of action, that alleged negligence in the furnishing of
11 patient care by the licensee when the settlement or final
12 judgment is in favor of the plaintiff.

13 (4) State's Attorneys. The State's Attorney of each
14 county shall report to the ~~APN~~ Board all instances in which
15 a person licensed under this Article Title is convicted or
16 otherwise found guilty of the commission of a felony.

17 (5) State Agencies. All agencies, boards, commissions,
18 departments, or other instrumentalities of the government
19 of this State shall report to the ~~APN~~ Board any instance
20 arising in connection with the operations of the agency,
21 including the administration of any law by the agency, in
22 which a person licensed under this Article Title has either
23 committed an act or acts that may constitute a violation of
24 this Article Title, that may constitute unprofessional
25 conduct related directly to patient care, or that indicates
26 that a person licensed under this Article Title may be

1 mentally or physically disabled in a manner that may
2 endanger patients under that person's care.

3 (b) Mandatory Reporting. All reports required under items
4 (16) and (17) ~~(8) and (9)~~ of subsection (a) of Section 70-5
5 ~~15-50 and under this Section~~ shall be submitted to the ~~APN~~
6 Board in a timely fashion. The reports shall be filed in
7 writing within 60 days after a determination that a report is
8 required under this Article ~~Title~~. All reports shall contain
9 the following information:

10 (1) The name, address, and telephone number of the
11 person making the report.

12 (2) The name, address, and telephone number of the
13 person who is the subject of the report.

14 (3) The name or other means of identification of any
15 patient or patients whose treatment is a subject of the
16 report, except that no medical records may be revealed
17 without the written consent of the patient or patients.

18 (4) A brief description of the facts that gave rise to
19 the issuance of the report, including but not limited to
20 the dates of any occurrences deemed to necessitate the
21 filing of the report.

22 (5) If court action is involved, the identity of the
23 court in which the action is filed, the docket number, and
24 date of filing of the action.

25 (6) Any further pertinent information that the
26 reporting party deems to be an aid in the evaluation of the

1 report.

2 Nothing contained in this Section shall be construed to in
3 any way waive or modify the confidentiality of medical reports
4 and committee reports to the extent provided by law. Any
5 information reported or disclosed shall be kept for the
6 confidential use of the ~~APN~~ Board, the ~~APN~~ Board's attorneys,
7 the investigative staff, and authorized clerical staff and
8 shall be afforded the same status as is provided information
9 concerning medical studies in Part 21 of Article VIII of the
10 Code of Civil Procedure.

11 (c) Immunity from Prosecution. An individual or
12 organization acting in good faith, and not in a wilful and
13 wanton manner, in complying with this Section ~~Title~~ by
14 providing a report or other information to the ~~APN~~ Board, by
15 assisting in the investigation or preparation of a report or
16 information, by participating in proceedings of the ~~APN~~ Board,
17 or by serving as a member of the Board shall not, as a result of
18 such actions, be subject to criminal prosecution or civil
19 damages.

20 (d) Indemnification. Members of the ~~APN~~ Board, the ~~APN~~
21 Board's attorneys, the investigative staff, advanced practice
22 nurses or physicians retained under contract to assist and
23 advise in the investigation, and authorized clerical staff
24 shall be indemnified by the State for any actions (i) occurring
25 within the scope of services on the ~~APN~~ Board, (ii) performed
26 in good faith, and (iii) not wilful and wanton in nature. The

1 Attorney General shall defend all actions taken against those
2 persons unless he or she determines either that there would be
3 a conflict of interest in the representation or that the
4 actions complained of were not performed in good faith or were
5 wilful and wanton in nature. If the Attorney General declines
6 representation, the member shall have the right to employ
7 counsel of his or her choice, whose fees shall be provided by
8 the State, after approval by the Attorney General, unless there
9 is a determination by a court that the member's actions were
10 not performed in good faith or were wilful and wanton in
11 nature. The member shall notify the Attorney General within 7
12 days of receipt of notice of the initiation of an action
13 involving services of the ~~APN~~ Board. Failure to so notify the
14 Attorney General shall constitute an absolute waiver of the
15 right to a defense and indemnification. The Attorney General
16 shall determine within 7 days after receiving the notice
17 whether he or she will undertake to represent the member.

18 (e) Deliberations of ~~APN~~ Board. Upon the receipt of a
19 report called for by this Section ~~Title~~, other than those
20 reports of impaired persons licensed under this Article ~~Title~~
21 required pursuant to the rules of the ~~APN~~ Board, the ~~APN~~ Board
22 shall notify in writing by certified mail the person who is the
23 subject of the report. The notification shall be made within 30
24 days of receipt by the ~~APN~~ Board of the report. The
25 notification shall include a written notice setting forth the
26 person's right to examine the report. Included in the

1 notification shall be the address at which the file is
2 maintained, the name of the custodian of the reports, and the
3 telephone number at which the custodian may be reached. The
4 person who is the subject of the report shall submit a written
5 statement responding to, clarifying, adding to, or proposing to
6 amend the report previously filed. The statement shall become a
7 permanent part of the file and shall be received by the ~~APN~~
8 Board no more than 30 days after the date on which the person
9 was notified of the existence of the original report. The ~~APN~~
10 Board shall review all reports received by it and any
11 supporting information and responding statements submitted by
12 persons who are the subject of reports. The review by the ~~APN~~
13 Board shall be in a timely manner but in no event shall the ~~APN~~
14 Board's initial review of the material contained in each
15 disciplinary file be less than 61 days nor more than 180 days
16 after the receipt of the initial report by the ~~APN~~ Board. When
17 the ~~APN~~ Board makes its initial review of the materials
18 contained within its disciplinary files, the ~~APN~~ Board shall,
19 in writing, make a determination as to whether there are
20 sufficient facts to warrant further investigation or action.
21 Failure to make that determination within the time provided
22 shall be deemed to be a determination that there are not
23 sufficient facts to warrant further investigation or action.
24 Should the ~~APN~~ Board find that there are not sufficient facts
25 to warrant further investigation or action, the report shall be
26 accepted for filing and the matter shall be deemed closed and

1 so reported. The individual or entity filing the original
2 report or complaint and the person who is the subject of the
3 report or complaint shall be notified in writing by the ~~APN~~
4 Board of any final action on their report or complaint.

5 (f) Summary Reports. The ~~APN~~ Board shall prepare, on a
6 timely basis, but in no event less than one every other month,
7 a summary report of final actions taken upon disciplinary files
8 maintained by the ~~APN~~ Board. The summary reports shall be made
9 available to the public upon request and payment of the fees
10 set by the Department. This publication may be made available
11 to the public on the Department's Internet website ~~sent by the~~
12 ~~APN Board to every health care facility licensed by the~~
13 ~~Department of Public Health, every professional association~~
14 ~~and society of persons licensed under this Title functioning on~~
15 ~~a statewide basis in this State, all insurers providing~~
16 ~~professional liability insurance to persons licensed under~~
17 ~~this Title in this State, and the Illinois Pharmacists~~
18 ~~Association.~~

19 (g) Any violation of this Section shall constitute a Class
20 A misdemeanor.

21 (h) If a person violates the provisions of this Section, an
22 action may be brought in the name of the People of the State of
23 Illinois, through the Attorney General of the State of
24 Illinois, for an order enjoining the violation or for an order
25 enforcing compliance with this Section. Upon filing of a
26 verified petition in court, the court may issue a temporary

1 restraining order without notice or bond and may preliminarily
2 or permanently enjoin the violation, and if it is established
3 that the person has violated or is violating the injunction,
4 the court may punish the offender for contempt of court.
5 Proceedings under this subsection shall be in addition to, and
6 not in lieu of, all other remedies and penalties provided for
7 by this Section.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 (225 ILCS 65/Art. 70 heading new) (was 225 ILCS 65/Tit. 20
10 heading)

11 ARTICLE 70 ~~TITLE 20~~. ADMINISTRATION AND ENFORCEMENT

12 (225 ILCS 65/70-5 new) (was 225 ILCS 65/10-45)

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

14 Sec. 70-5 ~~10-45~~. Grounds for disciplinary action.

15 (a) The Department may, ~~upon recommendation of the Board,~~
16 refuse to issue or to renew, or may revoke, suspend, place on
17 probation, reprimand, or take other disciplinary or
18 non-disciplinary action as the Department may deem
19 appropriate, including fines not to exceed \$10,000 per
20 violation, with regard to a license for any one or combination
21 of the causes set forth in subsection (b) below. ~~Fines up to~~
22 ~~\$2,500 may be imposed in conjunction with other forms of~~
23 ~~disciplinary action for those violations that result in~~
24 ~~monetary gain for the licensee. Fines shall not be the~~

1 ~~exclusive disposition of any disciplinary action arising out of~~
2 ~~conduct resulting in death or injury to a patient. Fines shall~~
3 ~~not be assessed in disciplinary actions involving mental or~~
4 ~~physical illness or impairment.~~ All fines collected under this
5 Section shall be deposited in the Nursing Dedicated and
6 Professional Fund.

7 (b) Grounds for disciplinary action include the following:

8 (1) Material deception in furnishing information to
9 the Department.

10 (2) Material violations of any provision of this Act or
11 violation of the rules of or final administrative action of
12 the Secretary ~~Director~~, after consideration of the
13 recommendation of the Board.

14 (3) Conviction by plea of guilty or nolo contendere,
15 finding of guilt, jury verdict, or entry of judgment or by
16 sentencing of any crime, including, but not limited to,
17 convictions, preceding sentences of supervision,
18 conditional discharge, or first offender probation, ~~of any~~
19 ~~crime~~ under the laws of any jurisdiction of the United
20 States: (i) that ~~which~~ is a felony; or (ii) that ~~which~~ is a
21 misdemeanor, an essential element of which is dishonesty,
22 or that ~~(iii) of any crime which~~ is directly related to the
23 practice of the profession.

24 (4) A pattern of practice or other behavior which
25 demonstrates incapacity or incompetency to practice under
26 this Act.

1 (5) Knowingly aiding or assisting another person in
2 violating any provision of this Act or rules.

3 (6) Failing, within 90 days, to provide a response to a
4 request for information in response to a written request
5 made by the Department by certified mail.

6 (7) Engaging in dishonorable, unethical or
7 unprofessional conduct of a character likely to deceive,
8 defraud or harm the public, as defined by rule.

9 (8) Unlawful taking, theft, selling, distributing, or
10 manufacturing ~~sale or distribution~~ of any drug, narcotic,
11 or prescription device, ~~or unlawful conversion of any drug,~~
12 ~~narcotic or prescription device.~~

13 (9) Habitual or excessive use or addiction to alcohol,
14 narcotics, stimulants, or any other chemical agent or drug
15 that could result ~~which results~~ in a licensee's inability
16 to practice with reasonable judgment, skill or safety.

17 (10) Discipline by another U.S. jurisdiction or
18 foreign nation, if at least one of the grounds for the
19 discipline is the same or substantially equivalent to those
20 set forth in this Section.

21 (11) A finding that the licensee, after having her or
22 his license placed on probationary status or subject to
23 conditions or restrictions, has violated the terms of
24 probation or failed to comply with such terms or
25 conditions.

26 (12) Being named as a perpetrator in an indicated

1 report by the Department of Children and Family Services
2 and under the Abused and Neglected Child Reporting Act, and
3 upon proof by clear and convincing evidence that the
4 licensee has caused a child to be an abused child or
5 neglected child as defined in the Abused and Neglected
6 Child Reporting Act.

7 (13) Willful omission to file or record, or willfully
8 impeding the filing or recording or inducing another person
9 to omit to file or record medical reports as required by
10 law or willfully failing to report an instance of suspected
11 child abuse or neglect as required by the Abused and
12 Neglected Child Reporting Act.

13 (14) Gross negligence in the practice of practical,
14 professional, or advanced practice nursing.

15 (15) Holding oneself out to be practicing nursing under
16 any name other than one's own.

17 (16) Failure of a licensee to report to the Department
18 any adverse final action taken against him or her by
19 another licensing jurisdiction of the United States or any
20 foreign state or country, any peer review body, any health
21 care institution, any professional or nursing society or
22 association, any governmental agency, any law enforcement
23 agency, or any court or a nursing liability claim related
24 to acts or conduct similar to acts or conduct that would
25 constitute grounds for action as defined in this Section.

26 (17) Failure of a licensee to report to the Department

1 surrender by the licensee of a license or authorization to
2 practice nursing or advanced practice nursing in another
3 state or jurisdiction or current surrender by the licensee
4 of membership on any nursing staff or in any nursing or
5 advanced practice nursing or professional association or
6 society while under disciplinary investigation by any of
7 those authorities or bodies for acts or conduct similar to
8 acts or conduct that would constitute grounds for action as
9 defined by this Section.

10 (18) Failing, within 60 days, to provide information in
11 response to a written request made by the Department.

12 (19) Failure to establish and maintain records of
13 patient care and treatment as required by law.

14 (20) ~~(16)~~ Fraud, deceit or misrepresentation in
15 applying for or procuring a license under this Act or in
16 connection with applying for renewal of a license under
17 this Act.

18 (21) ~~(17)~~ Allowing another person or organization to
19 use the licensees' license to deceive the public.

20 (22) ~~(18)~~ Willfully making or filing false records or
21 reports in the licensee's practice, including but not
22 limited to false records to support claims against the
23 medical assistance program of the Department of Healthcare
24 and Family Services (formerly Department of Public Aid)
25 under the Illinois Public Aid Code.

26 (23) ~~(19)~~ Attempting to subvert or cheat on a ~~nurse~~

1 licensing examination administered under this Act.

2 (24) ~~(20)~~ Immoral conduct in the commission of an act,
3 including, but not limited to, ~~such as~~ sexual abuse, sexual
4 misconduct, or sexual exploitation, related to the
5 licensee's practice.

6 (25) ~~(21)~~ Willfully or negligently violating the
7 confidentiality between nurse and patient except as
8 required by law.

9 (26) ~~(22)~~ Practicing under a false or assumed name,
10 except as provided by law.

11 (27) ~~(23)~~ The use of any false, fraudulent, or
12 deceptive statement in any document connected with the
13 licensee's practice.

14 (28) ~~(24)~~ Directly or indirectly giving to or receiving
15 from a person, firm, corporation, partnership, or
16 association a fee, commission, rebate, or other form of
17 compensation for professional services not actually or
18 personally rendered.

19 ~~(25) Failure of a licensee to report to the Department~~
20 ~~any adverse final action taken against such licensee by~~
21 ~~another licensing jurisdiction (any other jurisdiction of~~
22 ~~the United States or any foreign state or country), by any~~
23 ~~peer review body, by any health care institution, by any~~
24 ~~professional or nursing society or association, by any~~
25 ~~governmental agency, by any law enforcement agency, or by~~
26 ~~any court or a nursing liability claim related to acts or~~

1 ~~conduct similar to acts or conduct that would constitute~~
2 ~~grounds for action as defined in this Section.~~

3 ~~(26) Failure of a licensee to report to the Department~~
4 ~~surrender by the licensee of a license or authorization to~~
5 ~~practice nursing in another state or jurisdiction, or~~
6 ~~current surrender by the licensee of membership on any~~
7 ~~nursing staff or in any nursing or professional association~~
8 ~~or society while under disciplinary investigation by any of~~
9 ~~those authorities or bodies for acts or conduct similar to~~
10 ~~acts or conduct that would constitute grounds for action as~~
11 ~~defined by this Section.~~

12 (29) ~~(27)~~ A violation of the Health Care Worker
13 Self-Referral Act.

14 (30) ~~(28)~~ Physical illness, including but not limited
15 to deterioration through the aging process or loss of motor
16 skill, mental illness, or disability that results in the
17 inability to practice the profession with reasonable
18 judgment, skill, or safety.

19 (31) Exceeding the terms of a collaborative agreement
20 or the prescriptive authority delegated to a licensee by
21 his or her collaborating physician or podiatrist in
22 guidelines established under a written collaborative
23 agreement.

24 (32) Making a false or misleading statement regarding a
25 licensee's skill or the efficacy or value of the medicine,
26 treatment, or remedy prescribed by him or her in the course

1 of treatment.

2 (33) Prescribing, selling, administering,
3 distributing, giving, or self-administering a drug
4 classified as a controlled substance (designated product)
5 or narcotic for other than medically accepted therapeutic
6 purposes.

7 (34) Promotion of the sale of drugs, devices,
8 appliances, or goods provided for a patient in a manner to
9 exploit the patient for financial gain.

10 (35) Violating State or federal laws, rules, or
11 regulations relating to controlled substances.

12 (36) Willfully or negligently violating the
13 confidentiality between an advanced practice nurse,
14 collaborating physician, dentist, or podiatrist and a
15 patient, except as required by law.

16 (37) A violation of any provision of this Act or any
17 rules promulgated under this Act.

18 (c) The determination by a circuit court that a licensee is
19 subject to involuntary admission or judicial admission as
20 provided in the Mental Health and Developmental Disabilities
21 Code, as amended, operates as an automatic suspension. The
22 suspension will end only upon a finding by a court that the
23 patient is no longer subject to involuntary admission or
24 judicial admission and issues an order so finding and
25 discharging the patient; and upon the recommendation of the
26 Board to the Secretary ~~Director~~ that the licensee be allowed to

1 resume his or her practice.

2 (d) The Department may refuse to issue or may suspend or
3 otherwise discipline the license of any person who fails to
4 file a return, or to pay the tax, penalty or interest shown in
5 a filed return, or to pay any final assessment of the tax,
6 penalty, or interest as required by any tax Act administered by
7 the ~~Illinois~~ Department of Revenue, until such time as the
8 requirements of any such tax Act are satisfied.

9 (e) In enforcing this Act Section, the Department or Board,
10 upon a showing of a possible violation, may compel an
11 individual licensed to practice under this Act, or who has
12 applied for licensure under this Act, to submit to a mental or
13 physical examination, or both, as required by and at the
14 expense of the Department. The Department or Board may order
15 the examining physician to present testimony concerning the
16 mental or physical examination of the licensee or applicant. No
17 information shall be excluded by reason of any common law or
18 statutory privilege relating to communications between the
19 licensee or applicant and the examining physician. The
20 examining physicians shall be specifically designated by the
21 Board or Department. The individual to be examined may have, at
22 his or her own expense, another physician of his or her choice
23 present during all aspects of this examination. Failure of an
24 individual to submit to a mental or physical examination, when
25 directed, shall result in an automatic ~~be grounds for~~
26 suspension without hearing ~~of his or her license until the~~

1 ~~individual submits to the examination if the Department finds,~~
2 ~~after notice and hearing, that the refusal to submit to the~~
3 ~~examination was without reasonable cause.~~

4 All substance-related violations shall mandate an
5 automatic substance abuse assessment. Failure to submit to an
6 assessment by a licensed physician who is certified as an
7 addictionist or an advanced practice nurse with specialty
8 certification in addictions may be grounds for an automatic
9 suspension, as defined by rule.

10 If the Department or Board finds an individual unable to
11 practice or unfit for duty because of the reasons set forth in
12 this Section, the Department or Board may require that
13 individual to submit to a substance abuse evaluation ~~care,~~
14 ~~counseling,~~ or treatment by individuals or programs ~~physicians~~
15 approved or designated by the Department or Board, as a
16 condition, term, or restriction for continued, reinstated, or
17 renewed licensure to practice; or, in lieu of evaluation ~~care,~~
18 ~~counseling,~~ or treatment, the Department may file, or the Board
19 may recommend to the Department to file, a complaint to
20 immediately suspend, revoke, or otherwise discipline the
21 license of the individual. An individual whose license was
22 granted, continued, reinstated, renewed, disciplined or
23 supervised subject to such terms, conditions, or restrictions,
24 and who fails to comply with such terms, conditions, or
25 restrictions, shall be referred to the Secretary ~~Director~~ for a
26 determination as to whether the individual shall have his or

1 her license suspended immediately, pending a hearing by the
2 Department.

3 In instances in which the Secretary ~~Director~~ immediately
4 suspends a person's license under this Section, a hearing on
5 that person's license must be convened by the Department within
6 15 days after the suspension and completed without appreciable
7 delay. The Department and Board shall have the authority to
8 review the subject individual's record of treatment and
9 counseling regarding the impairment to the extent permitted by
10 applicable federal statutes and regulations safeguarding the
11 confidentiality of medical records.

12 An individual licensed under this Act and affected under
13 this Section shall be afforded an opportunity to demonstrate to
14 the Department ~~or Board~~ that he or she can resume practice in
15 compliance with nursing ~~acceptable and prevailing~~ standards
16 under the provisions of his or her license.

17 (Source: P.A. 90-742, eff. 8-13-98; revised 12-15-05.)

18 (225 ILCS 65/70-10 new) (was 225 ILCS 65/10-50)

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

20 Sec. 70-10 ~~10-50~~. Intoxication and drug abuse.

21 ~~(a) A professional assistance program for nurses shall be~~
22 ~~established by January 1, 1999.~~

23 ~~(b) The Director shall appoint a task force to advise in~~
24 ~~the creation of the assistance program. The task force shall~~
25 ~~include members of the Department and professional nurses, and~~

1 ~~shall report its findings and recommendations to the Committee~~
2 ~~on Nursing.~~

3 (a) ~~(c)~~ Any ~~registered professional~~ nurse who is an
4 administrator or officer in any hospital, nursing home, other
5 health care agency or facility, or nurse agency and has
6 knowledge of any action or condition which reasonably indicates
7 ~~to her or him~~ that a registered professional nurse or licensed
8 practical nurse is impaired due to the use of alcohol or mood
9 altering drugs to the extent that such impairment ~~employed by~~
10 ~~or practicing nursing in such hospital, nursing home, other~~
11 ~~health care agency or facility, or nurse agency is habitually~~
12 ~~intoxicated or addicted to the use of habit-forming drugs to~~
13 ~~the extent that such intoxication or addiction~~ adversely
14 affects such nurse's professional performance, or unlawfully
15 possesses, uses, distributes or converts mood altering
16 ~~habit-forming~~ drugs belonging to the place of employment
17 ~~hospital, nursing home or other health care agency or facility~~
18 ~~for such nurse's own use~~, shall promptly ~~file a written~~ report
19 the individual thereof to the Department or designee of the
20 Department; provided however, an administrator or officer need
21 not file the report if the nurse participates in a course of
22 remedial professional counseling or medical treatment for
23 substance abuse, as long as such nurse actively pursues such
24 treatment under monitoring by the administrator or officer or
25 by the hospital, nursing home, health care agency or facility,
26 or nurse agency and the nurse continues to be employed by such

1 hospital, nursing home, health care agency or facility, or
2 nurse agency. The Department shall review all reports received
3 by it in a timely manner. Its initial review shall be completed
4 no later than 60 days after receipt of the report. Within this
5 60 day period, the Department shall, in writing, make a
6 determination as to whether there are sufficient facts to
7 warrant further investigation or action. Any nurse
8 participating in mandatory reporting to the Department under
9 this Section or in good faith assisting another person in
10 making such a report shall have immunity from any liability,
11 either criminal or civil, that might result by reason of such
12 action.

13 Should the Department find insufficient facts to warrant
14 further investigation, or action, the report shall be accepted
15 for filing and the matter shall be deemed closed and so
16 reported.

17 Should the Department find sufficient facts to warrant
18 further investigation, such investigation shall be completed
19 within 60 days of the date of the determination of sufficient
20 facts to warrant further investigation or action. Final action
21 shall be determined no later than 30 days after the completion
22 of the investigation. If there is a finding which verifies
23 habitual intoxication or drug addiction which adversely
24 affects professional performance or the unlawful possession,
25 use, distribution or conversion of habit-forming drugs by the
26 reported nurse, the Department may refuse to issue or renew or

1 may suspend or revoke that nurse's license as a registered
2 professional nurse or a licensed practical nurse.

3 Any of the aforementioned actions or a determination that
4 there are insufficient facts to warrant further investigation
5 or action shall be considered a final action. The nurse
6 administrator or officer who filed the original report or
7 complaint, and the nurse who is the subject of the report,
8 shall be notified in writing by the Department within 15 days
9 of any final action taken by the Department.

10 (b) Each year on March 1, ~~commencing with the effective~~
11 ~~date of this Act,~~ the Department shall submit a report to the
12 General Assembly. The report shall include the number of
13 reports made under this Section to the Department during the
14 previous year, the number of reports reviewed and found
15 insufficient to warrant further investigation, the number of
16 reports not completed and the reasons for incompleteness. This
17 report shall be made available also to nurses requesting the
18 report.

19 (c) Any person making a report under this Section or in
20 good faith assisting another person in making such a report
21 shall have immunity from any liability, either criminal or
22 civil, that might result by reason of such action. For the
23 purpose of any legal proceeding, criminal or civil, there shall
24 be a rebuttable presumption that any person making a report
25 under this Section or assisting another person in making such
26 report was acting in good faith. All such reports and any

1 information disclosed to or collected by the Department
2 pursuant to this Section shall remain confidential records of
3 the Department and shall not be disclosed nor be subject to any
4 law or regulation of this State relating to freedom of
5 information or public disclosure of records.

6 (Source: P.A. 90-742, eff. 8-13-98.)

7 (225 ILCS 65/70-15 new)

8 Sec. 70-15. Disciplinary and non-disciplinary options for
9 the impaired nurse. The Department shall establish by rule a
10 program of care, counseling, and treatment for the impaired
11 nurse. This program shall allow an impaired nurse to self-refer
12 to the program. Individual licensee health care records shall
13 be privileged and confidential, unavailable for use in any
14 proceeding, and not subject to disclosure. Nothing in this
15 Section nor the rules adopted under this Section shall impair
16 or prohibit the Department from taking disciplinary action
17 based upon the grounds set forth in Section 70-5 of this Act.

18 (225 ILCS 65/70-20 new) (was 225 ILCS 65/20-13)

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

20 Sec. 70-20 ~~20-13~~. Suspension of license or registration for
21 failure to pay restitution. The Department, without further
22 process or hearing, shall suspend the license or other
23 authorization to practice of any person issued under this Act
24 who has been certified by court order as not having paid

1 restitution to a person under Section 8A-3.5 of the Illinois
2 Public Aid Code or under Section 46-1 of the Criminal Code of
3 1961. A person whose license or other authorization to practice
4 is suspended under this Section is prohibited from practicing
5 until the restitution is made in full.

6 (Source: P.A. 94-577, eff. 1-1-06.)

7 (225 ILCS 65/70-25 new) (was 225 ILCS 65/20-25)

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

9 Sec. 70-25 ~~20-25~~. Returned checks; fines. Any person who
10 delivers a check or other payment to the Department that is
11 returned to the Department unpaid by the financial institution
12 upon which it is drawn shall pay to the Department, in addition
13 to the amount already owed to the Department, a fine of \$50.
14 The fines imposed by this Section are in addition to any other
15 discipline provided under this Act for unlicensed practice or
16 practice on a nonrenewed license. The Department shall notify
17 the person that payment of fees and fines shall be paid to the
18 Department by certified check or money order within 30 calendar
19 days of the notification. If, after the expiration of 30 days
20 from the date of the notification, the person has failed to
21 submit the necessary remittance, the Department shall
22 automatically terminate the license or deny the application,
23 without hearing. If, after termination or denial, the person
24 seeks a license, he or she shall apply to the Department for
25 restoration or issuance of the license and pay all fees and

1 fines due to the Department. The Department may establish a fee
2 for the processing of an application for restoration of a
3 license to pay all expenses of processing this application. The
4 Secretary ~~Director~~ may waive the fines due under this Section
5 in individual cases where the Secretary ~~Director~~ finds that the
6 fines would be unreasonable or unnecessarily burdensome.

7 (Source: P.A. 92-146, eff. 1-1-02.)

8 (225 ILCS 65/70-30 new) (was 225 ILCS 65/20-30)

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

10 Sec. 70-30 ~~20-30~~. Roster. The Department shall maintain a
11 roster of the names and addresses of all licensees and of all
12 persons whose licenses have been suspended or revoked. This
13 roster shall be available upon written request and payment of
14 the required fees.

15 (Source: P.A. 90-742, eff. 8-13-98.)

16 (225 ILCS 65/70-35 new) (was 225 ILCS 65/20-31)

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

18 Sec. 70-35 ~~20-31~~. Licensure requirements; internet site.
19 The Department shall make available to the public the
20 requirements for licensure in English and Spanish on the
21 internet through the Department's World Wide Web site. This
22 information shall include the requirements for licensure of
23 individuals currently residing in another state or territory of
24 the United States or a foreign country, territory, or province.

1 The Department shall establish an e-mail link to the Department
2 for information on the requirements for licensure, with replies
3 available in English and Spanish.

4 (Source: P.A. 93-519, eff. 1-1-04.)

5 (225 ILCS 65/70-40 new) (was 225 ILCS 65/20-32)

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

7 Sec. 70-40 ~~20-32~~. Educational resources; internet link.

8 The Department shall work with the Board ~~of Nursing, the APN~~
9 ~~Board~~, the Board of Higher Education, the Illinois Student
10 Assistance Commission, Statewide organizations, and
11 community-based organizations to develop a list of
12 Department-approved nursing programs and other educational
13 resources related to the Test of English as a Foreign Language
14 and the Commission on Graduates of Foreign Nursing Schools
15 Examination. The Department shall provide a link to a list of
16 these resources, in English and Spanish, on the Department's
17 World Wide Web site.

18 (Source: P.A. 93-519, eff. 1-1-04.)

19 (225 ILCS 65/70-45 new) (was 225 ILCS 65/20-35)

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

21 Sec. 70-45 ~~20-35~~. Fees.

22 (a) The Department shall provide by rule for a schedule of
23 fees to be paid for licenses by all applicants.

24 (b) ~~(a-5)~~ Except as provided in subsection (c) of this

1 Section ~~(b)~~, the fees for the administration and enforcement of
2 this Act, including but not limited to original licensure,
3 renewal, and restoration, shall be set by rule. The fees shall
4 not be refundable.

5 (c) ~~(b)~~ In addition, applicants for any examination as a
6 Registered Professional Nurse or a Licensed Practical Nurse
7 shall be required to pay, either to the Department or to the
8 designated testing service, a fee covering the cost of
9 providing the examination. Failure to appear for the
10 examination on the scheduled date, at the time and place
11 specified, after the applicant's application for examination
12 has been received and acknowledged by the Department or the
13 designated testing service, shall result in the forfeiture of
14 the examination fee.

15 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

16 (225 ILCS 65/70-50 new) (was 225 ILCS 65/20-40)

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

18 Sec. 70-50 ~~20-40~~. Fund.

19 (a) There is hereby created within the State Treasury the
20 Nursing Dedicated and Professional Fund. The monies in the Fund
21 may be used by and at the direction of the Department for the
22 administration and enforcement of this Act, including but not
23 limited to:

24 (1) ~~(a)~~ Distribution and publication of this Act ~~the~~
25 ~~Nursing and Advanced Practice Nursing Act~~ and the rules at

1 ~~the time of renewal to all persons licensed by the~~
2 ~~Department under this Act.~~

3 (2) ~~(b)~~ Employment of secretarial, nursing,
4 administrative, enforcement, and other staff for the
5 administration of this Act.

6 ~~(c) Conducting a survey, as prescribed by rule of the~~
7 ~~Department, once every 4 years during the license renewal~~
8 ~~period.~~

9 ~~(d) Conducting of training seminars for licensees~~
10 ~~under this Act relating to the obligations,~~
11 ~~responsibilities, enforcement and other provisions of the~~
12 ~~Act and its rules.~~

13 (b) ~~(e)~~ Disposition of fees ~~Fees~~:

14 (1) \$5 of every licensure fee shall be placed in a
15 fund for assistance to nurses enrolled in a diversionary
16 program as approved by the Department.

17 ~~(i) (Blank).~~

18 (2) (ii) All of the fees, and fines, and penalties
19 collected pursuant to this Act shall be deposited in the
20 Nursing Dedicated and Professional Fund.

21 (3) Each (iii) ~~For the fiscal year beginning July 1,~~
22 ~~1988,~~ the moneys deposited in the Nursing Dedicated and
23 Professional Fund shall be appropriated to the Department
24 for expenses of the Department and the Board in the
25 administration of this Act. All earnings received from
26 investment of moneys in the Nursing Dedicated and

1 Professional Fund shall be deposited in the Nursing
2 Dedicated and Professional Fund and shall be used for the
3 same purposes as fees deposited in the Fund.

4 (4) ~~(iv)~~ For the fiscal year beginning July 1, 2004 and
5 for each fiscal year thereafter, \$1,200,000 of the moneys
6 deposited in the Nursing Dedicated and Professional Fund
7 each year shall be set aside and appropriated to the
8 ~~Illinois~~ Department of Public Health for nursing
9 scholarships awarded pursuant to the Nursing Education
10 Scholarship Law. Representatives of the Department and the
11 Nursing Education Scholarship Program Advisory Council
12 shall review this requirement and the scholarship awards
13 every 2 years.

14 (5) ~~(v)~~ Moneys in the Fund may be transferred to the
15 Professions Indirect Cost Fund as authorized under Section
16 2105-300 of the Department of Professional Regulation Law
17 (20 ILCS 2105/2105-300).

18 (f) Moneys set aside for nursing scholarships awarded
19 pursuant to the Nursing Education Scholarship Law as provided
20 in item (iv) of subsection (e) of this Section may not be
21 transferred under Section 8h of the State Finance Act.

22 (Source: P.A. 92-46, eff. 7-1-01; 93-806, eff. 7-24-04;
23 93-1054, eff. 11-18-04; revised 12-1-04.)

24 (225 ILCS 65/70-55 new) (was 225 ILCS 65/20-50)

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

1 Sec. 70-55 ~~20-50~~. Statute of limitations ~~Limitation on~~
2 ~~action~~. All proceedings to suspend, revoke, or take any other
3 disciplinary action as the Department may deem proper, with
4 regard to a license on any of the ~~foregoing~~ grounds under
5 Section 70-5 of this Act may not be commenced later than 5 ~~3~~
6 years next after the commission of any act which is a ground
7 for discipline or a final conviction order for any of the acts
8 described ~~herein~~. In the event of the settlement of any claim
9 or cause of action in favor of the claimant or the reduction to
10 the final judgment of any civil action in favor of the
11 plaintiff, such claim, cause of action or civil action being
12 rounded on the allegation that a person licensed under this Act
13 was negligent in providing care, the Department shall have an
14 additional period of 2 years ~~one year~~ from the date of such
15 settlement or final judgment in which to investigate and
16 commence formal disciplinary proceedings under ~~Section 25 of~~
17 this Act, except as otherwise provided by law. The time during
18 which the holder of the license was outside the State of
19 Illinois shall not be included within any period of time
20 limiting the commencement of disciplinary action by the Board.
21 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

22 (225 ILCS 65/70-60 new) (was 225 ILCS 65/20-55)

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

24 Sec. 70-60 ~~20-55~~. Summary suspension; ~~Suspension for~~
25 imminent danger. The Secretary ~~Director~~ of the Department may,

1 upon receipt of a written communication from the Secretary of
2 Human Services, the Director of Healthcare and Family Services
3 (formerly Director of Public Aid), or the Director of Public
4 Health that continuation of practice of a person licensed under
5 this Act constitutes an immediate danger to the public,
6 immediately suspend the license of such person without a
7 hearing. In instances in which the Secretary ~~Director~~
8 immediately suspends a license under this Section, a hearing
9 upon such person's license must be convened by the Department
10 within 30 days after such suspension and completed without
11 appreciable delay, such hearing held to determine whether to
12 recommend to the Secretary ~~Director~~ that the person's license
13 be revoked, suspended, placed on probationary status or
14 reinstated, or such person be subject to other disciplinary
15 action. In such hearing, the written communication and any
16 other evidence submitted therewith may be introduced as
17 evidence against such person; provided, however, the person, or
18 his or her counsel, shall have the opportunity to discredit or
19 impeach and submit evidence rebutting such evidence.

20 (Source: P.A. 89-507, eff. 7-1-97; 90-61, eff. 12-30-97;
21 90-742, eff. 8-13-98; revised 12-15-05.)

22 (225 ILCS 65/70-65 new) (was 225 ILCS 65/20-65)

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

24 Sec. 70-65 ~~20-65~~. Liability of State. In the event that the
25 Department's order of revocation, suspension, placing the

1 licensee on probationary status, or other order of formal
2 disciplinary action is without any reasonable basis, then the
3 State of Illinois shall be liable to the injured party for
4 those special damages suffered as a direct result of such
5 order.

6 (Source: P.A. 90-742, eff. 8-13-98.)

7 (225 ILCS 65/70-70 new) (was 225 ILCS 65/20-70)

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

9 Sec. 70-70 ~~20-70~~. Right to legal counsel. No action of a
10 disciplinary nature that is predicated on charges alleging
11 unethical or unprofessional conduct of a person who is licensed
12 under this Act ~~a registered professional nurse or a licensed~~
13 ~~practical nurse~~ and that can be reasonably expected to affect
14 adversely that person's maintenance of her or his present, or
15 her or his securing of future, employment as such a nurse may
16 be taken by the Department, ~~by any association, or by any~~
17 ~~person~~ unless the person against whom such charges are made is
18 afforded the right to be represented by legal counsel of her or
19 his choosing and to present any witness, whether an attorney or
20 otherwise to testify on matters relevant to such charges.

21 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

22 (225 ILCS 65/70-75 new) (was 225 ILCS 65/20-75)

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

24 Sec. 70-75 ~~20-75~~. Injunctive remedies.

1 (a) If any person violates the provision of this Act, the
2 Secretary ~~Director~~ may, in the name of the People of the State
3 of Illinois, through the Attorney General of the State of
4 Illinois, or the State's Attorney of any county in which the
5 action is brought, petition for an order enjoining such
6 violation or for an order enforcing compliance with this Act.
7 Upon the filing of a verified petition in court, the court may
8 issue a temporary restraining order, without notice or bond,
9 and may preliminarily and permanently enjoin such violation,
10 and if it is established that such person has violated or is
11 violating the injunction, the court may punish the offender for
12 contempt of court. Proceedings under this Section shall be in
13 addition to, and not in lieu of, all other remedies and
14 penalties provided by this Act.

15 (b) If any person shall practice as a nurse or hold herself
16 or himself out as a nurse without being licensed under the
17 provisions of this Act, then any licensed nurse, any interested
18 party, or any person injured thereby may, in addition to the
19 Secretary ~~Director~~, petition for relief as provided in
20 subsection (a) of this Section.

21 (b-5) Whoever knowingly practices or offers to practice
22 nursing in this State without a license for that purpose shall
23 be guilty of a Class A misdemeanor and for each subsequent
24 conviction, shall be guilty of a Class 4 felony. All criminal
25 fines, monies, or other property collected or received by the
26 Department under this Section or any other State or federal

1 statute, including, but not limited to, property forfeited to
2 the Department under Section 505 of the Illinois Controlled
3 Substances Act or Section 85 of the Methamphetamine Control and
4 Community Protection Act, shall be deposited into the
5 Professional Regulation Evidence Fund.

6 (c) Whenever in the opinion of the Department any person
7 violates any provision of this Act, the Department may issue a
8 rule to show cause why an order to cease and desist should not
9 be entered against him. The rule shall clearly set forth the
10 grounds relied upon by the Department and shall provide a
11 period of 7 days from the date of the rule to file an answer to
12 the satisfaction of the Department. Failure to answer to the
13 satisfaction of the Department shall cause an order to cease
14 and desist to be issued forthwith.

15 (Source: P.A. 94-556, eff. 9-11-05.)

16 (225 ILCS 65/70-80 new) (was 225 ILCS 65/20-80)

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

18 Sec. 70-80 ~~20-80~~. Investigation; notice; hearing. Prior to
19 bringing an action before the Board, the Department may
20 investigate the actions of any applicant or of any person or
21 persons holding or claiming to hold a license. The Department
22 shall, before suspending, revoking, placing on probationary
23 status, or taking any other disciplinary action as the
24 Department may deem proper with regard to any license, at least
25 30 days prior to the date set for the hearing, notify the

1 accused in writing of any charges made and the time and place
2 for a hearing of the charges before the Board, direct her or
3 him to file a written answer thereto to the Board under oath
4 within 20 days after the service of such notice and inform the
5 licensee that if she or he fails to file such answer default
6 will be taken against the licensee and such license may be
7 suspended, revoked, placed on probationary status, or have
8 other disciplinary action, including limiting the scope,
9 nature or extent of her or his practice, as the Department may
10 deem proper taken with regard thereto. Such written notice may
11 be served by personal delivery or certified or registered mail
12 to the respondent at the address of her or his last
13 notification to the Department. At the time and place fixed in
14 the notice, the Department shall proceed to hear the charges
15 and the parties or their counsel shall be accorded ample
16 opportunity to present such statements, testimony, evidence
17 and argument as may be pertinent to the charges or to the
18 defense to the charges. The Department may continue a hearing
19 from time to time. In case the accused person, after receiving
20 notice, fails to file an answer, her or his license may in the
21 discretion of the Secretary ~~Director~~, having received first the
22 recommendation of the Board, be suspended, revoked, placed on
23 probationary status, or the Secretary ~~Director~~ may take
24 whatever disciplinary action as he or she may deem proper,
25 including limiting the scope, nature, or extent of said
26 person's practice, without a hearing, if the act or acts

1 charged constitute sufficient grounds for such action under
2 this Act.

3 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

4 (225 ILCS 65/70-85 new) (was 225 ILCS 65/20-85)

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

6 Sec. 70-85 ~~20-85~~. Stenographer; transcript. The
7 Department, at its expense, shall provide a stenographer to
8 take down the testimony and preserve a record of all
9 proceedings at the hearing of any case wherein any disciplinary
10 action is taken regarding a license. The notice of hearing,
11 complaint and all other documents in the nature of pleadings
12 and written motions filed in the proceedings, the transcript of
13 testimony, the report of the Board and the orders of the
14 Department shall be the record of the proceedings. The
15 Department shall furnish a transcript of the record to any
16 person interested in the hearing upon payment of the fee
17 required under Section 2105-115 of the Department of
18 Professional Regulation Law (20 ILCS 2105/2105-115).

19 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
20 91-239, eff. 1-1-00.)

21 (225 ILCS 65/70-90 new) (was 225 ILCS 65/20-90)

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

23 Sec. 70-90 ~~20-90~~. Compelled testimony and production of
24 documents. Any circuit court may, upon application of the

1 Department or designee or of the applicant or licensee against
2 whom proceedings upon Section 70-80 ~~20-80~~ of this Act are
3 pending, enter an order requiring the attendance of witnesses
4 and their testimony, and the production of documents, papers,
5 files, books and records in connection with any hearing or
6 investigation. The court may compel obedience to its order by
7 proceedings for contempt.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 (225 ILCS 65/70-95 new) (was 225 ILCS 65/20-95)

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

11 Sec. 70-95 ~~20-95~~. Subpoena power; oaths. The Department
12 shall have power to subpoena and bring before it any person in
13 this State and to take testimony, either orally or by
14 deposition or both, with the same fees and mileage and in the
15 same manner as prescribed by law in judicial proceedings in
16 civil cases in circuit courts of this State.

17 The Secretary ~~Director~~ and any member of the Board
18 designated by the Secretary ~~Director~~ shall each have power to
19 administer oaths to witnesses at any hearing which the
20 Department is authorized to conduct under this Act, and any
21 other oaths required or authorized to be administered by the
22 Department under this Act.

23 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

24 (225 ILCS 65/70-100 new) (was 225 ILCS 65/20-100)

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

2 Sec. 70-100 ~~20-100~~. Board report. At the conclusion of the
3 hearing the Board shall present to the Secretary ~~Director~~ a
4 written report of its findings of fact, conclusions of law, and
5 recommendations. The report shall contain a finding whether or
6 not the accused person violated this Act or failed to comply
7 with the conditions required in this Act. The report shall
8 specify the nature of the violation or failure to comply, and
9 the Board shall make its recommendations to the Secretary
10 ~~Director~~.

11 The report of findings of fact, conclusions of law, and
12 recommendation of the Board shall be the basis for the
13 Department's order of refusal or for the granting of a license
14 or permit unless the Secretary ~~Director~~ shall determine that
15 the report is contrary to the manifest weight of the evidence,
16 in which case the Secretary ~~Director~~ may issue an order in
17 contravention of the report. The findings are not admissible in
18 evidence against the person in a criminal prosecution brought
19 for the violation of this Act, but the hearing and findings are
20 not a bar to a criminal prosecution brought for the violation
21 of this Act.

22 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

23 (225 ILCS 65/70-105 new) (was 225 ILCS 65/20-105)

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

25 Sec. 70-105 ~~20-105~~. Hearing officer. The Secretary

1 ~~Director~~ shall have the authority to appoint an attorney duly
2 licensed to practice law in the State of Illinois to serve as
3 the hearing officer in any formal action before the Board of
4 Nursing to revoke, suspend, place on probation, reprimand,
5 fine, or take any other disciplinary action against ~~with regard~~
6 ~~to~~ a license. The hearing officer shall have full authority to
7 conduct the formal hearing. The Board shall have the right to
8 have at least one member present at any hearing conducted by
9 such hearing officer. The Board members shall have equal or
10 greater licensing qualifications than those of the licensee
11 being prosecuted. ~~There may be present at least one RN member~~
12 ~~of the Board at any such hearing or disciplinary conference. An~~
13 ~~LPN member or LPN educator may be present for hearings and~~
14 ~~disciplinary conferences of an LPN.~~ The hearing officer shall
15 report her or his findings and recommendations to the Board
16 within 30 days of the receipt of the record. The Board shall
17 have up to 90 days from receipt of the report to review the
18 report of the hearing officer and present their findings of
19 fact, conclusions of law and recommendations to the Secretary
20 ~~Director~~. If the Board fails to present its report within the
21 90-day period, the Secretary ~~Director~~ may issue an order based
22 on the report of the hearing officer. However, if the Board
23 does present its report within the specified 90 days, the
24 Secretary's ~~Director's~~ order shall be based upon the report of
25 the Board.

26 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

1 (225 ILCS 65/70-110 new) (was 225 ILCS 65/20-110)

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

3 Sec. 70-110 ~~20-110~~. Motion for rehearing. In any case
4 involving refusal to issue, renew, or the discipline of a
5 license, a copy of the Board's report shall be served upon the
6 respondent by the Department, either personally or as provided
7 in this Act, for the service of the notice of hearing. Within
8 20 days after such service, the respondent may present to the
9 Department a motion in writing for a rehearing, which motion
10 shall specify the particular grounds for a rehearing. If no
11 motion for rehearing is filed, then upon the expiration of the
12 time then upon such denial the Secretary ~~Director~~ may enter an
13 order in accordance with recommendations of the Board except as
14 provided in Sections 70-100 ~~20-100~~ and 70-105 ~~20-105~~ of this
15 Act. If the respondent shall order from the reporting service,
16 and pay for a transcript of the record within the time for
17 filing a motion for rehearing, the 20 day period within which
18 such a motion may be filed shall commence upon the delivery of
19 the transcript to the respondent.

20 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

21 (225 ILCS 65/70-115 new) (was 225 ILCS 65/20-115)

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

23 Sec. 70-115 ~~20-115~~. Order for rehearing. Whenever the
24 Secretary ~~Director~~ is satisfied that substantial justice has

1 not been done in the revocation, suspension, or refusal to
2 issue or renew a license, the Secretary ~~Director~~ may order a
3 hearing by the same or another hearing officer or the Board.

4 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

5 (225 ILCS 65/70-120 new) (was 225 ILCS 65/20-120)

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

7 Sec. 70-120 ~~20-120~~. Order of Secretary ~~Director~~. An order
8 regarding any disciplinary action or a certified copy thereof,
9 over the seal of the Department and purporting to be signed by
10 the Secretary ~~Director~~, shall be prima facie evidence that:

11 (a) the signature is the genuine signature of the
12 Secretary ~~Director~~;

13 (b) the Secretary ~~Director~~ is duly appointed and
14 qualified; and

15 (c) the Board and the Board members are qualified to
16 act.

17 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
18 91-357, eff. 7-29-99.)

19 (225 ILCS 65/70-125 new) (was 225 ILCS 65/20-125)

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

21 Sec. 70-125 ~~20-125~~. Restoration after suspension or
22 revocation. At any time after the suspension or revocation of
23 any license, the Department may restore it to the accused
24 person unless, after an investigation and a hearing, the

1 Department determines that restoration is not in the public
2 interest.

3 (Source: P.A. 90-742, eff. 8-13-98.)

4 (225 ILCS 65/70-130 new) (was 225 ILCS 65/20-130)

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

6 Sec. 70-130 ~~20-130~~. Surrender of license. Upon revocation
7 or suspension of any license, the licensee shall forthwith
8 surrender the license to the Department and if the licensee
9 fails to do so, the Department shall have the right to seize
10 the license.

11 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

12 (225 ILCS 65/70-135 new) (was 225 ILCS 65/20-135)

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

14 Sec. 70-135 ~~20-135~~. Temporary suspension. The Secretary
15 ~~Director~~ may temporarily suspend the license of a licensee
16 ~~nurse~~ without a hearing, simultaneously with the institution of
17 proceedings for a hearing provided for in Section 70-80 ~~20-80~~
18 of this Act, if the Secretary ~~Director~~ finds that evidence in
19 his or her possession indicates that continuation in practice
20 would constitute an imminent danger to the public. In the event
21 that the Secretary ~~Director~~ suspends, temporarily, this
22 license without a hearing, a hearing by the Department must be
23 held within 30 days after the suspension has occurred, and be
24 concluded without appreciable delay.

1 Proceedings for judicial review shall be commenced in the
2 circuit court of the county in which the party applying for
3 review resides; but if the party is not a resident of this
4 State, the venue shall be in Sangamon County.

5 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

6 (225 ILCS 65/70-140 new) (was 225 ILCS 65/20-140)

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

8 Sec. 70-140 ~~20-140~~. Administrative Review Law. All final
9 administrative decisions of the Department hereunder shall be
10 subject to judicial review pursuant to the revisions of the
11 Administrative Review Law, and all amendments and
12 modifications thereof, and the rule adopted pursuant thereto.
13 The term "administrative decision" is defined as in Section
14 3-101 of the Code of Civil Procedure.

15 (Source: P.A. 90-742, eff. 8-13-98.)

16 (225 ILCS 65/70-145 new) (was 225 ILCS 65/20-145)

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

18 Sec. 70-145 ~~20-145~~. Certification of record. The
19 Department shall not be required to certify any record to the
20 Court or file any answer in court or otherwise appear in any
21 court in a judicial review proceeding, unless there is filed in
22 the court, with the complaint, a receipt from the Department
23 acknowledging payment of the costs of furnishing and certifying
24 the record. Failure on the part of the plaintiff to file such

1 receipt in Court shall be grounds for dismissal of the action.

2 (Source: P.A. 90-742, eff. 8-13-98.)

3 (225 ILCS 65/70-150 new) (was 225 ILCS 65/20-150)

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

5 Sec. 70-150 ~~20-150~~. Criminal penalties. Any person who is
6 found to have violated any provision of this Act is guilty of a
7 Class A misdemeanor. On conviction of a second or subsequent
8 offense, the violator shall be guilty of a Class 4 felony.

9 (Source: P.A. 90-742, eff. 8-13-98.)

10 (225 ILCS 65/70-155 new) (was 225 ILCS 65/20-155)

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

12 Sec. 70-155 ~~20-155~~. Pending actions. All disciplinary
13 actions taken or pending pursuant to the Illinois Nursing Act,
14 approved June 14, 1951, as amended, shall, for the actions
15 taken, remain in effect, and for the actions pending, shall be
16 continued, on the effective date of this Act without having
17 separate actions filed by the Department.

18 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

19 (225 ILCS 65/70-160 new) (was 225 ILCS 65/20-160)

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

21 Sec. 70-160 ~~20-160~~. Illinois Administrative Procedure Act.
22 The Illinois Administrative Procedure Act is hereby expressly
23 adopted and incorporated herein as if all of the provisions of

1 that Act were included in this Act, except that the provision
2 of subsection (d) of Section 10-65 of the Illinois
3 Administrative Procedure Act that provides that at hearings the
4 licensee has the right to show compliance with all lawful
5 requirements for retention, continuation or renewal of the
6 license is specifically excluded. For the purposes of this Act,
7 the notice required under Section 10-25 of the Illinois
8 Administrative Procedure Act is deemed sufficient when mailed
9 to the last known address of a party.

10 (Source: P.A. 90-742, eff. 8-13-98.)

11 (225 ILCS 65/70-165 new) (was 225 ILCS 65/20-165)

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

13 Sec. 70-165 ~~20-165~~. Home rule preemption. It is declared to
14 be the public policy of this State, pursuant to paragraph (h)
15 of Section 6 of Article VII of the Illinois Constitution of
16 1970, that any power or function set forth in this Act to be
17 exercised by the State is an exclusive State power or function.
18 Such power or function shall not be exercised concurrently,
19 either directly or indirectly, by any unit of local government,
20 including home rule units, except as otherwise provided in this
21 Act.

22 (Source: P.A. 92-651, eff. 7-11-02.)

23 (225 ILCS 65/Art. 75 heading new) (was 225 ILCS 65/Tit. 17

24 heading)

1 ARTICLE 75 ~~TITLE 17~~. ILLINOIS CENTER FOR NURSING

2 (Source: P.A. 94-1020, eff. 7-11-06.)

3 (225 ILCS 65/75-5 new) (was 225 ILCS 65/17-5)

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

5 Sec. 75-5 ~~17-5~~. Definitions. In this Article ~~Title~~:

6 "Advisory Board" means the Center for Nursing Advisory
7 Board.

8 "Center" means the Illinois Center for Nursing.

9 (Source: P.A. 94-1020, eff. 7-11-06.)

10 (225 ILCS 65/75-10 new) (was 225 ILCS 65/17-10)

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

12 Sec. 75-10 ~~17-10~~. Illinois Center for Nursing. There is
13 created the Illinois Center for Nursing to address issues of
14 supply and demand in the nursing profession, including issues
15 of recruitment, retention, and utilization of nurse manpower
16 resources. The General Assembly finds that the Center will
17 enhance the delivery of quality health care services by
18 providing an ongoing strategy for the allocation of the State's
19 resources directed towards nursing. Each of the following
20 objectives shall serve as the primary goals for the Center:

21 (1) To develop a strategic plan for nursing manpower in
22 Illinois by selecting priorities that must be addressed.

23 (2) To convene various groups of representatives of
24 nurses, other health care providers, businesses and

1 industries, consumers, legislators, and educators to:

2 (A) review and comment on data analysis prepared
3 for the Center;

4 (B) recommend systemic changes, including
5 strategies for implementation of recommended changes;
6 and

7 (C) evaluate and report the results of the Advisory
8 Board's efforts to the General Assembly and others.

9 (3) To enhance and promote recognition, reward, and
10 renewal activities for nurses in Illinois by:

11 (A) proposing and creating reward, recognition,
12 and renewal activities for nursing; and

13 (B) promoting media and positive image-building
14 efforts for nursing.

15 (Source: P.A. 94-1020, eff. 7-11-06.)

16 (225 ILCS 65/75-15 new) (was 225 ILCS 65/17-15)

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

18 Sec. 75-15 ~~17-15~~. Center for Nursing Advisory Board.

19 (a) There is created the Center for Nursing Advisory Board,
20 which shall consist of 11 members appointed by the Governor,
21 with 6 members of the Advisory Board being nurses
22 representative of various nursing specialty areas. The other 5
23 members may include representatives of associations, health
24 care providers, nursing educators, and consumers. The Advisory
25 Board shall be chaired by the Nursing Act Coordinator, who

1 shall be a voting member of the Advisory Board.

2 (b) The membership of the Advisory Board shall reasonably
3 reflect representation from the geographic areas in this State.

4 (c) Members of the Advisory Board appointed by the Governor
5 shall serve for terms of 4 years, with no member serving more
6 than 10 successive years, except that, initially, 4 members
7 shall be appointed to the Advisory Board for terms that expire
8 on June 30, 2009, 4 members shall be appointed to the Advisory
9 Board for terms that expire on June 30, 2008, and 3 members
10 shall be appointed to the Advisory Board for terms that expire
11 on June 30, 2007. A member shall serve until his or her
12 successor is appointed and has qualified. Vacancies shall be
13 filled in the same manner as original appointments, and any
14 member so appointed shall serve during the remainder of the
15 term for which the vacancy occurred.

16 (d) A quorum of the Advisory Board shall consist of a
17 majority of Advisory Board members currently serving. A
18 majority vote of the quorum is required for Advisory Board
19 decisions. A vacancy in the membership of the Advisory Board
20 shall not impair the right of a quorum to exercise all of the
21 rights and perform all of the duties of the Advisory Board.

22 (e) The Governor may remove any appointed member of the
23 Advisory Board for misconduct, incapacity, or neglect of duty
24 and shall be the sole judge of the sufficiency of the cause for
25 removal.

26 (f) Members of the Advisory Board are immune from suit in

1 any action based upon any activities performed in good faith as
2 members of the Advisory Board.

3 (e) Members of the Advisory Board shall not receive
4 compensation, but shall be reimbursed for actual traveling,
5 incidentals, and expenses necessarily incurred in carrying out
6 their duties as members of the Advisory Board, as approved by
7 the Department.

8 (Source: P.A. 94-1020, eff. 7-11-06.)

9 (225 ILCS 65/75-20 new) (was 225 ILCS 65/17-20)

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

11 Sec. 75-20 ~~17-20~~. Powers and duties of the Advisory Board.

12 (a) The Advisory Board shall be advisory to the Department
13 and shall possess and perform each of the following powers and
14 duties:

15 (1) determine operational policy;

16 (2) administer grants, scholarships, internships, and
17 other programs, as defined by rule, including the
18 administration of programs, as determined by law, that
19 further those goals set forth in Section 75-10 ~~17-10~~ of
20 this Article ~~Title~~, in consultation with other State
21 agencies, as provided by law;

22 (3) establish committees of the Advisory Board as
23 needed;

24 (4) recommend the adoption and, from time to time, the
25 revision of those rules that may be adopted and necessary

1 to carry out the provisions of this Act;

2 (5) implement the major functions of the Center, as
3 established in the goals set forth in Section 75-10 ~~17-10~~
4 of this Article ~~Title~~; and

5 (6) seek and accept non-State funds for carrying out
6 the policy of the Center.

7 (b) The Center shall work in consultation with other State
8 agencies as necessary.

9 (Source: P.A. 94-1020, eff. 7-11-06.)

10 Section 130. The Nursing Home Administrators Licensing and
11 Disciplinary Act is amended by changing Section 4 as follows:

12 (225 ILCS 70/4) (from Ch. 111, par. 3654)

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

14 Sec. 4. Definitions. For purposes of this Act, the
15 following definitions shall have the following meanings,
16 except where the context requires otherwise:

17 (1) "Act" means the Nursing Home Administrators
18 Licensing and Disciplinary Act.

19 (2) "Department" means the Department of Professional
20 Regulation.

21 (3) "Director" means the Director of Professional
22 Regulation.

23 (4) "Board" means the Nursing Home Administrators
24 Licensing and Disciplinary Board appointed by the

1 Governor.

2 (5) "Nursing home administrator" means the individual
3 licensed under this Act and directly responsible for
4 planning, organizing, directing and supervising the
5 operation of a nursing home, or who in fact performs such
6 functions, whether or not such functions are delegated to
7 one or more other persons.

8 (6) "Nursing home" or "facility" means any entity that
9 is required to be licensed by the Department of Public
10 Health under the Nursing Home Care Act, as amended, other
11 than a sheltered care home as defined thereunder, and
12 includes private homes, institutions, buildings,
13 residences, or other places, whether operated for profit or
14 not, irrespective of the names attributed to them, county
15 homes for the infirm and chronically ill operated pursuant
16 to the County Nursing Home Act, as amended, and any similar
17 institutions operated by a political subdivision of the
18 State of Illinois that provide, though their ownership or
19 management, maintenance, personal care, and nursing for 3
20 or more persons, not related to the owner by blood or
21 marriage, or any similar facilities in which maintenance is
22 provided to 3 or more persons who by reason of illness of
23 physical infirmity require personal care and nursing.

24 (7) "Maintenance" means food, shelter and laundry.

25 (8) "Personal care" means assistance with meals,
26 dressing, movement, bathing, or other personal needs, or

1 general supervision of the physical and mental well-being
2 of an individual who because of age, physical, or mental
3 disability, emotion or behavior disorder, or mental
4 retardation is incapable of managing his or her person,
5 whether or not a guardian has been appointed for such
6 individual. For the purposes of this Act, this definition
7 does not include the professional services of a nurse.

8 (9) "Nursing" means professional nursing or practical
9 nursing, as those terms are defined in the Nurse Practice
10 Act ~~Nursing and Advanced Practice Nursing Act~~, for sick or
11 infirm persons who are under the care and supervision of
12 licensed physicians or dentists.

13 (10) "Disciplinary action" means revocation,
14 suspension, probation, supervision, reprimand, required
15 education, fines or any other action taken by the
16 Department against a person holding a license.

17 (11) "Impaired" means the inability to practice with
18 reasonable skill and safety due to physical or mental
19 disabilities as evidenced by a written determination or
20 written consent based on clinical evidence including
21 deterioration through the aging process or loss of motor
22 skill, or abuse of drugs or alcohol, of sufficient degree
23 to diminish a person's ability to administer a nursing
24 home.

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

1 Section 135. The Pharmacy Practice Act of 1987 is amended
2 by changing Section 4 as follows:

3 (225 ILCS 85/4) (from Ch. 111, par. 4124)

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

5 Sec. 4. Exemptions. Nothing contained in any Section of
6 this Act shall apply to, or in any manner interfere with:

7 (a) the lawful practice of any physician licensed to
8 practice medicine in all of its branches, dentist, podiatrist,
9 veterinarian, or therapeutically or diagnostically certified
10 optometrist within the limits of his or her license, or prevent
11 him or her from supplying to his or her bona fide patients such
12 drugs, medicines, or poisons as may seem to him appropriate;

13 (b) the sale of compressed gases;

14 (c) the sale of patent or proprietary medicines and
15 household remedies when sold in original and unbroken packages
16 only, if such patent or proprietary medicines and household
17 remedies be properly and adequately labeled as to content and
18 usage and generally considered and accepted as harmless and
19 nonpoisonous when used according to the directions on the
20 label, and also do not contain opium or coca leaves, or any
21 compound, salt or derivative thereof, or any drug which,
22 according to the latest editions of the following authoritative
23 pharmaceutical treatises and standards, namely, The United
24 States Pharmacopoeia/National Formulary (USP/NF), the United
25 States Dispensatory, and the Accepted Dental Remedies of the

1 Council of Dental Therapeutics of the American Dental
2 Association or any or either of them, in use on the effective
3 date of this Act, or according to the existing provisions of
4 the Federal Food, Drug, and Cosmetic Act and Regulations of the
5 Department of Health and Human Services, Food and Drug
6 Administration, promulgated thereunder now in effect, is
7 designated, described or considered as a narcotic, hypnotic,
8 habit forming, dangerous, or poisonous drug;

9 (d) the sale of poultry and livestock remedies in original
10 and unbroken packages only, labeled for poultry and livestock
11 medication;

12 (e) the sale of poisonous substances or mixture of
13 poisonous substances, in unbroken packages, for nonmedicinal
14 use in the arts or industries or for insecticide purposes;
15 provided, they are properly and adequately labeled as to
16 content and such nonmedicinal usage, in conformity with the
17 provisions of all applicable federal, state and local laws and
18 regulations promulgated thereunder now in effect relating
19 thereto and governing the same, and those which are required
20 under such applicable laws and regulations to be labeled with
21 the word "Poison", are also labeled with the word "Poison"
22 printed thereon in prominent type and the name of a readily
23 obtainable antidote with directions for its administration;

24 (f) the delegation of limited prescriptive authority by a
25 physician licensed to practice medicine in all its branches to
26 a physician assistant under Section 7.5 of the Physician

1 Assistant Practice Act of 1987. This delegated authority under
2 Section 7.5 of the Physician Assistant Practice Act of 1987 may
3 but is not required to include prescription of ~~Schedule III,~~
4 ~~IV, or V~~ controlled substances, as defined in Article II of the
5 Illinois Controlled Substances Act, in accordance with written
6 guidelines ~~under Section 7.5 of the Physician Assistant~~
7 ~~Practice Act of 1987~~; and

8 (g) The delegation of ~~limited~~ prescriptive authority by a
9 physician licensed to practice medicine in all its branches to
10 an advanced practice nurse in accordance with a written
11 collaborative agreement under Section 65-35 of the Nurse
12 Practice Act ~~Sections 15-15 and 15-20 of the Nursing and~~
13 ~~Advanced Practice Nursing Act~~. This ~~delegated~~ authority, which
14 is delegated under Section 65-40 of the Nurse Practice Act, may
15 but is not required to include the prescription of Schedule
16 III, IV, or V controlled substances as defined in Article II of
17 the Illinois Controlled Substances Act.

18 (Source: P.A. 90-116, eff. 7-14-97; 90-253, eff. 7-29-97;
19 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

20 Section 140. The Illinois Physical Therapy Act is amended
21 by changing Section 1 as follows:

22 (225 ILCS 90/1) (from Ch. 111, par. 4251)

23 (Section scheduled to be repealed on January 1, 2016)

24 Sec. 1. Definitions. As used in this Act:

1 (1) "Physical therapy" means all of the following:

2 (A) Examining, evaluating, and testing individuals who
3 may have mechanical, physiological, or developmental
4 impairments, functional limitations, disabilities, or
5 other health and movement-related conditions, classifying
6 these disorders, determining a rehabilitation prognosis
7 and plan of therapeutic intervention, and assessing the
8 on-going effects of the interventions.

9 (B) Alleviating impairments, functional limitations,
10 or disabilities by designing, implementing, and modifying
11 therapeutic interventions that may include, but are not
12 limited to, the evaluation or treatment of a person through
13 the use of the effective properties of physical measures
14 and heat, cold, light, water, radiant energy, electricity,
15 sound, and air and use of therapeutic massage, therapeutic
16 exercise, mobilization, and rehabilitative procedures,
17 with or without assistive devices, for the purposes of
18 preventing, correcting, or alleviating a physical or
19 mental impairment, functional limitation, or disability.

20 (C) Reducing the risk of injury, impairment,
21 functional limitation, or disability, including the
22 promotion and maintenance of fitness, health, and
23 wellness.

24 (D) Engaging in administration, consultation,
25 education, and research.

26 Physical therapy includes, but is not limited to: (a)

1 performance of specialized tests and measurements, (b)
2 administration of specialized treatment procedures, (c)
3 interpretation of referrals from physicians, dentists,
4 advanced practice nurses, physician assistants, and
5 podiatrists, (d) establishment, and modification of physical
6 therapy treatment programs, (e) administration of topical
7 medication used in generally accepted physical therapy
8 procedures when such medication is prescribed by the patient's
9 physician, licensed to practice medicine in all its branches,
10 the patient's physician licensed to practice podiatric
11 medicine, the patient's advanced practice nurse, the patient's
12 physician assistant, or the patient's dentist, and (f)
13 supervision or teaching of physical therapy. Physical therapy
14 does not include radiology, electrosurgery, chiropractic
15 technique or determination of a differential diagnosis;
16 provided, however, the limitation on determining a
17 differential diagnosis shall not in any manner limit a physical
18 therapist licensed under this Act from performing an evaluation
19 pursuant to such license. Nothing in this Section shall limit a
20 physical therapist from employing appropriate physical therapy
21 techniques that he or she is educated and licensed to perform.
22 A physical therapist shall refer to a licensed physician,
23 advanced practice nurse, physician assistant, dentist, or
24 podiatrist any patient whose medical condition should, at the
25 time of evaluation or treatment, be determined to be beyond the
26 scope of practice of the physical therapist.

1 (2) "Physical therapist" means a person who practices
2 physical therapy and who has met all requirements as provided
3 in this Act.

4 (3) "Department" means the Department of Professional
5 Regulation.

6 (4) "Director" means the Director of Professional
7 Regulation.

8 (5) "Board" means the Physical Therapy Licensing and
9 Disciplinary Board approved by the Director.

10 (6) "Referral" means a written or oral authorization for
11 physical therapy services for a patient by a physician,
12 dentist, advanced practice nurse, physician assistant, or
13 podiatrist who maintains medical supervision of the patient and
14 makes a diagnosis or verifies that the patient's condition is
15 such that it may be treated by a physical therapist.

16 (7) "Documented current and relevant diagnosis" for the
17 purpose of this Act means a diagnosis, substantiated by
18 signature or oral verification of a physician, dentist,
19 advanced practice nurse, physician assistant, or podiatrist,
20 that a patient's condition is such that it may be treated by
21 physical therapy as defined in this Act, which diagnosis shall
22 remain in effect until changed by the physician, dentist,
23 advanced practice nurse, physician assistant, or podiatrist.

24 (8) "State" includes:

25 (a) the states of the United States of America;

26 (b) the District of Columbia; and

1 (c) the Commonwealth of Puerto Rico.

2 (9) "Physical therapist assistant" means a person licensed
3 to assist a physical therapist and who has met all requirements
4 as provided in this Act and who works under the supervision of
5 a licensed physical therapist to assist in implementing the
6 physical therapy treatment program as established by the
7 licensed physical therapist. The patient care activities
8 provided by the physical therapist assistant shall not include
9 the interpretation of referrals, evaluation procedures, or the
10 planning or major modification of patient programs.

11 (10) "Physical therapy aide" means a person who has
12 received on the job training, specific to the facility in which
13 he is employed, but who has not completed an approved physical
14 therapist assistant program.

15 (11) "Advanced practice nurse" means a person licensed
16 under the Nurse Practice Act ~~Nursing and Advanced Practice~~
17 ~~Nursing Act~~ who has a collaborative agreement with a
18 collaborating physician that authorizes referrals to physical
19 therapists.

20 (12) "Physician assistant" means a person licensed under
21 the Physician Assistant Practice Act of 1987 who has been
22 delegated authority to make referrals to physical therapists.

23 (Source: P.A. 93-1010, eff. 8-24-04; 94-651, eff. 1-1-06.)

24 Section 143. The Podiatric Medical Practice Act of 1987 is
25 amended by adding Section 20.5 as follows:

1 (225 ILCS 100/20.5 new)

2 Sec. 20.5. Delegation of authority to advanced practice
3 nurses.

4 (a) A podiatrist in active clinical practice may
5 collaborate with an advanced practice nurse in accordance with
6 the requirements of the Nurse Practice Act. Collaboration shall
7 be for the purpose of providing podiatric consultation and no
8 employment relationship shall be required. A written
9 collaborative agreement shall conform to the requirements of
10 Section 65-35 of the Nurse Practice Act. The written
11 collaborative agreement shall be for services the
12 collaborating podiatrist generally provides to his or her
13 patients in the normal course of clinical podiatric practice,
14 except as set forth in item (3) of this subsection (a). A
15 written collaborative agreement and podiatric collaboration
16 and consultation shall be adequate with respect to advanced
17 practice nurses if all of the following apply:

18 (1) The agreement is written to promote the exercise of
19 professional judgment by the advanced practice nurse
20 commensurate with his or her education and experience. The
21 agreement need not describe the exact steps that an
22 advanced practice nurse must take with respect to each
23 specific condition, disease, or symptom, but must specify
24 which procedures require a podiatrist's presence as the
25 procedures are being performed.

1 (2) Practice guidelines and orders are developed and
2 approved jointly by the advanced practice nurse and
3 collaborating podiatrist, as needed, based on the practice
4 of the practitioners. Such guidelines and orders and the
5 patient services provided thereunder are periodically
6 reviewed by the collaborating podiatrist.

7 (3) The advance practice nurse provides services that
8 the collaborating podiatrist generally provides to his or
9 her patients in the normal course of clinical practice.
10 With respect to the provision of anesthesia services by a
11 certified registered nurse anesthetist, the collaborating
12 podiatrist must have training and experience in the
13 delivery of anesthesia consistent with Department rules.

14 (4) The collaborating podiatrist and the advanced
15 practice nurse meet in person at least once a month to
16 provide collaboration and consultation.

17 (5) Methods of communication are available with the
18 collaborating podiatrist in person or through
19 telecommunications for consultation, collaboration, and
20 referral as needed to address patient care needs.

21 (6) With respect to the provision of anesthesia
22 services by a certified registered nurse anesthetist, an
23 anesthesiologist, physician, or podiatrist shall
24 participate through discussion of and agreement with the
25 anesthesia plan and shall remain physically present and be
26 available on the premises during the delivery of anesthesia

1 services for diagnosis, consultation, and treatment of
2 emergency medical conditions. The anesthesiologist or
3 operating podiatrist must agree with the anesthesia plan
4 prior to the delivery of services.

5 (7) The agreement contains provisions detailing notice
6 for termination or change of status involving a written
7 collaborative agreement, except when such notice is given
8 for just cause.

9 (b) The collaborating podiatrist shall have access to the
10 records of all patients attended to by an advanced practice
11 nurse.

12 (c) Nothing in this Section shall be construed to limit the
13 delegation of tasks or duties by a podiatrist to a licensed
14 practical nurse, a registered professional nurse, or other
15 persons.

16 (d) A podiatrist shall not be liable for the acts or
17 omissions of an advanced practice nurse solely on the basis of
18 having signed guidelines or a collaborative agreement, an
19 order, a standing order, a standing delegation order, or other
20 order or guideline authorizing an advanced practice nurse to
21 perform acts, unless the podiatrist has reason to believe the
22 advanced practice nurse lacked the competency to perform the
23 act or acts or commits willful or wanton misconduct.

24 Section 145. The Respiratory Care Practice Act is amended
25 by changing Section 10 as follows:

1 (225 ILCS 106/10)

2 (Section scheduled to be repealed on January 1, 2016)

3 Sec. 10. Definitions. In this Act:

4 "Advanced practice nurse" means an advanced practice nurse
5 licensed under the Nurse Practice Act ~~Nursing and Advanced~~
6 ~~Practice Nursing Act.~~

7 "Board" means the Respiratory Care Board appointed by the
8 Director.

9 "Basic respiratory care activities" means and includes all
10 of the following activities:

11 (1) Cleaning, disinfecting, and sterilizing equipment
12 used in the practice of respiratory care as delegated by a
13 licensed health care professional or other authorized
14 licensed personnel.

15 (2) Assembling equipment used in the practice of
16 respiratory care as delegated by a licensed health care
17 professional or other authorized licensed personnel.

18 (3) Collecting and reviewing patient data through
19 non-invasive means, provided that the collection and
20 review does not include the individual's interpretation of
21 the clinical significance of the data. Collecting and
22 reviewing patient data includes the performance of pulse
23 oximetry and non-invasive monitoring procedures in order
24 to obtain vital signs and notification to licensed health
25 care professionals and other authorized licensed personnel

1 in a timely manner.

2 (4) Maintaining a nasal cannula or face mask for oxygen
3 therapy in the proper position on the patient's face.

4 (5) Assembling a nasal cannula or face mask for oxygen
5 therapy at patient bedside in preparation for use.

6 (6) Maintaining a patient's natural airway by
7 physically manipulating the jaw and neck, suctioning the
8 oral cavity, or suctioning the mouth or nose with a bulb
9 syringe.

10 (7) Performing assisted ventilation during emergency
11 resuscitation using a manual resuscitator.

12 (8) Using a manual resuscitator at the direction of a
13 licensed health care professional or other authorized
14 licensed personnel who is present and performing routine
15 airway suctioning. These activities do not include care of
16 a patient's artificial airway or the adjustment of
17 mechanical ventilator settings while a patient is
18 connected to the ventilator.

19 "Basic respiratory care activities" does not mean activities
20 that involve any of the following:

21 (1) Specialized knowledge that results from a course of
22 education or training in respiratory care.

23 (2) An unreasonable risk of a negative outcome for the
24 patient.

25 (3) The assessment or making of a decision concerning
26 patient care.

1 (4) The administration of aerosol medication or
2 oxygen.

3 (5) The insertion and maintenance of an artificial
4 airway.

5 (6) Mechanical ventilatory support.

6 (7) Patient assessment.

7 (8) Patient education.

8 "Department" means the Department of Professional
9 Regulation.

10 "Director" means the Director of Professional Regulation.

11 "Licensed" means that which is required to hold oneself out
12 as a respiratory care practitioner as defined in this Act.

13 "Licensed health care professional" means a physician
14 licensed to practice medicine in all its branches, an advanced
15 practice nurse who has a written collaborative agreement with a
16 collaborating physician that authorizes the advanced practice
17 nurse to transmit orders to a respiratory care practitioner, or
18 a physician assistant who has been delegated the authority to
19 transmit orders to a respiratory care practitioner by his or
20 her supervising physician.

21 "Order" means a written, oral, or telecommunicated
22 authorization for respiratory care services for a patient by
23 (i) a licensed health care professional who maintains medical
24 supervision of the patient and makes a diagnosis or verifies
25 that the patient's condition is such that it may be treated by
26 a respiratory care practitioner or (ii) a certified registered

1 nurse anesthetist in a licensed hospital or ambulatory surgical
2 treatment center.

3 "Other authorized licensed personnel" means a licensed
4 respiratory care practitioner, a licensed registered nurse, or
5 a licensed practical nurse whose scope of practice authorizes
6 the professional to supervise an individual who is not
7 licensed, certified, or registered as a health professional.

8 "Proximate supervision" means a situation in which an
9 individual is responsible for directing the actions of another
10 individual in the facility and is physically close enough to be
11 readily available, if needed, by the supervised individual.

12 "Respiratory care" and "cardiorespiratory care" mean
13 preventative services, evaluation and assessment services,
14 therapeutic services, and rehabilitative services under the
15 order of a licensed health care professional or a certified
16 registered nurse anesthetist in a licensed hospital for an
17 individual with a disorder, disease, or abnormality of the
18 cardiopulmonary system. These terms include, but are not
19 limited to, measuring, observing, assessing, and monitoring
20 signs and symptoms, reactions, general behavior, and general
21 physical response of individuals to respiratory care services,
22 including the determination of whether those signs, symptoms,
23 reactions, behaviors, or general physical responses exhibit
24 abnormal characteristics; the administration of
25 pharmacological and therapeutic agents related to respiratory
26 care services; the collection of blood specimens and other

1 bodily fluids and tissues for, and the performance of,
2 cardiopulmonary diagnostic testing procedures, including, but
3 not limited to, blood gas analysis; development,
4 implementation, and modification of respiratory care treatment
5 plans based on assessed abnormalities of the cardiopulmonary
6 system, respiratory care guidelines, referrals, and orders of a
7 licensed health care professional; application, operation, and
8 management of mechanical ventilatory support and other means of
9 life support; and the initiation of emergency procedures under
10 the rules promulgated by the Department. A respiratory care
11 practitioner shall refer to a physician licensed to practice
12 medicine in all its branches any patient whose condition, at
13 the time of evaluation or treatment, is determined to be beyond
14 the scope of practice of the respiratory care practitioner.

15 "Respiratory care education program" means a course of
16 academic study leading to eligibility for registry or
17 certification in respiratory care. The training is to be
18 approved by an accrediting agency recognized by the Board and
19 shall include an evaluation of competence through a
20 standardized testing mechanism that is determined by the Board
21 to be both valid and reliable.

22 "Respiratory care practitioner" means a person who is
23 licensed by the Department of Professional Regulation and meets
24 all of the following criteria:

25 (1) The person is engaged in the practice of
26 cardiorespiratory care and has the knowledge and skill

1 necessary to administer respiratory care.

2 (2) The person is capable of serving as a resource to
3 the licensed health care professional in relation to the
4 technical aspects of cardiorespiratory care and the safe
5 and effective methods for administering cardiorespiratory
6 care modalities.

7 (3) The person is able to function in situations of
8 unsupervised patient contact requiring great individual
9 judgment.

10 (Source: P.A. 94-523, eff. 1-1-06.)

11 Section 150. The Barber, Cosmetology, Esthetics, and Nail
12 Technology Act of 1985 is amended by changing Section 1-11 as
13 follows:

14 (225 ILCS 410/1-11) (from Ch. 111, par. 1701-11)

15 (Section scheduled to be repealed on January 1, 2016)

16 Sec. 1-11. Exceptions to Act.

17 (a) Nothing in this Act shall be construed to apply to the
18 educational activities conducted in connection with any
19 monthly, annual or other special educational program of any
20 bona fide association of licensed cosmetologists,
21 estheticians, nail technicians, or barbers, or licensed
22 cosmetology, esthetics, nail technology, or barber schools
23 from which the general public is excluded.

24 (b) Nothing in this Act shall be construed to apply to the

1 activities and services of registered nurses or licensed
2 practical nurses, as defined in the Nurse Practice Act ~~Nursing~~
3 ~~and Advanced Practice Nursing Act~~, or to personal care or
4 health care services provided by individuals in the performance
5 of their duties as employed or authorized by facilities or
6 programs licensed or certified by State agencies. As used in
7 this subsection (b), "personal care" means assistance with
8 meals, dressing, movement, bathing, or other personal needs or
9 maintenance or general supervision and oversight of the
10 physical and mental well-being of an individual who is
11 incapable of maintaining a private, independent residence or
12 who is incapable of managing his or her person whether or not a
13 guardian has been appointed for that individual. The definition
14 of "personal care" as used in this subsection (b) shall not
15 otherwise be construed to negate the requirements of this Act
16 or its rules.

17 (c) Nothing in this Act shall be deemed to require
18 licensure of individuals employed by the motion picture, film,
19 television, stage play or related industry for the purpose of
20 providing cosmetology or esthetics services to actors of that
21 industry while engaged in the practice of cosmetology or
22 esthetics as a part of that person's employment.

23 (Source: P.A. 90-580, eff. 5-21-98; 90-742, eff. 8-13-98;
24 91-357, eff. 7-29-99.)

25 Section 155. The Nurse Agency Licensing Act is amended by

1 changing Section 3 as follows:

2 (225 ILCS 510/3) (from Ch. 111, par. 953)

3 Sec. 3. Definitions. As used in this Act:

4 (a) "Certified nurse aide" means an individual certified as
5 defined in Section 3-206 of the Nursing Home Care Act, as now
6 or hereafter amended.

7 (b) "Department" means the Department of Labor.

8 (c) "Director" means the Director of Labor.

9 (d) "Health care facility" is defined as in Section 3 of
10 the Illinois Health Facilities Planning Act, as now or
11 hereafter amended.

12 (e) "Licensee" means any nursing agency which is properly
13 licensed under this Act.

14 (f) "Nurse" means a registered nurse or a licensed
15 practical nurse as defined in the Nurse Practice Act ~~Nursing~~
16 ~~and Advanced Practice Nursing Act.~~

17 (g) "Nurse agency" means any individual, firm,
18 corporation, partnership or other legal entity that employs,
19 assigns or refers nurses or certified nurse aides to a health
20 care facility for a fee. The term "nurse agency" includes
21 nurses registries. The term "nurse agency" does not include
22 services provided by home health agencies licensed and operated
23 under the Home Health, Home Services, and Home Nursing Agency
24 Licensing Act or a licensed or certified individual who
25 provides his or her own services as a regular employee of a

1 health care facility, nor does it apply to a health care
2 facility's organizing nonsalaried employees to provide
3 services only in that facility.

4 (Source: P.A. 94-379, eff. 1-1-06.)

5 Section 160. The Illinois Public Aid Code is amended by
6 changing Section 8A-7.1 as follows:

7 (305 ILCS 5/8A-7.1) (from Ch. 23, par. 8A-7.1)

8 Sec. 8A-7.1. The Director, upon making a determination
9 based upon information in the possession of the Illinois
10 Department, that continuation in practice of a licensed health
11 care professional would constitute an immediate danger to the
12 public, shall submit a written communication to the Director of
13 Professional Regulation indicating such determination and
14 additionally providing a complete summary of the information
15 upon which such determination is based, and recommending that
16 the Director of Professional Regulation immediately suspend
17 such person's license. All relevant evidence, or copies
18 thereof, in the Illinois Department's possession may also be
19 submitted in conjunction with the written communication. A copy
20 of such written communication, which is exempt from the copying
21 and inspection provisions of the Freedom of Information Act,
22 shall at the time of submittal to the Director of Professional
23 Regulation be simultaneously mailed to the last known business
24 address of such licensed health care professional by certified

1 or registered postage, United States Mail, return receipt
2 requested. Any evidence, or copies thereof, which is submitted
3 in conjunction with the written communication is also exempt
4 from the copying and inspection provisions of the Freedom of
5 Information Act.

6 The Director, upon making a determination based upon
7 information in the possession of the Illinois Department, that
8 a licensed health care professional is willfully committing
9 fraud upon the Illinois Department's medical assistance
10 program, shall submit a written communication to the Director
11 of Professional Regulation indicating such determination and
12 additionally providing a complete summary of the information
13 upon which such determination is based. All relevant evidence,
14 or copies thereof, in the Illinois Department's possession may
15 also be submitted in conjunction with the written
16 communication.

17 Upon receipt of such written communication, the Director of
18 Professional Regulation shall promptly investigate the
19 allegations contained in such written communication. A copy of
20 such written communication, which is exempt from the copying
21 and inspection provisions of the Freedom of Information Act,
22 shall at the time of submission to the Director of Professional
23 Regulation, be simultaneously mailed to the last known address
24 of such licensed health care professional by certified or
25 registered postage, United States Mail, return receipt
26 requested. Any evidence, or copies thereof, which is submitted

1 in conjunction with the written communication is also exempt
2 from the copying and inspection provisions of the Freedom of
3 Information Act.

4 For the purposes of this Section, "licensed health care
5 professional" means any person licensed under the Illinois
6 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
7 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of
8 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
9 Practice Act of 1987, or the Illinois Optometric Practice Act
10 of 1987.

11 (Source: P.A. 92-651, eff. 7-11-02.)

12 Section 165. The Elder Abuse and Neglect Act is amended by
13 changing Section 2 as follows:

14 (320 ILCS 20/2) (from Ch. 23, par. 6602)

15 Sec. 2. Definitions. As used in this Act, unless the
16 context requires otherwise:

17 (a) "Abuse" means causing any physical, mental or sexual
18 injury to an eligible adult, including exploitation of such
19 adult's financial resources.

20 Nothing in this Act shall be construed to mean that an
21 eligible adult is a victim of abuse, neglect, or self-neglect
22 for the sole reason that he or she is being furnished with or
23 relies upon treatment by spiritual means through prayer alone,
24 in accordance with the tenets and practices of a recognized

1 church or religious denomination.

2 Nothing in this Act shall be construed to mean that an
3 eligible adult is a victim of abuse because of health care
4 services provided or not provided by licensed health care
5 professionals.

6 (a-5) "Abuser" means a person who abuses, neglects, or
7 financially exploits an eligible adult.

8 (a-7) "Caregiver" means a person who either as a result of
9 a family relationship, voluntarily, or in exchange for
10 compensation has assumed responsibility for all or a portion of
11 the care of an eligible adult who needs assistance with
12 activities of daily living.

13 (b) "Department" means the Department on Aging of the State
14 of Illinois.

15 (c) "Director" means the Director of the Department.

16 (d) "Domestic living situation" means a residence where the
17 eligible adult lives alone or with his or her family or a
18 caregiver, or others, or a board and care home or other
19 community-based unlicensed facility, but is not:

20 (1) A licensed facility as defined in Section 1-113 of
21 the Nursing Home Care Act;

22 (2) A "life care facility" as defined in the Life Care
23 Facilities Act;

24 (3) A home, institution, or other place operated by the
25 federal government or agency thereof or by the State of
26 Illinois;

1 (4) A hospital, sanitarium, or other institution, the
2 principal activity or business of which is the diagnosis,
3 care, and treatment of human illness through the
4 maintenance and operation of organized facilities
5 therefor, which is required to be licensed under the
6 Hospital Licensing Act;

7 (5) A "community living facility" as defined in the
8 Community Living Facilities Licensing Act;

9 (6) A "community residential alternative" as defined
10 in the Community Residential Alternatives Licensing Act;

11 (7) A "community-integrated living arrangement" as
12 defined in the Community-Integrated Living Arrangements
13 Licensure and Certification Act;

14 (8) An assisted living or shared housing establishment
15 as defined in the Assisted Living and Shared Housing Act;
16 or

17 (9) A supportive living facility as described in
18 Section 5-5.01a of the Illinois Public Aid Code.

19 (e) "Eligible adult" means a person 60 years of age or
20 older who resides in a domestic living situation and is, or is
21 alleged to be, abused, neglected, or financially exploited by
22 another individual or who neglects himself or herself.

23 (f) "Emergency" means a situation in which an eligible
24 adult is living in conditions presenting a risk of death or
25 physical, mental or sexual injury and the provider agency has
26 reason to believe the eligible adult is unable to consent to

1 services which would alleviate that risk.

2 (f-5) "Mandated reporter" means any of the following
3 persons while engaged in carrying out their professional
4 duties:

5 (1) a professional or professional's delegate while
6 engaged in: (i) social services, (ii) law enforcement,
7 (iii) education, (iv) the care of an eligible adult or
8 eligible adults, or (v) any of the occupations required to
9 be licensed under the Clinical Psychologist Licensing Act,
10 the Clinical Social Work and Social Work Practice Act, the
11 Illinois Dental Practice Act, the Dietetic and Nutrition
12 Services Practice Act, the Marriage and Family Therapy
13 Licensing Act, the Medical Practice Act of 1987, the
14 Naprapathic Practice Act, the Nurse Practice Act ~~Nursing~~
15 ~~and Advanced Practice Nursing Act~~, the Nursing Home
16 Administrators Licensing and Disciplinary Act, the
17 Illinois Occupational Therapy Practice Act, the Illinois
18 Optometric Practice Act of 1987, the Pharmacy Practice Act
19 of 1987, the Illinois Physical Therapy Act, the Physician
20 Assistant Practice Act of 1987, the Podiatric Medical
21 Practice Act of 1987, the Respiratory Care Practice Act,
22 the Professional Counselor and Clinical Professional
23 Counselor Licensing Act, the Illinois Speech-Language
24 Pathology and Audiology Practice Act, the Veterinary
25 Medicine and Surgery Practice Act of 2004, and the Illinois
26 Public Accounting Act;

1 (2) an employee of a vocational rehabilitation
2 facility prescribed or supervised by the Department of
3 Human Services;

4 (3) an administrator, employee, or person providing
5 services in or through an unlicensed community based
6 facility;

7 (4) any religious practitioner who provides treatment
8 by prayer or spiritual means alone in accordance with the
9 tenets and practices of a recognized church or religious
10 denomination, except as to information received in any
11 confession or sacred communication enjoined by the
12 discipline of the religious denomination to be held
13 confidential;

14 (5) field personnel of the Department of Healthcare and
15 Family Services, Department of Public Health, and
16 Department of Human Services, and any county or municipal
17 health department;

18 (6) personnel of the Department of Human Services, the
19 Guardianship and Advocacy Commission, the State Fire
20 Marshal, local fire departments, the Department on Aging
21 and its subsidiary Area Agencies on Aging and provider
22 agencies, and the Office of State Long Term Care Ombudsman;

23 (7) any employee of the State of Illinois not otherwise
24 specified herein who is involved in providing services to
25 eligible adults, including professionals providing medical
26 or rehabilitation services and all other persons having

1 direct contact with eligible adults;

2 (8) a person who performs the duties of a coroner or
3 medical examiner; or

4 (9) a person who performs the duties of a paramedic or
5 an emergency medical technician.

6 (g) "Neglect" means another individual's failure to
7 provide an eligible adult with or willful withholding from an
8 eligible adult the necessities of life including, but not
9 limited to, food, clothing, shelter or health care. This
10 subsection does not create any new affirmative duty to provide
11 support to eligible adults. Nothing in this Act shall be
12 construed to mean that an eligible adult is a victim of neglect
13 because of health care services provided or not provided by
14 licensed health care professionals.

15 (h) "Provider agency" means any public or nonprofit agency
16 in a planning and service area appointed by the regional
17 administrative agency with prior approval by the Department on
18 Aging to receive and assess reports of alleged or suspected
19 abuse, neglect, or financial exploitation.

20 (i) "Regional administrative agency" means any public or
21 nonprofit agency in a planning and service area so designated
22 by the Department, provided that the designated Area Agency on
23 Aging shall be designated the regional administrative agency if
24 it so requests. The Department shall assume the functions of
25 the regional administrative agency for any planning and service
26 area where another agency is not so designated.

1 (i-5) "Self-neglect" means a condition that is the result
2 of an eligible adult's inability, due to physical or mental
3 impairments, or both, or a diminished capacity, to perform
4 essential self-care tasks that substantially threaten his or
5 her own health, including: providing essential food, clothing,
6 shelter, and health care; and obtaining goods and services
7 necessary to maintain physical health, mental health,
8 emotional well-being, and general safety.

9 (j) "Substantiated case" means a reported case of alleged
10 or suspected abuse, neglect, financial exploitation, or
11 self-neglect in which a provider agency, after assessment,
12 determines that there is reason to believe abuse, neglect, or
13 financial exploitation has occurred.

14 (Source: P.A. 93-281 eff. 12-31-03; 93-300, eff. 1-1-04;
15 94-1064, eff. 1-1-07.)

16 Section 170. The Prenatal and Newborn Care Act is amended
17 by changing Section 2 as follows:

18 (410 ILCS 225/2) (from Ch. 111 1/2, par. 7022)

19 Sec. 2. Definitions. As used in this Act, unless the
20 context otherwise requires:

21 "Advanced practice nurse" or "APN" means an advanced
22 practice nurse licensed under the Nurse Practice Act ~~Nursing~~
23 ~~and Advanced Practice Nursing Act~~ who has a written
24 collaborative agreement with a collaborating physician that

1 authorizes the provision of prenatal and newborn care.

2 "Department" means the Illinois Department of Human
3 Services.

4 "Early and Periodic Screening, Diagnosis and Treatment
5 (EPSDT)" means the provision of preventative health care under
6 42 C.F.R. 441.50 et seq., including medical and dental
7 services, needed to assess growth and development and detect
8 and treat health problems.

9 "Hospital" means a hospital as defined under the Hospital
10 Licensing Act.

11 "Local health authority" means the full-time official
12 health department or board of health, as recognized by the
13 Illinois Department of Public Health, having jurisdiction over
14 a particular area.

15 "Nurse" means a nurse licensed under the Nurse Practice Act
16 ~~Nursing and Advanced Practice Nursing Act.~~

17 "Physician" means a physician licensed to practice
18 medicine in all of its branches.

19 "Physician assistant" means a physician assistant licensed
20 under the Physician Assistant Practice Act of 1987 who has been
21 delegated authority to provide prenatal and newborn care.

22 "Postnatal visit" means a visit occurring after birth, with
23 reference to the newborn.

24 "Prenatal visit" means a visit occurring before birth.

25 "Program" means the Prenatal and Newborn Care Program
26 established pursuant to this Act.

1 (Source: P.A. 93-962, eff. 8-20-04.)

2 Section 175. The Illinois Sexually Transmissible Disease
3 Control Act is amended by changing Section 4 as follows:

4 (410 ILCS 325/4) (from Ch. 111 1/2, par. 7404)

5 Sec. 4. Reporting required.

6 (a) A physician licensed under the provisions of the
7 Medical Practice Act of 1987, an advanced practice nurse
8 licensed under the provisions of the Nurse Practice Act ~~Nursing~~
9 ~~and Advanced Practice Nursing Act~~ who has a written
10 collaborative agreement with a collaborating physician that
11 authorizes the provision of services for a sexually
12 transmissible disease, or a physician assistant licensed under
13 the provisions of the Physician Assistant Practice Act of 1987
14 who has been delegated authority to provide services for a
15 sexually transmissible disease who makes a diagnosis of or
16 treats a person with a sexually transmissible disease and each
17 laboratory that performs a test for a sexually transmissible
18 disease which concludes with a positive result shall report
19 such facts as may be required by the Department by rule, within
20 such time period as the Department may require by rule, but in
21 no case to exceed 2 weeks.

22 (b) The Department shall adopt rules specifying the
23 information required in reporting a sexually transmissible
24 disease, the method of reporting and specifying a minimum time

1 period for reporting. In adopting such rules, the Department
2 shall consider the need for information, protections for the
3 privacy and confidentiality of the patient, and the practical
4 abilities of persons and laboratories to report in a reasonable
5 fashion.

6 (c) Any person who knowingly or maliciously disseminates
7 any false information or report concerning the existence of any
8 sexually transmissible disease under this Section is guilty of
9 a Class A misdemeanor.

10 (d) Any person who violates the provisions of this Section
11 or the rules adopted hereunder may be fined by the Department
12 up to \$500 for each violation. The Department shall report each
13 violation of this Section to the regulatory agency responsible
14 for licensing a health care professional or a laboratory to
15 which these provisions apply.

16 (Source: P.A. 93-962, eff. 8-20-04.)

17 Section 180. The Home Health and Hospice Drug Dispensation
18 and Administration Act is amended by changing Section 10 as
19 follows:

20 (410 ILCS 642/10)

21 Sec. 10. Definitions. In this Act:

22 "Authorized nursing employee" means a registered nurse or
23 advanced practice nurse, as defined in the Nurse Practice Act
24 ~~Nursing and Advanced Practice Nursing Act~~, who is employed by a

1 home health agency or hospice licensed in this State.

2 "Health care professional" means a physician licensed to
3 practice medicine in all its branches, an advanced practice
4 nurse who has a written collaborative agreement with a
5 collaborating physician that authorizes services under this
6 Act, or a physician assistant who has been delegated the
7 authority to perform services under this Act by his or her
8 supervising physician.

9 "Home health agency" has the meaning ascribed to it in
10 Section 2.04 of the Home Health, Home Services, and Home
11 Nursing Agency Licensing Act.

12 "Hospice" means a full hospice, as defined in Section 3 of
13 the Hospice Program Licensing Act.

14 "Physician" means a physician licensed under the Medical
15 Practice Act of 1987 to practice medicine in all its branches.

16 (Source: P.A. 94-638, eff. 8-22-05; revised 10-19-06.)

17 Section 190. The Illinois Abortion Law of 1975 is amended
18 by changing Section 11 as follows:

19 (720 ILCS 510/11) (from Ch. 38, par. 81-31)

20 Sec. 11. (1) Any person who intentionally violates any
21 provision of this Law commits a Class A misdemeanor unless a
22 specific penalty is otherwise provided. Any person who
23 intentionally falsifies any writing required by this Law
24 commits a Class A misdemeanor.

1 Intentional, knowing, reckless, or negligent violations of
2 this Law shall constitute unprofessional conduct which causes
3 public harm under Section 22 of the Medical Practice Act of
4 1987, as amended; Sections 70-5 of the Nurse Practice Act
5 ~~Sections 10-45 and 15-50 of the Nursing and Advanced Practice~~
6 ~~Nursing Act~~, and Section 21 of the Physician Assistant Practice
7 Act of 1987, as amended.

8 Intentional, knowing, reckless or negligent violations of
9 this Law will constitute grounds for refusal, denial,
10 revocation, suspension, or withdrawal of license, certificate,
11 or permit under Section 30 of the Pharmacy Practice Act of
12 1987, as amended; Section 7 of the Ambulatory Surgical
13 Treatment Center Act, effective July 19, 1973, as amended; and
14 Section 7 of the Hospital Licensing Act.

15 (2) Any hospital or licensed facility which, or any
16 physician who intentionally, knowingly, or recklessly fails to
17 submit a complete report to the Department in accordance with
18 the provisions of Section 10 of this Law and any person who
19 intentionally, knowingly, recklessly or negligently fails to
20 maintain the confidentiality of any reports required under this
21 Law or reports required by Sections 10.1 or 12 of this Law
22 commits a Class B misdemeanor.

23 (3) Any person who sells any drug, medicine, instrument or
24 other substance which he knows to be an abortifacient and which
25 is in fact an abortifacient, unless upon prescription of a
26 physician, is guilty of a Class B misdemeanor. Any person who

1 prescribes or administers any instrument, medicine, drug or
2 other substance or device, which he knows to be an
3 abortifacient, and which is in fact an abortifacient, and
4 intentionally, knowingly or recklessly fails to inform the
5 person for whom it is prescribed or upon whom it is
6 administered that it is an abortifacient commits a Class C
7 misdemeanor.

8 (4) Any person who intentionally, knowingly or recklessly
9 performs upon a woman what he represents to that woman to be an
10 abortion when he knows or should know that she is not pregnant
11 commits a Class 2 felony and shall be answerable in civil
12 damages equal to 3 times the amount of proved damages.

13 (Source: P.A. 90-742, eff. 8-13-98.)

14 Section 195. The Illinois Controlled Substances Act is
15 amended by changing Sections 102, 103, and 303.05 as follows:

16 (720 ILCS 570/102) (from Ch. 56 1/2, par. 1102)

17 Sec. 102. Definitions. As used in this Act, unless the
18 context otherwise requires:

19 (a) "Addict" means any person who habitually uses any drug,
20 chemical, substance or dangerous drug other than alcohol so as
21 to endanger the public morals, health, safety or welfare or who
22 is so far addicted to the use of a dangerous drug or controlled
23 substance other than alcohol as to have lost the power of self
24 control with reference to his addiction.

1 (b) "Administer" means the direct application of a
2 controlled substance, whether by injection, inhalation,
3 ingestion, or any other means, to the body of a patient,
4 research subject, or animal (as defined by the Humane
5 Euthanasia in Animal Shelters Act) by:

6 (1) a practitioner (or, in his presence, by his
7 authorized agent),

8 (2) the patient or research subject at the lawful
9 direction of the practitioner, or

10 (3) a euthanasia technician as defined by the Humane
11 Euthanasia in Animal Shelters Act.

12 (c) "Agent" means an authorized person who acts on behalf
13 of or at the direction of a manufacturer, distributor, or
14 dispenser. It does not include a common or contract carrier,
15 public warehouseman or employee of the carrier or warehouseman.

16 (c-1) "Anabolic Steroids" means any drug or hormonal
17 substance, chemically and pharmacologically related to
18 testosterone (other than estrogens, progestins, and
19 corticosteroids) that promotes muscle growth, and includes:

20 (i) boldenone,

21 (ii) chlorotestosterone,

22 (iii) chostebol,

23 (iv) dehydrochlormethyltestosterone,

24 (v) dihydrotestosterone,

25 (vi) drostanolone,

26 (vii) ethylestrenol,

1 (viii) fluoxymesterone,
2 (ix) formebulone,
3 (x) mesterolone,
4 (xi) methandienone,
5 (xii) methandranone,
6 (xiii) methandriol,
7 (xiv) methandrostenolone,
8 (xv) methenolone,
9 (xvi) methyltestosterone,
10 (xvii) mibolerone,
11 (xviii) nandrolone,
12 (xix) norethandrolone,
13 (xx) oxandrolone,
14 (xxi) oxymesterone,
15 (xxii) oxymetholone,
16 (xxiii) stanolone,
17 (xxiv) stanozolol,
18 (xxv) testolactone,
19 (xxvi) testosterone,
20 (xxvii) trenbolone, and
21 (xxviii) any salt, ester, or isomer of a drug or
22 substance described or listed in this paragraph, if
23 that salt, ester, or isomer promotes muscle growth.

24 Any person who is otherwise lawfully in possession of an
25 anabolic steroid, or who otherwise lawfully manufactures,
26 distributes, dispenses, delivers, or possesses with intent to

1 deliver an anabolic steroid, which anabolic steroid is
2 expressly intended for and lawfully allowed to be administered
3 through implants to livestock or other nonhuman species, and
4 which is approved by the Secretary of Health and Human Services
5 for such administration, and which the person intends to
6 administer or have administered through such implants, shall
7 not be considered to be in unauthorized possession or to
8 unlawfully manufacture, distribute, dispense, deliver, or
9 possess with intent to deliver such anabolic steroid for
10 purposes of this Act.

11 (d) "Administration" means the Drug Enforcement
12 Administration, United States Department of Justice, or its
13 successor agency.

14 (e) "Control" means to add a drug or other substance, or
15 immediate precursor, to a Schedule under Article II of this Act
16 whether by transfer from another Schedule or otherwise.

17 (f) "Controlled Substance" means a drug, substance, or
18 immediate precursor in the Schedules of Article II of this Act.

19 (g) "Counterfeit substance" means a controlled substance,
20 which, or the container or labeling of which, without
21 authorization bears the trademark, trade name, or other
22 identifying mark, imprint, number or device, or any likeness
23 thereof, of a manufacturer, distributor, or dispenser other
24 than the person who in fact manufactured, distributed, or
25 dispensed the substance.

26 (h) "Deliver" or "delivery" means the actual, constructive

1 or attempted transfer of possession of a controlled substance,
2 with or without consideration, whether or not there is an
3 agency relationship.

4 (i) "Department" means the Illinois Department of Human
5 Services (as successor to the Department of Alcoholism and
6 Substance Abuse) or its successor agency.

7 (j) "Department of State Police" means the Department of
8 State Police of the State of Illinois or its successor agency.

9 (k) "Department of Corrections" means the Department of
10 Corrections of the State of Illinois or its successor agency.

11 (l) "Department of Professional Regulation" means the
12 Department of Professional Regulation of the State of Illinois
13 or its successor agency.

14 (m) "Depressant" or "stimulant substance" means:

15 (1) a drug which contains any quantity of (i)
16 barbituric acid or any of the salts of barbituric acid
17 which has been designated as habit forming under section
18 502 (d) of the Federal Food, Drug, and Cosmetic Act (21
19 U.S.C. 352 (d)); or

20 (2) a drug which contains any quantity of (i)
21 amphetamine or methamphetamine and any of their optical
22 isomers; (ii) any salt of amphetamine or methamphetamine or
23 any salt of an optical isomer of amphetamine; or (iii) any
24 substance which the Department, after investigation, has
25 found to be, and by rule designated as, habit forming
26 because of its depressant or stimulant effect on the

1 central nervous system; or

2 (3) lysergic acid diethylamide; or

3 (4) any drug which contains any quantity of a substance
4 which the Department, after investigation, has found to
5 have, and by rule designated as having, a potential for
6 abuse because of its depressant or stimulant effect on the
7 central nervous system or its hallucinogenic effect.

8 (n) (Blank).

9 (o) "Director" means the Director of the Department of
10 State Police or the Department of Professional Regulation or
11 his designated agents.

12 (p) "Dispense" means to deliver a controlled substance to
13 an ultimate user or research subject by or pursuant to the
14 lawful order of a prescriber, including the prescribing,
15 administering, packaging, labeling, or compounding necessary
16 to prepare the substance for that delivery.

17 (q) "Dispenser" means a practitioner who dispenses.

18 (r) "Distribute" means to deliver, other than by
19 administering or dispensing, a controlled substance.

20 (s) "Distributor" means a person who distributes.

21 (t) "Drug" means (1) substances recognized as drugs in the
22 official United States Pharmacopoeia, Official Homeopathic
23 Pharmacopoeia of the United States, or official National
24 Formulary, or any supplement to any of them; (2) substances
25 intended for use in diagnosis, cure, mitigation, treatment, or
26 prevention of disease in man or animals; (3) substances (other

1 than food) intended to affect the structure of any function of
2 the body of man or animals and (4) substances intended for use
3 as a component of any article specified in clause (1), (2), or
4 (3) of this subsection. It does not include devices or their
5 components, parts, or accessories.

6 (t-5) "Euthanasia agency" means an entity certified by the
7 Department of Professional Regulation for the purpose of animal
8 euthanasia that holds an animal control facility license or
9 animal shelter license under the Animal Welfare Act. A
10 euthanasia agency is authorized to purchase, store, possess,
11 and utilize Schedule II nonnarcotic and Schedule III
12 nonnarcotic drugs for the sole purpose of animal euthanasia.

13 (t-10) "Euthanasia drugs" means Schedule II or Schedule III
14 substances (nonnarcotic controlled substances) that are used
15 by a euthanasia agency for the purpose of animal euthanasia.

16 (u) "Good faith" means the prescribing or dispensing of a
17 controlled substance by a practitioner in the regular course of
18 professional treatment to or for any person who is under his
19 treatment for a pathology or condition other than that
20 individual's physical or psychological dependence upon or
21 addiction to a controlled substance, except as provided herein:
22 and application of the term to a pharmacist shall mean the
23 dispensing of a controlled substance pursuant to the
24 prescriber's order which in the professional judgment of the
25 pharmacist is lawful. The pharmacist shall be guided by
26 accepted professional standards including, but not limited to

1 the following, in making the judgment:

2 (1) lack of consistency of doctor-patient
3 relationship,

4 (2) frequency of prescriptions for same drug by one
5 prescriber for large numbers of patients,

6 (3) quantities beyond those normally prescribed,

7 (4) unusual dosages,

8 (5) unusual geographic distances between patient,
9 pharmacist and prescriber,

10 (6) consistent prescribing of habit-forming drugs.

11 (u-1) "Home infusion services" means services provided by a
12 pharmacy in compounding solutions for direct administration to
13 a patient in a private residence, long-term care facility, or
14 hospice setting by means of parenteral, intravenous,
15 intramuscular, subcutaneous, or intraspinal infusion.

16 (v) "Immediate precursor" means a substance:

17 (1) which the Department has found to be and by rule
18 designated as being a principal compound used, or produced
19 primarily for use, in the manufacture of a controlled
20 substance;

21 (2) which is an immediate chemical intermediary used or
22 likely to be used in the manufacture of such controlled
23 substance; and

24 (3) the control of which is necessary to prevent,
25 curtail or limit the manufacture of such controlled
26 substance.

1 (w) "Instructional activities" means the acts of teaching,
2 educating or instructing by practitioners using controlled
3 substances within educational facilities approved by the State
4 Board of Education or its successor agency.

5 (x) "Local authorities" means a duly organized State,
6 County or Municipal peace unit or police force.

7 (y) "Look-alike substance" means a substance, other than a
8 controlled substance which (1) by overall dosage unit
9 appearance, including shape, color, size, markings or lack
10 thereof, taste, consistency, or any other identifying physical
11 characteristic of the substance, would lead a reasonable person
12 to believe that the substance is a controlled substance, or (2)
13 is expressly or impliedly represented to be a controlled
14 substance or is distributed under circumstances which would
15 lead a reasonable person to believe that the substance is a
16 controlled substance. For the purpose of determining whether
17 the representations made or the circumstances of the
18 distribution would lead a reasonable person to believe the
19 substance to be a controlled substance under this clause (2) of
20 subsection (y), the court or other authority may consider the
21 following factors in addition to any other factor that may be
22 relevant:

23 (a) statements made by the owner or person in control
24 of the substance concerning its nature, use or effect;

25 (b) statements made to the buyer or recipient that the
26 substance may be resold for profit;

1 (c) whether the substance is packaged in a manner
2 normally used for the illegal distribution of controlled
3 substances;

4 (d) whether the distribution or attempted distribution
5 included an exchange of or demand for money or other
6 property as consideration, and whether the amount of the
7 consideration was substantially greater than the
8 reasonable retail market value of the substance.

9 Clause (1) of this subsection (y) shall not apply to a
10 noncontrolled substance in its finished dosage form that was
11 initially introduced into commerce prior to the initial
12 introduction into commerce of a controlled substance in its
13 finished dosage form which it may substantially resemble.

14 Nothing in this subsection (y) prohibits the dispensing or
15 distributing of noncontrolled substances by persons authorized
16 to dispense and distribute controlled substances under this
17 Act, provided that such action would be deemed to be carried
18 out in good faith under subsection (u) if the substances
19 involved were controlled substances.

20 Nothing in this subsection (y) or in this Act prohibits the
21 manufacture, preparation, propagation, compounding,
22 processing, packaging, advertising or distribution of a drug or
23 drugs by any person registered pursuant to Section 510 of the
24 Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360).

25 (y-1) "Mail-order pharmacy" means a pharmacy that is
26 located in a state of the United States, other than Illinois,

1 that delivers, dispenses or distributes, through the United
2 States Postal Service or other common carrier, to Illinois
3 residents, any substance which requires a prescription.

4 (z) "Manufacture" means the production, preparation,
5 propagation, compounding, conversion or processing of a
6 controlled substance other than methamphetamine, either
7 directly or indirectly, by extraction from substances of
8 natural origin, or independently by means of chemical
9 synthesis, or by a combination of extraction and chemical
10 synthesis, and includes any packaging or repackaging of the
11 substance or labeling of its container, except that this term
12 does not include:

13 (1) by an ultimate user, the preparation or compounding
14 of a controlled substance for his own use; or

15 (2) by a practitioner, or his authorized agent under
16 his supervision, the preparation, compounding, packaging,
17 or labeling of a controlled substance:

18 (a) as an incident to his administering or
19 dispensing of a controlled substance in the course of
20 his professional practice; or

21 (b) as an incident to lawful research, teaching or
22 chemical analysis and not for sale.

23 (z-1) (Blank).

24 (aa) "Narcotic drug" means any of the following, whether
25 produced directly or indirectly by extraction from substances
26 of natural origin, or independently by means of chemical

1 synthesis, or by a combination of extraction and chemical
2 synthesis:

3 (1) opium and opiate, and any salt, compound,
4 derivative, or preparation of opium or opiate;

5 (2) any salt, compound, isomer, derivative, or
6 preparation thereof which is chemically equivalent or
7 identical with any of the substances referred to in clause
8 (1), but not including the isoquinoline alkaloids of opium;

9 (3) opium poppy and poppy straw;

10 (4) coca leaves and any salts, compound, isomer, salt
11 of an isomer, derivative, or preparation of coca leaves
12 including cocaine or ecgonine, and any salt, compound,
13 isomer, derivative, or preparation thereof which is
14 chemically equivalent or identical with any of these
15 substances, but not including decocainized coca leaves or
16 extractions of coca leaves which do not contain cocaine or
17 ecgonine (for the purpose of this paragraph, the term
18 "isomer" includes optical, positional and geometric
19 isomers).

20 (bb) "Nurse" means a registered nurse licensed under the
21 Nurse Practice Act ~~Nursing and Advanced Practice Nursing Act~~.

22 (cc) (Blank).

23 (dd) "Opiate" means any substance having an addiction
24 forming or addiction sustaining liability similar to morphine
25 or being capable of conversion into a drug having addiction
26 forming or addiction sustaining liability.

1 (ee) "Opium poppy" means the plant of the species *Papaver*
2 *somniferum* L., except its seeds.

3 (ff) "Parole and Pardon Board" means the Parole and Pardon
4 Board of the State of Illinois or its successor agency.

5 (gg) "Person" means any individual, corporation,
6 mail-order pharmacy, government or governmental subdivision or
7 agency, business trust, estate, trust, partnership or
8 association, or any other entity.

9 (hh) "Pharmacist" means any person who holds a certificate
10 of registration as a registered pharmacist, a local registered
11 pharmacist or a registered assistant pharmacist under the
12 Pharmacy Practice Act of 1987.

13 (ii) "Pharmacy" means any store, ship or other place in
14 which pharmacy is authorized to be practiced under the Pharmacy
15 Practice Act of 1987.

16 (jj) "Poppy straw" means all parts, except the seeds, of
17 the opium poppy, after mowing.

18 (kk) "Practitioner" means a physician licensed to practice
19 medicine in all its branches, dentist, podiatrist,
20 veterinarian, scientific investigator, pharmacist, physician
21 assistant, advanced practice nurse, licensed practical nurse,
22 registered nurse, hospital, laboratory, or pharmacy, or other
23 person licensed, registered, or otherwise lawfully permitted
24 by the United States or this State to distribute, dispense,
25 conduct research with respect to, administer or use in teaching
26 or chemical analysis, a controlled substance in the course of

1 professional practice or research.

2 (ll) "Pre-printed prescription" means a written
3 prescription upon which the designated drug has been indicated
4 prior to the time of issuance.

5 (mm) "Prescriber" means a physician licensed to practice
6 medicine in all its branches, dentist, podiatrist or
7 veterinarian who issues a prescription, a physician assistant
8 who issues a prescription for a Schedule III, IV, or V
9 controlled substance in accordance with Section 303.05 and the
10 written guidelines required under Section 7.5 of the Physician
11 Assistant Practice Act of 1987, or an advanced practice nurse
12 with prescriptive authority delegated under Section 65-40 of
13 the Nurse Practice Act and in accordance with Section 303.05
14 and a written collaborative agreement under Section 65-35 of
15 the Nurse Practice Act ~~Sections 15-15 and 15-20 of the Nursing~~
16 ~~and Advanced Practice Nursing Act.~~

17 (nn) "Prescription" means a lawful written, facsimile, or
18 verbal order of a physician licensed to practice medicine in
19 all its branches, dentist, podiatrist or veterinarian for any
20 controlled substance, of a physician assistant for a Schedule
21 III, IV, or V controlled substance in accordance with Section
22 303.05 and the written guidelines required under Section 7.5 of
23 the Physician Assistant Practice Act of 1987, or of an advanced
24 practice nurse with prescriptive authority delegated under
25 Section 65-40 of the Nurse Practice Act who issues a
26 prescription for a Schedule III, IV, or V controlled substance

1 in accordance with Section 303.05 and a written collaborative
2 agreement under Section 65-35 of the Nurse Practice Act
3 ~~Sections 15-15 and 15-20 of the Nursing and Advanced Practice~~
4 ~~Nursing Act.~~

5 (oo) "Production" or "produce" means manufacture,
6 planting, cultivating, growing, or harvesting of a controlled
7 substance other than methamphetamine.

8 (pp) "Registrant" means every person who is required to
9 register under Section 302 of this Act.

10 (qq) "Registry number" means the number assigned to each
11 person authorized to handle controlled substances under the
12 laws of the United States and of this State.

13 (rr) "State" includes the State of Illinois and any state,
14 district, commonwealth, territory, insular possession thereof,
15 and any area subject to the legal authority of the United
16 States of America.

17 (ss) "Ultimate user" means a person who lawfully possesses
18 a controlled substance for his own use or for the use of a
19 member of his household or for administering to an animal owned
20 by him or by a member of his household.

21 (Source: P.A. 93-596, eff. 8-26-03; 93-626, eff. 12-23-03;
22 94-556, eff. 9-11-05.)

23 (720 ILCS 570/103) (from Ch. 56 1/2, par. 1103)

24 Sec. 103. Scope of Act. Nothing in this Act limits the
25 lawful authority granted by the Medical Practice Act of 1987,

1 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
2 ~~Act~~, or the Pharmacy Practice Act of 1987.

3 (Source: P.A. 90-742, eff. 8-13-98.)

4 (720 ILCS 570/303.05)

5 Sec. 303.05. Mid-level practitioner registration.

6 (a) The Department of Professional Regulation shall
7 register licensed physician assistants and licensed advanced
8 practice nurses to prescribe and dispense Schedule III, IV, or
9 V controlled substances under Section 303 and euthanasia
10 agencies to purchase, store, or administer euthanasia drugs
11 under the following circumstances:

12 (1) with respect to physician assistants or advanced
13 practice nurses,

14 (A) the physician assistant or advanced practice
15 nurse has been delegated prescriptive authority by a
16 physician licensed to practice medicine in all its
17 branches in accordance with Section 7.5 of the
18 Physician Assistant Practice Act of 1987 or Section
19 65-40 of the Nurse Practice Act ~~Section 15-20 of the~~
20 ~~Nursing and Advanced Practice Nursing Act~~; and

21 (B) the physician assistant or advanced practice
22 nurse has completed the appropriate application forms
23 and has paid the required fees as set by rule; or

24 (2) with respect to euthanasia agencies, the
25 euthanasia agency has obtained a license from the

1 Department of Professional Regulation and obtained a
2 registration number from the Department.

3 (b) The mid-level practitioner shall only be licensed to
4 prescribe those schedules of controlled substances for which a
5 licensed physician has delegated prescriptive authority,
6 except that a euthanasia agency does not have any prescriptive
7 authority.

8 (c) Upon completion of all registration requirements,
9 physician assistants, advanced practice nurses, and euthanasia
10 agencies shall be issued a mid-level practitioner controlled
11 substances license for Illinois.

12 (Source: P.A. 93-626, eff. 12-23-03.)

13 Section 200. The Methamphetamine Control and Community
14 Protection Act is amended by changing Section 110 as follows:

15 (720 ILCS 646/110)

16 Sec. 110. Scope of Act. Nothing in this Act limits any
17 authority or activity authorized by the Illinois Controlled
18 Substances Act, the Medical Practice Act of 1987, the Nurse
19 Practice Act ~~Nursing and Advanced Practice Nursing Act~~, the
20 Pharmacy Practice Act of 1987, the Illinois Dental Practice
21 Act, the Podiatric Medical Practice Act of 1987, or the
22 Veterinary Medicine and Surgery Practice Act of 2004. Nothing
23 in this Act limits the authority or activity of any law
24 enforcement officer acting within the scope of his or her

1 employment.

2 (Source: P.A. 94-556, eff. 9-11-05.)

3 Section 205. The Methamphetamine Precursor Control Act is
4 amended by changing Section 50 as follows:

5 (720 ILCS 648/50)

6 Sec. 50. Scope of Act.

7 (a) Nothing in this Act limits the scope, terms, or effect
8 of the Methamphetamine Control and Community Protection Act.

9 (b) Nothing in this Act limits the lawful authority granted
10 by the Medical Practice Act of 1987, the Nurse Practice Act
11 ~~Nursing and Advanced Practice Nursing Act~~, or the Pharmacy
12 Practice Act of 1987.

13 (c) Nothing in this Act limits the authority or activity of
14 any law enforcement officer acting within the scope of his or
15 her employment.

16 (Source: P.A. 94-694, eff. 1-15-06.)

17 Section 210. The Good Samaritan Act is amended by changing
18 Sections 34 and 40 as follows:

19 (745 ILCS 49/34)

20 Sec. 34. Advanced practice nurse; exemption from civil
21 liability for emergency care. A person licensed as an advanced
22 practice nurse under the Nurse Practice Act ~~Nursing and~~

1 ~~Advanced Practice Nursing Act~~ who in good faith provides
2 emergency care without fee to a person shall not be liable for
3 civil damages as a result of his or her acts or omissions,
4 except for willful or wanton misconduct on the part of the
5 person in providing the care.

6 (Source: P.A. 90-742, eff. 8-13-98.)

7 (745 ILCS 49/40)

8 Sec. 40. Nurses; exemption from civil liability for
9 services performed without compensation.

10 (a) No person licensed as a professional nurse or as a
11 practical nurse under the Nurse Practice Act ~~Nursing and~~
12 ~~Advanced Practice Nursing Act~~ who, without compensation,
13 renders nursing services shall be liable, and no cause of
14 action may be brought, for damages resulting from an act or
15 omission in rendering such services unless the act or omission
16 involved willful or wanton misconduct.

17 (b) (Blank).

18 (c) As used in this Section "entity" means a
19 proprietorship, partnership, association or corporation,
20 whether or not operated for profit.

21 (d) Nothing in this Section is intended to bar any cause of
22 action against an entity or change the liability of an entity
23 which arises out of an act or omission of any person exempt
24 from liability for negligence under this Section.

25 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

1 Section 220. The Unemployment Insurance Act is amended by
2 changing Section 230 as follows:

3 (820 ILCS 405/230) (from Ch. 48, par. 340)

4 Sec. 230. The term "employment" shall not include service
5 performed after 1971:

6 (A) In the employ of a hospital, if such service is
7 performed by a patient of the hospital.

8 (B) As a student nurse in the employ of a hospital or a
9 nurses' training school by an individual who is enrolled
10 and is regularly attending classes in a nurses' training
11 school approved pursuant to the Nurse Practice Act ~~Nursing~~
12 ~~and Advanced Practice Nursing Act.~~

13 (C) As an intern in the employ of a hospital by an
14 individual who has completed a 4 years' course in a medical
15 school chartered or approved pursuant to State law.

16 (Source: P.A. 90-742, eff. 8-13-98.)

17 (110 ILCS 915/Act rep.)

18 Section 225. The Baccalaureate Assistance Law for
19 Registered Nurses is repealed.

20 (225 ILCS 65/5-17 rep.)

21 (225 ILCS 65/15-5 rep.)

22 (225 ILCS 65/15-35 rep.)

1 (225 ILCS 65/15-50 rep.)

2 (225 ILCS 65/20-2 rep.)

3 (225 ILCS 65/20-5 rep.)

4 (225 ILCS 65/20-10 rep.)

5 (225 ILCS 65/20-15 rep.)

6 Section 230. The Nursing and Advanced Practice Nursing Act
7 is amended by repealing Sections 5-17, 15-5, 15-35, 15-50,
8 20-2, 20-5, 20-10, and 20-15.

9 Section 999. Effective date. This Act takes effect upon
10 becoming law, except that the provisions changing Section 8.1
11 of the Illinois Dental Practice Act take effect January 1,
12 2008.