

House Research Act Summary

CHAPTER: 235

SESSION: 2014 Regular Session

TOPIC: Advanced practice registered nurses

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Overview

This bill modifies and updates the definitions of advance practice registered nurse and the various specialty and subspecialties within this licensure category. It repeals “collaborative management,” and updates the professional and educational qualifications for applicants for licensure as an APRN. It provides APRNs with authority to prescribe pharmacologic and nonpharmacologic therapies; order, perform, and supervise diagnostic studies; and adds them to the definition of primary care provider.

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- 1** **Advanced practice registered nurse.** Amends § 148.171, subd. 3. For licensure as an APRN, the individual must be certified by a national nursing organization that is endorsed by a national professional nursing organization, be independent from the national nursing organization, administer a certification program that is psychometrically sound and meets national standards, and require periodic recertification.
- 2** **Certification.** Amends § 148.171, by adding subd. 4a. Defines “certification” as formal recognition of knowledge, skills, and experience demonstrated by achieving standards identified by the National Professional Nursing Organization and acceptable to the board.
- 3** **Clinical nurse specialist practice.** Amends § 148.171, subd. 5. Redefines “clinical nurse specialist practice.” Included in the practice of a clinical nurse specialist are diagnosing and treating health and illness; prescribing pharmacologic and nonpharmacologic therapies; ordering, performing, supervising, and interpreting diagnostic studies; and consulting with, collaborating with, or referring to other health care providers as warranted by the patient’s needs.

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- 4 Collaboration.** Amends § 148.171, by adding subd. 6a. Defines “collaboration” as a process between two or more health care professionals in which they work together to meet the health needs of the patient.
- 5 Nurse.** Amends § 148.171, subd. 9. Makes a technical change.
- 6 Nurse-midwife practice.** Amends § 148.171, subd. 10. Redefines “nurse-midwife practice.” Included in the practice of a nurse-midwife are managing, diagnosing, treating women’s primary health care during and after pregnancy, and gynecological care of women; ordering performing, supervising, and interpreting diagnostic studies; prescribing pharmacologic and nonpharmacologic therapies; and consulting with, collaborating with, and referring to other health care providers.
- 7 Nurse practitioner practice.** Amends § 148.171, subd. 10. Redefines “nurse practitioner practice.” Included in the practice of a nurse practitioner are diagnosing, treating, and facilitating patients’ management of their acute and chronic illnesses; ordering, performing, supervising, and interpreting diagnostic studies; prescribing pharmacologic and nonpharmacologic therapies; and consulting with, collaborating with, or referring to other health care providers.
- 8 Population focus.** Amends § 148.171, by adding subd. 12a. Defines this term as the categories of patients for which an APRN has the educational preparation to provide care. Lists the six categories of population foci.
- 9 Practice of advanced practice registered nursing.** Amends § 148.171, subd 13. Redefines the practice of an advanced practice registered nurse.
- Paragraph (a) provides that APRNs have an expanded scope of nursing as defined by the national professional nursing organizations specific to the practice as a clinical nurse specialist, nurse-midwife, nurse practitioner, or registered nurse anesthetist. Adds that the scope includes performing advanced assessment, diagnosis, prescribing, and ordering. It includes functioning as a primary care provider.
- Paragraph (b) requires APRNs to be accountable to their patients, for recognizing limits of knowledge and experience, and for planning for the management of situations beyond their expertise.
- 10 Prescribing.** Amends § 148.171, subd. 16. Clarifies that prescribing does not include recommending or administering a drug for anesthesia care and related services by a certified register nurse anesthetist.
- 11 Prescription.** Amends § 148.171, subd. 17. Adds that the requirements for prescriptions from the pharmacy practice act, chapter 151, apply to APRNs when writing a prescription for a drug.
- 12 Primary care provider.** Amends § 148.171, by adding subd. 17a. Defines a primary care provider as a licensed health care provider who is the first point of care for meeting the

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health needs and providing continuing care.

- 13 Registered nurse anesthetist practice.** Amends § 148.171, subd. 21. Paragraph (a) adds that registered nurse anesthetists are authorized to order, perform, supervise, and interpret diagnostic studies; prescribe pharmacologic and nonpharmacologic therapies; and consult with, collaborate with, and refer to other health care providers.

Paragraph (b) allows a registered nurse anesthetist to perform nonsurgical therapies for acute and chronic pain symptoms upon referral and in collaboration with a licensed physician. Requires the therapies to be provided at the same licensed health care facility as the physician.

Paragraph (c) requires a registered nurse anesthetist to have a written prescribing agreement with a physician for purposes of providing nonsurgical pain therapies.

- 14 Roles of advanced practice registered nurses.** Amends § 148.171, by adding subd. 23. Defines “role” as one of the four recognized APRN roles. Lists the four roles.

- 15 Membership.** Amends § 148.181, subd. 1. Clarifies that for appointment as a member of the board of nursing, an APRN must be licensed and have a national certification or recertification.

- 16 Powers.** Amends § 148.191, subd. 2. Makes a technical change.

- 17 Advanced practice registered nurse licensure.** Amends § 148.211, by adding subd. 1a.

Paragraph (a) provides that beginning January 1, 2015, all APRNs must be licensed under this section.

Paragraph (b) requires an applicant to apply in the format designated by the board and pay the required fee.

Paragraph (c) lists the licensure requirements.

- 18 Advanced practice registered nurse grandfather provision.** Amends § 148.211, by adding subd. 1b.

Paragraph (a) requires the board to issue a license to an applicant who does not meet the educational requirements in subdivision 1a if the applicant is recognized by the board to practice as an APRN in the state on July 1, 2014; submits an application and fee; and meets all of the requirements of subdivision 1a, paragraph (c), except the education requirement.

Paragraph (b) provides that an APRN licensed under this subdivision shall maintain the practice privileges provided to APRNs under this chapter.

- 19 Postgraduate practice.** Amends § 148.211, by adding subd. 1c. Requires a nurse practitioner or clinical nurse specialist who qualifies for licensure as an APRN to practice at least 2,080 hours under a collaborative management agreement in a hospital or integrated setting in which APRNs and physicians provide patient care. Requires the physician, APRN

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and the nurse practitioner or clinical nurse specialist to have experience providing care to patients with the same or similar medical conditions.

- 20 Licensure by endorsement.** Amends § 148.211, subd. 2. In addition to existing requirements, adds that effective January 1, 2015, an APRN seeking licensure under this subdivision must have national certification or recertification, and be in compliance with the educational requirements that were in effect in Minnesota at the time the APRN completed the advanced nursing education program.
- 21 Registration.** Amends § 148.231, subd. 1. Makes technical changes and adds that an applicant for renewal of an APRN license must provide evidence of certification or recertification.
- 22 Failure to register.** Amends § 148.231, subd. 4. Makes a technical change.
- 23 Reregistration.** Amends § 148.231, subd. 5. Makes a technical change.
- 24 Advanced practice registered nurse.** Amends § 148.233, subd. 2. Paragraph (a) limits the use of the title “advanced practice registered nurse” to those individuals currently licensed to practice advanced practice registered nursing in this state.
- Paragraph (b) indicates the abbreviations that are to be used by licensed APRNs.
- Paragraph (c) requires the APRN to provide clear identification of the correct APRN designation.
- 25 State boundaries consideration.** Amends § 148.234. Allows a nurse to provide patient care at the direction of an APRN. Current law allows this at the direction of a physician, podiatrist, or dentist. Continues the prohibition against providing care that is illegal in this state.
- 26 Diagnosis, prescribing, and ordering.** Amends § 148.235, by adding subd. 7a. Authorizes APRNs to diagnose, prescribe, and institute therapies or referrals of patients to health care providers; prescribe, administer, and dispense over-the-counter, legend, and controlled substances; and plan and initiate a therapeutic regimen.
- 27 Drug Enforcement Administration requirements.** Amends § 148.235, by adding subd. 7b. Paragraph (a) requires APRNs to comply with federal FDA requirements related to controlled substances and file all of the nurse’s DEA registrations and numbers with the board.
- Paragraph (b) instructs the board to maintain current records of APRNs with DEA registration and numbers.
- 28 Initial approval.** Amends § 148.251, subd. 1. Makes a technical change.
- 29 Grounds listed.** Amends § 148.261, subd. 1. Makes technical changes. Strikes language and a cross-reference to a statute being repealed in this bill.

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- 30** **Forms of disciplinary action.** Amends § 148.262, subd. 1. Makes a technical change.
- 31** **Automatic suspension.** Amends § 148.262, subd. 2. Makes a technical change.
- 32** **Reissuance.** Amends § 148.262, subd. 4. Makes a technical change by adding “advanced practice.”
- 33** **Exemptions.** Amends Minnesota Statutes 2013 Supplement, § 148.271. Makes technical changes.
- 34** **Violations described.** Amends § 148.281, subd. 1. Makes technical changes and strikes obsolete language.
- 35** **Penalty; advanced practice registered nurses.** Amends § 148.281, by adding subd. 3. Establishes a penalty fee for an APRN who continues to practice with a current license or certification of \$200 for the first month or part of a month and \$100 for each subsequent month or part of a month.
- 36** **Unauthorized practice of professional, advanced practice registered, and practical nursing.** Amends § 148.283. Makes technical changes.
- 37** **Advanced practice nurse advisory council.** Creates § 148.2841.
- Subd. 1. Membership.** Instructs the Board of Nursing to convene the advisory council. Lists the composition of the council.
- Subd. 2. Terms.** Provides that each member is appointed for a two-year term, with no member serving more than two consecutive terms.
- Subd. 3. Chair.** Requires the chair to rotate every two years.
- Subd. 4. Duties.** Lists the duties of the advisory council.
- Subd. 5. Meetings.** Requires meetings to be held at least once every six months.
- Subd. 6. Compensation.** Requires the members to receive reimbursement for expenses as allowed under section 15.059, subd. 3.
- Subd. 7. Removal; vacancies.** Allows members to be removed and vacancies to be filled under section 15.059, subd. 4.
- Subd. 8. Sunset.** Provides that this section sunsets February 2, 2022.
- 38** **Practitioner.** Amends § 151.01, subd. 23. Adds APRNs to the list of practitioners with general prescribing authority, such as physicians. Strikes APRNs from the list of practitioners who do have limitations imposed on prescribing.
- 39** **Health care providers may prescribe.** Amends § 152.12. Adds APRNs to the list of providers who may prescribe, dispense, and administer schedule II to V controlled

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substances.

- 40 Initial appointments and meeting.** Requires the Board of Nursing to make initial appointments to the Advanced Practice Nurse Advisory Council by February 1, 2015. Requires the first meeting of the council to be convened by March 1, 2015.
- 41 Appropriation.** Appropriates funds from the State Government Special Revenue fund to the Board of Nursing to implement the licensing requirements in this act.
- 42 Repealer.** Repeals §§ 148.171, subd. 6 (definition of “collaborative management”); 148.235 (prescribing drugs and therapeutic devices), subds. 1 (certified nurse-midwives), 2 (certified nurse practitioners), 2a (certified registered nurse anesthetists), 4 (certified clinical nurse specialists in psychiatric and mental health nursing), 4a (other certified clinical nurse specialists), 4b (dispensing authority), 6 (standards for written agreements; review and filing), and 7 (federal registration); 148.243, subd. 8 (fee for DEA verification for APRNs); and 148.284 (certification of advanced practice registered nurses).
- 43 Effective date.** Provides that sections 1 to 40 are effective January 1, 2015.