

Subject Advanced practice registered nurses

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Overview

In Minnesota statutes, physicians are specifically given certain rights, duties, and protections and the authority to perform certain acts. This bill adds advanced practice registered nurses (APRNs) to many of those statutes, or gives the rights, duties, and authority in statutes to health care providers which includes APRNs. In 2017 a law adding APRNs to certain statutes was enacted as Laws 2017, chapter 59.

An APRN is a nurse licensed as an APRN by the Board of Nursing and certified by a national nurse certification organization to practice as a clinical nurse specialist, nurse anesthetist, nurse-midwife, or nurse practitioner. According to the Board of Nursing, an APRN is authorized to perform acts of advanced assessment, diagnosis, prescribing, and ordering. Certified nurse midwives and certified registered nurse anesthetists are not required to have a collaborative management agreement or a written prescribing agreement with another provider in order to practice, except for certified registered nurse anesthetists who provide nonsurgical therapies for acute or chronic pain. Certified nurse practitioners and clinical nurse specialists beginning practice after July 2014 must practice for at least 2,080 hours in a collaborative management setting in a hospital or clinical setting where APRNs and physicians work together.

The following table lists the statutory sections and subjects of the statutes amended in this bill. In each section, the bill adds APRN, APRN clinic, a specific type of APRN, or a health care provider that includes an APRN, to existing language that gives physicians certain rights, duties, and protections, or authority to perform certain acts. In a few instances, the term APRN replaces the term nurse practitioner.

Summary

Section	Statute Amended	Description
1	62D.09, subd. 1	HMO marketing materials; requires disclosure of services that can only be provided by referral from certain providers
2	62E.06, subd. 1	Requirements for health plan certification as a number three plan, to provide that certain services and prescriptions are covered when prescribed by certain providers, and certain services are not covered unless specific criteria are met as determined by certain providers
3	62J.17, subd. 4a	Lists types of health care facilities required to annually report to the commissioner of health on major spending commitments
4	62J.23, subd. 2	Certain conduct does not violate federal antikickback laws
5	62J.495, subd. 1a	Definition of qualified electronic health record, in section requiring hospitals and health care providers to have in place interoperable health record system
6	62J.52, subd. 2	Certain services must be billed using the uniform billing form CMS 1500
7	62J.823, subd. 3	Certain participants in the health care system may request a written estimate of a cost of a specific service or stay from a hospital or outpatient surgical center
8	62Q.184, subd. 1	Requirements for step therapy protocol
9 - 10	62Q.43, subds. 1, 2	Access requirements for closed-panel health plan
11	62Q.54	Referrals for residents of health care facilities to skilled nursing unit or other appropriate care setting
12	62Q.57, subd. 1	Designation of primary care provider by enrollee
13	62Q.73, subd. 7	External review of adverse determination by health plan company; evidence that must be considered
14	62Q.733, subd. 3	Provider contracts with a health plan company (definition of health care provider)

Section	Statute Amended	Description
15	62Q.74, subd. 1	Network shadow contracting by health plan companies prohibited
16	62S.08, subd. 3	Mandatory format outline for long-term care coverage
17	62S.20, subd. 5b	Required disclosure provisions for long-term care insurance policies; benefit triggers
18	62S.21, subd. 2	Long-term care insurance; prohibition against post-claims underwriting; information regarding medications
19	62S.268, subd. 1	Long-term care insurance; additional standards for benefit triggers
20	144.3345	Eligibility for interconnected electronic health records grants from commissioner of health
21	144.3352	Hepatitis B maternal carrier data
22	144.34	Making reports to the commissioner of health of occupational diseases
23 - 25	144.441, subds. 4, 5; 144.442, subd. 1	Tuberculosis screening in schools and testing in school clinics
26 - 33	144.4803, subds. 1, 1a, 4, 10; 144.4806; 144.4807, subds. 1, 2, 4	Tuberculosis health threat act
34	144.50, subd. 2	Health care setting not included in definition of hospital for purposes of licensure by commissioner of health
35	144.55, subd. 2	Health care setting not included in definition of outpatient surgical center for purposes of licensure by commissioner of health
36	144.55, subd. 6	Commissioner of health authorized to take action against facility license for certain conduct by facility employees
37	144.6501, subd. 7	Nursing home admission contract; consent to treatment clause

Section	Statute Amended	Description
38 - 46	144.651, subs. 7, 8, 9, 10, 12, 14, 31, 33; 144.652, subd. 2	Health care bill of rights for patients and residents of certain facilities; provider identity, relationship with other health services, information about treatment, participation in planning treatment, right to refuse care, freedom from maltreatment, isolation and restraints, exception to compliance with health care bill of rights in emergencies
47	144.69	Commissioner's ability to interview patient named in a report to the cancer surveillance system
48 - 52	144.7402, subd. 2; 144.7406, subd. 2; 144.7407, subd. 2; 144.7414, subd. 2; 144.7415, subd. 2	Protocols that apply when emergency medical services personnel are exposed to a bloodborne pathogen
53	144.9502, subd. 4	Lead poisoning prevention act; content of blood lead analysis report
54 - 55	144.966, subs. 3, 6	Early hearing detection and intervention program operated by a hospital; program requirements, civil and criminal immunity
56	144A.135	Appeal of transfer or discharge of a resident of a nursing home or boarding care home
57 - 60	144A.161, subs. 5, 5a, 5e, 5g	Nursing home or boarding care home resident relocation requirements
61 - 63	144A.75, subs. 3, 6; 144.752, subd. 1	Hospice provider licensing
64	145.853, subd. 5	Uniform duties to disabled persons; duty of law enforcement officer
65	145.892, subd. 3	Maternal and child nutrition act; definition of pregnant woman
66	145.94, subd. 2	Exposure to hazardous substances; disclosure of information
67	145B.13	Living wills; decision to administer, withdraw, or withhold medical treatment
68 - 72	145C.02; 145C.05, subd. 2; 145C.06;	Health care directives

Section	Statute Amended	Description
	145C.07, subd. 1; 145C.16	
73	148.6438, subd. 1	Occupational therapy; prior authorization
74	151.19, subd. 4	Licensure of certain health care providers to dispense drugs
75	151.21, subd. 4a	Pharmacy signage regarding substitution of prescribed drug with generic equivalent
76	152.32, subd. 3	Medical cannabis discrimination against patients prohibited
77	254A.143, subd. 8	Family adult day services licensing; nutritional services
78	245A.1435	Reduction of risk of SIDS in DHS-licensed programs
79 – 80	245C.02, subd. 18; 245C.04, subd. 1	DHS background study requirements; definition of serious maltreatment, background studies for licensed programs
81 – 84	245D.02, subd. 11; 245D.11, subd. 2; 245D.22, subd. 7; 245D.25, subd. 2	Home and community-based services requirements; definition of incident, health and welfare policies, telephone and posted numbers, special dietary needs
85 – 89	245G.08, subds. 2, 3, 5; 245G.21, subds. 2, 3	Chemical dependency licensed treatment facilities; procedures for medical intervention, standing order protocols, medication administration, visitors, client property management
90	245H.11	Reporting requirements for certified license-exempt child care centers
91 – 95	246.711, subd. 2; 246.715, subd. 2; 246.716, subd. 2; 246.721; 246.722	Blood-borne pathogen protocols for employees of a secure treatment facility exposed to a blood-borne pathogen
96	251.043, subd. 1	Care of persons with tuberculosis if persons are employees at certain facilities
97 – 99	252A.02, subd. 12; 252A.04, subd. 2; 252A.20, subd. 1	Protection of persons with developmental disabilities; definition of comprehensive evaluation, medication and treatment, witness and attorney fees

Section	Statute Amended	Description
100 - 103	253B.03, subd. 4; 253B.03, subd. 6d; 253B.06, subd. 2; 253B.23, subd. 4	Civil commitment; visit with spiritual advisor, adult mental health treatment, immunity
104	254A.08, subd. 2	Detoxification center program requirements
105 – 107	256.9685, subds. 1a, 1b, 1c	Inpatient hospital payment rates under MA; administrative reconsideration, appeal, judicial review
108 - 109	256.975, subds. 7a, 11	Board on aging: preadmission screening to Medicare-certified nursing facility, regional and local dementia grants
110	256B.04, subd. 14a	Level of need determination for nonemergency medical transportation
111	256B.043, subd. 2	Evaluating current system of community health clinics to ensure access to care
112	256B.055, subd. 12	MA eligibility for children with disabilities
113	256B.0622, subd. 2b	Assertive community treatment services; continuing stay and discharge criteria
114	256B.0623, subd. 2	Adult rehabilitative mental health services covered under MA; definition of medical education services
115 – 120	256B.0625, subds. 12, 13, 17, 26, 28, 60a	MA covered services; coverage of prosthetic and orthotic devices, transportation, special education services, APRN services, community medical response emergency medical technician services
121 – 124	256B.0654, subds. 1, 2a, 3, 4	MA coverage of home care nursing services; definition of home care nursing, requirements for use of home care nursing, shared home care nursing option, hardship criteria
125 – 128	256B.0659, subds. 2, 4, 8, 11	Personal care assistance services; covered services, assessment for services, communication with recipient’s provider, personal care assistant requirements
129	256B.0913, subd. 8	Alternative care program; requirements for coordinated service and support plan

Section	Statute Amended	Description
130	256B.73, subd. 5	Demonstration project for uninsured low-income persons; enrollee benefits
131	256J.08, subd. 73a	Minnesota family investment program definition of qualified professional
132	256R.44	Nursing facility rate adjustment for private room for medical necessity
133 – 134	256R.54, subds. 1, 2	Payment for and use of therapy services in a nursing facility, certification of appropriateness of treatment
135	257.63, subd. 3	Evidence relating to paternity of a child; medical privilege
136 – 139	257B.01, subds. 3, 9, 10; 257B.06, subd. 7	Standby custodian; definitions of attending APRN, debilitation, determination of incapacity; authority of custodian and designator’s restored capacity
140	Minn. Rules, part 9505.0365, subp. 3	Repeals a rule governing MA coverage of ambulatory aids



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