HB1052 Engrossed

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 Medical Practice Act of 1987 is amended by 5 changing Section 54.5 as follows:

6 (225 ILCS 60/54.5)

7

(Section scheduled to be repealed on December 31, 2013)

8 Sec. 54.5. Physician delegation of authority to physician 9 assistants and advanced practice nurses.

(a) Physicians licensed to practice medicine in all its 10 11 branches may delegate care and treatment responsibilities to a physician assistant under guidelines in accordance with the 12 13 requirements of the Physician Assistant Practice Act of 1987. A 14 physician licensed to practice medicine in all its branches may enter into supervising physician agreements with no more than 5 15 16 physician assistants as set forth in subsection (a) of Section 17 7 of the Physician Assistant Practice Act of 1987.

(b) A physician licensed to practice medicine in all its branches in active clinical practice may collaborate with an advanced practice nurse in accordance with the requirements of the Nurse Practice Act. Collaboration is for the purpose of providing medical consultation, and no employment relationship is required. A written collaborative agreement shall conform to HB1052 Engrossed - 2 - LRB098 05035 MGM 35066 b

the requirements of Section 65-35 of the Nurse Practice Act. The written collaborative agreement shall be for services the collaborating physician generally provides <u>or may provide in</u> to his or her patients in the normal course of clinical medical practice. A written collaborative agreement shall be adequate with respect to collaboration with advanced practice nurses if all of the following apply:

8 (1) The agreement is written to promote the exercise of 9 professional judgment by the advanced practice nurse 10 commensurate with his or her education and experience. The 11 agreement need not describe the exact steps that an 12 advanced practice nurse must take with respect to each specific condition, disease, or symptom, but must specify 13 14 those procedures that require a physician's presence as the 15 procedures are being performed.

16 (2) Practice guidelines and orders are developed and 17 approved jointly by the advanced practice nurse and 18 collaborating physician, as needed, based on the practice 19 of the practitioners. Such guidelines and orders and the 20 patient services provided thereunder are periodically 21 reviewed by the collaborating physician.

(3) The advance practice nurse provides services the
collaborating physician generally provides <u>or may provide</u>
<u>in to his or her patients in the normal course of clinical</u>
<u>medical practice, except as set forth in subsection (b-5)</u>
of this Section. With respect to labor and delivery, the

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1 2 collaborating physician must provide delivery services in order to participate with a certified nurse midwife.

3 (4) The collaborating physician and advanced practice
4 nurse consult at least once a month to provide
5 collaboration and consultation.

6 (5) Methods of communication are available with the 7 collaborating physician in person or through 8 telecommunications for consultation, collaboration, and 9 referral as needed to address patient care needs.

10 (6) The agreement contains provisions detailing notice 11 for termination or change of status involving a written 12 collaborative agreement, except when such notice is given 13 for just cause.

14 (b-5) anesthesiologist or physician licensed An to 15 practice medicine in all its branches may collaborate with a 16 certified registered nurse anesthetist in accordance with 17 Section 65-35 of the Nurse Practice Act for the provision of anesthesia services. With 18 respect to the provision of 19 anesthesia services, the collaborating anesthesiologist or 20 physician shall have training and experience in the delivery of services 21 anesthesia consistent with Department rules. 22 Collaboration shall be adequate if:

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

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(2) for anesthesia services, the anesthesiologist or 1 physician participates through discussion of and agreement 2 3 with the anesthesia plan and is physically present and available on the premises during the delivery of anesthesia 4 5 services for diagnosis, consultation, and treatment of emergency medical conditions. Anesthesia services in a 6 7 hospital shall be conducted in accordance with Section 10.7 8 of the Hospital Licensing Act and in an ambulatory surgical 9 treatment center in accordance with Section 6.5 of the 10 Ambulatory Surgical Treatment Center Act.

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

14 (c) The supervising physician shall have access to the 15 medical records of all patients attended by a physician 16 assistant. The collaborating physician shall have access to the 17 medical records of all patients attended to by an advanced 18 practice nurse.

19 (d) (Blank).

(e) A physician shall not be liable for the acts or omissions of a physician assistant or advanced practice nurse solely on the basis of having signed a supervision agreement or guidelines or a collaborative agreement, an order, a standing medical order, a standing delegation order, or other order or guideline authorizing a physician assistant or advanced practice nurse to perform acts, unless the physician has reason HB1052 Engrossed - 5 - LRB098 05035 MGM 35066 b

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

4 (f) A collaborating physician may, but is not required to, 5 delegate prescriptive authority to an advanced practice nurse 6 as part of a written collaborative agreement, and the 7 delegation of prescriptive authority shall conform to the 8 requirements of Section 65-40 of the Nurse Practice Act.

9 (g) A supervising physician may, but is not required to, 10 delegate prescriptive authority to a physician assistant as 11 part of a written supervision agreement, and the delegation of 12 prescriptive authority shall conform to the requirements of 13 Section 7.5 of the Physician Assistant Practice Act of 1987.

(h) For the purposes of this Section, "generally provides 14 or may provide in his or her clinical medical practice" means 15 16 categories of care or treatment, not specific tasks or duties, 17 that the physician provides individually or through delegation to other persons so that the physician has the experience and 18 19 ability to provide collaboration and consultation. This 20 definition shall not be construed to prohibit an advanced practice nurse from providing primary health treatment or care 21 22 within the scope of his or her training and experience, 23 including, but not limited to, health screenings, patient 24 histories, physical examinations, women's health examinations, 25 or school physicals that may be provided as part of the routine 26 practice of an advanced practice nurse or on a volunteer basis.

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1	(Source: P.A.	96-618,	eff.	1-1-10;	97-358,	eff.	8-12-11;
2	97-1071, eff. 8-24-12.)						

3 Section 10. The Nurse Practice Act is amended by changing 4 Section 65-35 as follows:

5 (225 ILCS 65/65-35) (was 225 ILCS 65/15-15)

6 (Section scheduled to be repealed on January 1, 2018)

7 Sec. 65-35. Written collaborative agreements.

8 (a) A written collaborative agreement is required for all 9 advanced practice nurses engaged in clinical practice, except 10 for advanced practice nurses who are authorized to practice in 11 a hospital or ambulatory surgical treatment center.

12 (a-5) If an advanced practice nurse engages in clinical 13 practice outside of a hospital or ambulatory surgical treatment 14 center in which he or she is authorized to practice, the 15 advanced practice nurse must have a written collaborative 16 agreement.

17 (b) A written collaborative agreement shall describe the working relationship of the advanced practice nurse with the 18 19 collaborating physician or podiatrist and shall authorize the 20 categories of care, treatment, or procedures to be performed by the advanced practice nurse. A collaborative agreement with a 21 dentist must be in accordance with subsection (c-10) of this 22 23 Section. Collaboration does not require an employment 24 relationship between the collaborating physician and advanced HB1052 Engrossed - 7 - LRB098 05035 MGM 35066 b

1 practice nurse. Absent an employment relationship, an 2 agreement may not restrict the categories of patients -or third-party payment sources accepted by the advanced practice 3 nurse. Collaboration means the relationship under which an 4 5 advanced practice nurse works with a collaborating physician or podiatrist in an active clinical practice to deliver health 6 7 care services in accordance with (i) the advanced practice 8 nurse's training, education, and experience and (ii) 9 collaboration and consultation as documented in a jointly 10 developed written collaborative agreement.

11 The agreement shall promote the exercise of professional 12 judgment by the advanced practice nurse commensurate with his 13 or her education and experience. The services to be provided by 14 the advanced practice nurse shall be services that the collaborating physician or podiatrist is authorized to and 15 16 generally provides or may provide to his or her patients in the 17 normal course of his or her clinical medical or podiatric practice, except as set forth in subsections (b-5) or 18 19 subsection (c-5) of this Section. The agreement need not 20 describe the exact steps that an advanced practice nurse must take with respect to each specific condition, disease, or 21 22 symptom but must specify which authorized procedures require 23 the presence of the collaborating physician or podiatrist as are being performed. 24 procedures The collaborative the 25 relationship under an agreement shall not be construed to 26 require the personal presence of a physician or podiatrist at

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the place where services are rendered. Methods of communication shall be available for consultation with the collaborating physician or podiatrist in person or by telecommunications in accordance with established written guidelines as set forth in the written agreement.

6 (b-5) Absent an employment relationship, a written 7 collaborative agreement may not (1) restrict the categories of 8 patients of an advanced practice nurse within the scope of the 9 advanced practice nurses training and experience, (2) limit 10 third party payors or government health programs, such as the 11 medical assistance program or Medicare with which the advanced 12 practice nurse contracts, or (3) limit the geographic area or 13 practice location of the advanced practice nurse in this State.

14 (c) Collaboration and consultation under all collaboration 15 agreements shall be adequate if a collaborating physician or 16 podiatrist does each of the following:

17 (1) Participates in the joint formulation and joint 18 approval of orders or guidelines with the advanced practice 19 nurse and he or she periodically reviews such orders and 20 the services provided patients under such orders in 21 accordance with accepted standards of medical practice or 22 podiatric practice and advanced practice nursing practice.

(2) Provides collaboration and consultation with the
 advanced practice nurse at least once a month. In the case
 of anesthesia services provided by a certified registered
 nurse anesthetist, an anesthesiologist, physician,

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dentist, or podiatrist must participate through discussion 1 2 of and agreement with the anesthesia plan and remain 3 physically present and available on the premises during the delivery of anesthesia services for diagnosis, 4 5 consultation, and treatment of emergency medical 6 conditions.

7 (3) available through telecommunications Is for 8 medical problems, complications, consultation on or 9 emergencies or patient referral. In the case of anesthesia 10 services provided by a certified registered nurse 11 anesthetist, an anesthesiologist, physician, dentist, or 12 podiatrist must participate through discussion of and 13 agreement with the anesthesia plan and remain physically 14 present and available on the premises during the delivery 15 of anesthesia services for diagnosis, consultation, and 16 treatment of emergency medical conditions.

The agreement must contain provisions detailing notice for termination or change of status involving a written collaborative agreement, except when such notice is given for just cause.

(c-5) A certified registered nurse anesthetist, 21 who 22 provides anesthesia services outside of a hospital or 23 ambulatory surgical treatment center shall enter into a written 24 collaborative agreement with an anesthesiologist or the 25 physician licensed to practice medicine in all its branches or 26 the podiatrist performing the procedure. Outside of a hospital HB1052 Engrossed - 10 - LRB098 05035 MGM 35066 b

1 ambulatory surgical treatment center, the certified or 2 registered nurse anesthetist may provide only those services that the collaborating podiatrist is authorized to provide 3 pursuant to the Podiatric Medical Practice Act of 1987 and 4 5 rules adopted thereunder. A certified registered nurse 6 anesthetist may select, order, and administer medication, including controlled substances, and apply appropriate medical 7 8 for delivery of anesthesia services under devices the 9 anesthesia plan agreed with by the anesthesiologist or the 10 operating physician or operating podiatrist.

11 (c-10) A certified registered nurse anesthetist who 12 provides anesthesia services in a dental office shall enter 13 written collaborative into а agreement with an 14 anesthesiologist or the physician licensed to practice 15 medicine in all its branches or the operating dentist 16 performing the procedure. The agreement shall describe the 17 working relationship of the certified registered nurse anesthetist and dentist and shall authorize the categories of 18 19 care, treatment, or procedures to be performed by the certified 20 registered nurse anesthetist. In a collaborating dentist's 21 office, the certified registered nurse anesthetist may only 22 provide those services that the operating dentist with the 23 appropriate permit is authorized to provide pursuant to the Illinois Dental Practice Act and rules adopted thereunder. For 24 anesthesia services, an anesthesiologist, physician, 25 or 26 operating dentist shall participate through discussion of and HB1052 Engrossed - 11 - LRB098 05035 MGM 35066 b

agreement with the anesthesia plan and shall remain physically 1 2 present and be available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment 3 of emergency medical conditions. A certified registered nurse 4 5 anesthetist may select, order, and administer medication, 6 including controlled substances, and apply appropriate medical 7 devices for delivery of anesthesia services under the 8 anesthesia plan agreed with by the operating dentist.

9 (d) A copy of the signed, written collaborative agreement 10 must be available to the Department upon request from both the 11 advanced practice nurse and the collaborating physician or 12 podiatrist.

13 (e) Nothing in this Act shall be construed to limit the delegation of tasks or duties by a physician to a licensed 14 15 practical nurse, a registered professional nurse, or other 16 persons in accordance with Section 54.2 of the Medical Practice 17 Act of 1987. Nothing in this Act shall be construed to limit the method of delegation that may be authorized by any means, 18 19 including, but not limited to, oral, written, electronic, 20 standing orders, protocols, guidelines, or verbal orders.

21 (f) An advanced practice nurse shall inform each 22 collaborating physician, dentist, or podiatrist of all 23 collaborative agreements he or she has signed and provide a copy of these to any collaborating physician, dentist, or 24 25 podiatrist upon request.

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(g) For the purposes of this Act, "generally provides <u>or</u>

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may provide in to his or her patients in the normal course of 1 2 his or her clinical medical practice" means categories of care 3 or treatment services, not specific tasks or duties, the physician or podiatrist routinely provides individually or 4 5 through delegation to other persons so that the physician or 6 podiatrist has the experience and ability to provide 7 collaboration and consultation. This definition shall not be 8 construed to prohibit an advanced practice nurse from providing 9 primary health treatment or care within the scope of his or her training and experience, including, but not limited to, health 10 11 screenings, patient histories, physical examinations, women's 12 health examinations, or school physicals that may be provided as part of the routine practice of an advanced practice nurse 13 14 or on a volunteer basis.

For the purposes of this Act, "generally provides to his or her patients in the normal course of his or her clinical podiatric practice" means services, not specific tasks or duties, that the podiatrist routinely provides individually or through delegation to other persons so that the podiatrist has the experience and ability to provide collaboration and consultation.

22 (Source: P.A. 96-618, eff. 1-1-10; 97-358, eff. 8-12-11.)