

HOUSE SUBSTITUTE AMENDMENT NO. _____

for

HOUSE _____ AMENDMENT NO. _____

Offered By

1 AMEND House Bill No. 815, Page 1, Section 324.005, Line 16, by inserting immediately after all
2 of said section and line the following:

3
4 "335.021. 1. "The Missouri State Board of Nursing" shall consist of nine members, five of
5 whom must be registered professional nurses. [~~Two members~~] One member of the board must be a
6 licensed practical [~~nurses~~] nurse and one member a voting public member. Two of the five
7 registered professional nurses shall hold a graduate degree in nursing, and at least one of the
8 professional nurse members shall represent nursing practice and at least one member shall be an
9 advanced practice registered nurse. Any person, other than the public member, appointed to the
10 board as hereinafter provided shall be a citizen of the United States and a resident of this state for a
11 period of at least one year, a licensed nurse in this state, and shall have been actively engaged in
12 nursing for at least three years immediately preceding the appointment or reappointment.
13 Membership on the board shall include representatives with expertise in each level of educational
14 programs the graduates of which are eligible to apply for licensure such as practical, diploma,
15 associate degree, and baccalaureate.

16 2. The governor shall appoint members to the board by and with the advice and consent of
17 the senate when a vacancy thereon occurs either by the expiration of a term or otherwise; provided,
18 however, that any board member shall serve until his or her successor is appointed and qualified.
19 Every appointment except to fulfill an unexpired term shall be for a term of four years, but no
20 person shall be appointed to more than two consecutive terms.

21 3. At least ninety days before the expiration of a term of a board member, and as soon as
22 feasible after the occurrence of a vacancy on the board for reasons other than the expiration of a
23 term, a list of three licensed and qualified nurses shall be submitted to the director of the division of
24 professional registration. The list shall be submitted by the Missouri Nurses Association if the
25 vacancy is for a registered professional nurse, and by the Missouri State Association of Licensed
26 Practical Nurses if the vacancy is for a licensed practical nurse. The governor may appoint a board
27 member to fill the vacancy from the list submitted, or may appoint some other qualified licensed
28 nurse. This subsection shall not apply to public member vacancies.

29 4. The public member shall be at the time of his or her appointment a citizen of the United
30 States; a resident of this state for a period of one year and a registered voter; a person who is not and
31 never was a member of any profession licensed or regulated pursuant to this chapter or the spouse of
32 such person; and a person who does not have and never has had a material, financial interest in

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1 either the providing of the professional services regulated by this chapter, or an activity or
 2 organization directly related to any profession licensed or regulated pursuant to this chapter. All
 3 members, including public members, shall be chosen from lists submitted by the director of the
 4 division of professional registration. The duties of the public member shall not include the
 5 determination of the technical requirements to be met for licensure or whether any person meets
 6 such technical requirements or of the technical competence or technical judgment of a licensee or a
 7 candidate for licensure.

8 334.104. 1. A physician may enter into collaborative practice arrangements with registered
 9 professional nurses. Collaborative practice arrangements shall be in the form of written agreements,
 10 jointly agreed-upon protocols, or standing orders for the delivery of health care services.
 11 Collaborative practice arrangements, which shall be in writing, may delegate to a registered
 12 professional nurse the authority to administer or dispense drugs and provide treatment as long as the
 13 delivery of such health care services is within the scope of practice of the registered professional
 14 nurse and is consistent with that nurse's skill, training and competence.

15 2. Collaborative practice arrangements, which shall be in writing, may delegate to a
 16 registered professional nurse the authority to administer, dispense, or prescribe drugs and provide
 17 treatment if the registered professional nurse is an advanced practice registered nurse as defined in
 18 subdivision (2) of section 335.016. Collaborative practice arrangements may delegate to an
 19 advanced practice registered nurse, as defined in section 335.016, who has been granted a certificate
 20 of controlled substance prescriptive authority, the authority to administer, dispense, or prescribe
 21 controlled substances listed in Schedules III, IV, and V of section 195.017, and Schedule II -
 22 hydrocodone; except that, the collaborative practice arrangement shall not delegate the authority to
 23 administer any controlled substances listed in Schedules III, IV, and V of section 195.017, or
 24 Schedule II - hydrocodone for the purpose of inducing sedation or general anesthesia for
 25 therapeutic, diagnostic, or surgical procedures. Schedule III narcotic controlled substance and
 26 Schedule II - hydrocodone prescriptions shall be limited to a one hundred twenty-hour supply
 27 without refill. Such collaborative practice arrangements shall be in the form of written agreements,
 28 jointly agreed-upon protocols or standing orders for the delivery of health care services.

29 3. The written collaborative practice arrangement shall contain at least the [following
 30 provisions:

31 ~~——(1) complete names, home and business addresses, zip codes, [and] telephone numbers, and~~
 32 ~~license numbers of the collaborating physician and the advanced practice registered nurse];~~

33 ~~——(2) A list of all other offices or locations besides those listed in subdivision (1) of this~~
 34 ~~subsection where the collaborating physician authorized the advanced practice registered nurse to~~
 35 ~~prescribe;~~

36 ~~——(3) A requirement that there shall be posted at every office where the advanced practice~~
 37 ~~registered nurse is authorized to prescribe, in collaboration with a physician, a prominently~~
 38 ~~displayed disclosure statement informing patients that they may be seen by an advanced practice~~
 39 ~~registered nurse and have the right to see the collaborating physician;~~

40 ~~——(4) All specialty or board certifications of the collaborating physician and all certifications~~
 41 ~~of the advanced practice registered nurse;~~

42 ~~——(5) The manner of collaboration between the collaborating physician and the advanced~~
 43 ~~practice registered nurse, including how the collaborating physician and the advanced practice~~
 44 ~~registered nurse will:~~

45 ~~——(a) Engage in collaborative practice consistent with each professional's skill, training,~~
 46 ~~education, and competence;~~

47 ~~——(b) Maintain geographic proximity, except the collaborative practice arrangement may allow~~
 48 ~~for geographic proximity to be waived for a maximum of twenty-eight days per calendar year for~~

1 rural health clinics as defined by P.L. 95-210, as long as the collaborative practice arrangement
 2 includes alternative plans as required in paragraph (c) of this subdivision. This exception to
 3 geographic proximity shall apply only to independent rural health clinics, provider-based rural
 4 health clinics where the provider is a critical access hospital as provided in 42 U.S.C. Section 1395i-
 5 4, and provider-based rural health clinics where the main location of the hospital sponsor is greater
 6 than fifty miles from the clinic. The collaborating physician is required to maintain documentation
 7 related to this requirement and to present it to the state board of registration for the healing arts
 8 when requested; and

9 ——— (e) Provide coverage during absence, incapacity, infirmity, or emergency by the
 10 collaborating physician;

11 ——— (6) A description of the advanced practice registered nurse's controlled substance
 12 prescriptive authority in collaboration with the physician, including a list of the controlled
 13 substances the physician authorizes the nurse to prescribe and documentation that it is consistent
 14 with each professional's education, knowledge, skill, and competence;

15 ——— (7) A list of all other written practice agreements of the collaborating physician and the
 16 advanced practice registered nurse;

17 ——— (8) The duration of the written practice agreement between the collaborating physician and
 18 the advanced practice registered nurse;

19 ——— (9) A description of the time and manner of the collaborating physician's review of the
 20 advanced practice registered nurse's delivery of health care services. The description shall include
 21 provisions that the advanced practice registered nurse shall submit a minimum of ten percent of the
 22 charts documenting the advanced practice registered nurse's delivery of health care services to the
 23 collaborating physician for review by the collaborating physician, or any other physician designated
 24 in the collaborative practice arrangement, every fourteen days; and

25 ——— (10) The collaborating physician, or any other physician designated in the collaborative
 26 practice arrangement, shall review every fourteen days a minimum of twenty percent of the charts in
 27 which the advanced practice registered nurse prescribes controlled substances. The charts reviewed
 28 under this subdivision may be counted in the number of charts required to be reviewed under
 29 subdivision (9) of this subsection].

30 4. The state board of registration for the healing arts pursuant to section 334.125 and the
 31 board of nursing pursuant to section 335.036 may jointly promulgate rules regulating the use of
 32 collaborative practice arrangements. Such rules shall be limited to [specifying geographic areas to
 33 be covered, the methods of treatment that may be covered by collaborative practice arrangements
 34 and the requirements for review of services provided pursuant to collaborative practice
 35 arrangements including] delegating authority to prescribe controlled substances. Any previously
 36 adopted rules regulating the use of collaborative practice arrangements that are not limited to
 37 delegating authority to prescribe controlled substances shall from the effective date of this act be
 38 null and void. Any rules relating to dispensing or distribution of medications or devices by
 39 prescription or prescription drug orders under this section shall be subject to the approval of the
 40 state board of pharmacy. Any rules relating to dispensing or distribution of controlled substances by
 41 prescription or prescription drug orders under this section shall be subject to the approval of the
 42 department of health and senior services and the state board of pharmacy. In order to take effect,
 43 such rules shall be approved by a majority vote of a quorum of each board. Neither the state board
 44 of registration for the healing arts nor the board of nursing may separately promulgate rules relating
 45 to collaborative practice arrangements. Such jointly promulgated rules shall be consistent with
 46 guidelines for federally funded clinics. The rulemaking authority granted in this subsection shall
 47 not extend to collaborative practice arrangements of hospital employees providing inpatient care
 48 within hospitals as defined pursuant to chapter 197 or population-based public health services as

1 defined by 20 CSR 2150-5.100 as of April 30, 2008.

2 5. The state board of registration for the healing arts shall not deny, revoke, suspend or
3 otherwise take disciplinary action against a physician for health care services delegated to a
4 registered professional nurse provided the provisions of this section and the rules promulgated
5 thereunder are satisfied. Upon the written request of a physician subject to a disciplinary action
6 imposed as a result of an agreement between a physician and a registered professional nurse or
7 registered physician assistant, whether written or not, prior to August 28, 1993, all records of such
8 disciplinary licensure action and all records pertaining to the filing, investigation or review of an
9 alleged violation of this chapter incurred as a result of such an agreement shall be removed from the
10 records of the state board of registration for the healing arts and the division of professional
11 registration and shall not be disclosed to any public or private entity seeking such information from
12 the board or the division. The state board of registration for the healing arts shall take action to
13 correct reports of alleged violations and disciplinary actions as described in this section which have
14 been submitted to the National Practitioner Data Bank. In subsequent applications or
15 representations relating to his or her medical practice, a physician completing forms or documents
16 shall not be required to report any actions of the state board of registration for the healing arts for
17 which the records are subject to removal under this section.

18 6. Within thirty days of any change and on each renewal, the state board of registration for
19 the healing arts shall require every physician to identify whether the physician is engaged in any
20 collaborative practice agreement, including collaborative practice agreements delegating the
21 authority to prescribe controlled substances, or physician assistant agreement and also report to the
22 board the name of each licensed professional with whom the physician has entered into such
23 agreement. The board ~~may~~ shall make this information available to the public. The board shall
24 track the reported information and may routinely conduct random reviews of such agreements to
25 ensure that agreements are carried out for compliance under this chapter.

26 7. Notwithstanding any law to the contrary, a certified registered nurse anesthetist as defined
27 in subdivision (8) of section 335.016 shall be permitted to provide anesthesia services without a
28 collaborative practice arrangement provided that he or she is under the supervision of an
29 anesthesiologist or other physician, dentist, or podiatrist who is immediately available if needed.
30 Nothing in this subsection shall be construed to prohibit or prevent a certified registered nurse
31 anesthetist as defined in subdivision (8) of section 335.016 from entering into a collaborative
32 practice arrangement under this section, except that the collaborative practice arrangement may not
33 delegate the authority to prescribe any controlled substances listed in Schedules III, IV, and V of
34 section 195.017, or Schedule II - hydrocodone.

35 8. ~~[A collaborating physician shall not enter into a collaborative practice arrangement with
36 more than three full-time equivalent advanced practice registered nurses. This limitation shall not
37 apply to collaborative arrangements of hospital employees providing inpatient care service in
38 hospitals as defined in chapter 197 or population-based public health services as defined by 20 CSR
39 2150-5.100 as of April 30, 2008.~~

40 ~~9. It is the responsibility of the collaborating physician to determine and document the
41 completion of at least a one-month period of time during which the advanced practice registered
42 nurse shall practice with the collaborating physician continuously present before practicing in a
43 setting where the collaborating physician is not continuously present. This limitation shall not apply
44 to collaborative arrangements of providers of population-based public health services as defined by
45 20 CSR 2150-5.100 as of April 30, 2008.~~

46 ~~10. No agreement made under this section shall supersede current hospital licensing
47 regulations governing hospital medication orders under protocols or standing orders for the purpose
48 of delivering inpatient or emergency care within a hospital as defined in section 197.020 if such~~

1 protocols or standing orders have been approved by the hospital's medical staff and pharmaceutical
2 therapeutics committee.

3 ~~11.] No contract or other agreement shall require a physician to act as a collaborating
4 physician for an advanced practice registered nurse against the physician's will. A physician shall
5 have the right to refuse to act as a collaborating physician, without penalty, for a particular advanced
6 practice registered nurse. [No contract or other agreement shall limit the collaborating physician's
7 ultimate authority over any protocols or standing orders or in the delegation of the physician's
8 authority to any advanced practice registered nurse, but this requirement shall not authorize a
9 physician in implementing such protocols, standing orders, or delegation to violate applicable
10 standards for safe medical practice established by hospital's medical staff.]~~

11 [12.] 9. No contract or other agreement shall require any advanced practice registered nurse
12 to serve as a collaborating advanced practice registered nurse for any collaborating physician against
13 the advanced practice registered nurse's will. An advanced practice registered nurse shall have the
14 right to refuse to collaborate, without penalty, with a particular physician.

15 335.016. As used in this chapter, unless the context clearly requires otherwise, the following
16 words and terms mean:

17 (1) "Accredited", the official authorization or status granted by an agency for a program
18 through a voluntary process;

19 (2) "Advanced practice registered nurse" or "APRN", a ~~[nurse who has education beyond
20 the basic nursing education and is certified by a nationally recognized professional organization as a
21 certified nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or a
22 certified clinical nurse specialist. The board shall promulgate rules specifying which nationally
23 recognized professional organization certifications are to be recognized for the purposes of this
24 section. Advanced practice nurses and only such individuals may use the title "Advanced Practice
25 Registered Nurse" and the abbreviation "APRN"]~~ person who is licensed under the provisions of this
26 chapter to engage in the practice of advanced practice nursing in one of the four APRN roles
27 recognized in this section;

28 (3) "Approval", official recognition of nursing education programs which meet standards
29 established by the board of nursing;

30 (4) "Board" or "state board", the state board of nursing;

31 (5) "Certified clinical nurse specialist", a registered nurse who is currently certified as a
32 clinical nurse specialist by a nationally recognized certifying board approved by the board of
33 nursing. A certified clinical nurse specialist is one of the four APRN roles;

34 (6) "Certified nurse midwife", a registered nurse who is currently certified as a nurse
35 midwife by the American College of Nurse Midwives, or other nationally recognized certifying
36 body approved by the board of nursing. A certified nurse midwife is one of the four APRN roles;

37 (7) "Certified nurse practitioner", a registered nurse who is currently certified as a nurse
38 practitioner by a nationally recognized certifying body approved by the board of nursing. A
39 certified nurse practitioner is one of the four APRN roles;

40 (8) "Certified registered nurse anesthetist", a registered nurse who is currently certified as a
41 nurse anesthetist by the ~~[Council on Certification of Nurse Anesthetists, the Council on
42 Recertification of Nurse Anesthetists,]~~ National Board of Certification and Recertification for Nurse
43 Anesthetists or other nationally recognized certifying body approved by the board of nursing. A
44 certified registered nurse anesthetist is one of the four APRN roles;

45 (9) "Executive director", a qualified individual employed by the board as executive
46 secretary or otherwise to administer the provisions of this chapter under the board's direction. Such
47 person employed as executive director shall not be a member of the board;

48 (10) "Inactive nurse", as defined by rule pursuant to section 335.061;

1 (11) "Lapsed license status", as defined by rule under section 335.061;

2 (12) "Licensed practical nurse" or "practical nurse", a person licensed pursuant to the
3 provisions of this chapter to engage in the practice of practical nursing;

4 (13) "Licensure", the issuing of a license to an individual authorizing the individual to
5 practice advanced practice, professional, or practical nursing to candidates who have met the
6 specified requirements and the recording of the names of those persons as holders of a license to
7 practice advanced practice, professional, or practical nursing;

8 (14) "Population focus", one of the following six areas of practice for which an advanced
9 practice registered nurse has the education and training to provide care and services:

10 (a) A family or individual across the lifespan;

11 (b) Adult-gerontology;

12 (c) Pediatrics;

13 (d) Neonatal;

14 (e) Women's health or gender-related; and

15 (f) Psychiatric or mental health;

16 (15) "Practice of advanced practice nursing":

17 (a) The practice of advanced practice nursing that includes, but is not limited to:

18 a. The practice of professional nursing as defined in this section performed with or without
19 compensation or personal profit;

20 b. Conducting an advanced assessment beyond a registered nurse's assessment;

21 c. Ordering and interpreting diagnostic procedures;

22 d. Establishing primary and differential diagnoses;

23 e. Prescribing, ordering, administering, dispensing, and furnishing therapeutic measures,
24 including the authority to:

25 (i) Diagnose, prescribe, and institute therapy or referrals of patients to health care agencies,
26 health care providers, and community resources;

27 (ii) Prescribe, order, procure, administer, dispense, and furnish pharmacological agents,
28 including over-the-counter and legend drugs;

29 (iii) Prescribe, order, procure, administer, dispense, and furnish controlled substances listed
30 in Schedules III, IV, and V of section 195.017, and Schedule II - hydrocodone with a certificate of
31 controlled substance prescriptive authority as part of a collaborative practice arrangement; and

32 (iv) Plan and initiate a therapeutic regimen that includes ordering and prescribing
33 nonpharmacological interventions including, but not limited to, durable medical equipment, medical
34 devices, nutrition, blood and blood products, and diagnostic and supportive services including, but
35 not limited to, home health care, hospice, and physical and occupational therapy;

36 f. Delegating and assigning the performance of therapeutic measures to assistive personnel;

37 g. Consulting with other disciplines and providing referrals to health care agencies, health
38 care providers, and community resources; and

39 h. Other acts that require education and training consistent with professional standards and
40 commensurate with the APRN's education, certification, demonstrated competencies, and
41 experience;

42 (b) Advanced practice nursing shall be practiced in accordance with the APRN's graduate-
43 level education and certification in one of four recognized roles, with at least one population focus,
44 including a:

45 a. Certified clinical nurse specialist;

46 b. Certified nurse midwife;

47 c. Certified nurse practitioner; and

48 d. Certified registered nurse anesthetist;

1 (c) When providing direct patient care, an APRN shall wear identification that clearly
 2 identifies the nurse as an APRN, unless wearing identification creates a safety or health risk for
 3 either the nurse or the patient;

4 (d) Nothing in this subdivision shall alter the definition of the practice of professional
 5 nursing;

6 (16) "Practice of practical nursing", the performance for compensation of selected acts for
 7 the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in
 8 normal health processes. Such performance requires substantial specialized skill, judgment and
 9 knowledge. All such nursing care shall be given under the direction of a person licensed by a state
 10 regulatory board to prescribe medications and treatments or under the direction of a registered
 11 professional nurse. For the purposes of this chapter, the term "direction" shall mean guidance or
 12 [supervision] oversight provided by a person licensed by a state regulatory board to prescribe
 13 medications and treatments or a registered professional nurse, including, but not limited to, oral,
 14 written, or otherwise communicated orders or directives for patient care. When practical nursing
 15 care is delivered pursuant to the direction of a person licensed by a state regulatory board to
 16 prescribe medications and treatments or under the direction of a registered professional nurse, such
 17 care may be delivered by a licensed practical nurse without direct physical oversight;

18 ~~[(15)]~~ (17) "Practice of professional nursing", the performance for compensation of any act
 19 or function which requires substantial specialized education, judgment and skill based on knowledge
 20 and application of principles derived from the biological, physical, social, behavioral, and nursing
 21 sciences, including, but not limited to:

22 (a) Responsibility for the promotion and teaching of health care and the prevention of
 23 illness to the patient and his or her family;

24 (b) Assessment, data collection, nursing diagnosis, nursing care, evaluation, and counsel of
 25 persons who are ill, injured or experiencing alterations in normal health processes;

26 (c) The administration of medications and treatments as prescribed by a person licensed by
 27 a state regulatory board to prescribe medications and treatments;

28 (d) The coordination, initiation, performance, and assistance in the determination and
 29 delivery of a plan of health care with all members of a health team;

30 (e) The teaching and supervision of other persons in the performance of any of the
 31 foregoing;

32 ~~[(16)—A]~~ (18) "Registered professional nurse" or "registered nurse", a person licensed
 33 pursuant to the provisions of this chapter to engage in the practice of professional nursing;

34 ~~[(17)]~~ (19) "Retired license status", any person licensed in this state under this chapter who
 35 retires from such practice. Such person shall file with the board an affidavit, on a form to be
 36 furnished by the board, which states the date on which the licensee retired from such practice, an
 37 intent to retire from the practice for at least two years, and such other facts as tend to verify the
 38 retirement as the board may deem necessary; but if the licensee thereafter reengages in the practice,
 39 the licensee shall renew his or her license with the board as provided by this chapter and by rule and
 40 regulation.

41 335.019. 1. An advanced practice registered nurse's prescriptive authority shall include
 42 authority to:

43 (1) Prescribe, dispense, and administer nonscheduled legend drugs and medications as
 44 defined under section 338.330 within such APRN's practice and specialty;

45 (2) Notwithstanding any other provision of this chapter, receive, prescribe, administer, and
 46 provide nonscheduled legend drug samples from pharmaceutical manufacturers to patients at no
 47 charge to the patient or any other party.

48 2. The board of nursing may grant a certificate of controlled substance prescriptive

1 authority to an advanced practice registered nurse, as defined in section 335.016, who[
 2 ———(1)] submits proof of successful completion of an advanced pharmacology course that shall
 3 include [~~preceptorial experience in~~] the prescription of drugs, medicines, and therapeutic devices[;
 4 and
 5 ———(2) Provides documentation of a minimum of three hundred clock hours preceptorial
 6 experience in the prescription of drugs, medicines, and therapeutic devices with a qualified
 7 preceptor; and
 8 ———(3) Provides evidence of a minimum of one thousand hours of practice in an advanced
 9 practice nursing category prior to application for a certificate of prescriptive authority. The one
 10 thousand hours shall not include clinical hours obtained in the advanced practice nursing education
 11 program. The one thousand hours of practice in an advanced practice nursing category may include
 12 transmitting a prescription order orally or telephonically or to an inpatient medical record from
 13 protocols developed in collaboration with and signed by a licensed physician; and
 14 ———(4) Has a controlled substance prescribing authority delegated in the collaborative practice
 15 arrangement under section 334.104 with a physician who has an unrestricted federal Drug
 16 Enforcement Administration registration number and who is actively engaged in a practice
 17 comparable in scope, specialty, or expertise to that of the advanced practice registered nurse].

18 3. The board of nursing may grant a certificate of controlled substance prescriptive
 19 authority to an advanced practice registered nurse, as defined under section 335.016, to administer,
 20 dispense, or prescribe controlled substances listed in Schedules III, IV, and V of section 195.017,
 21 and Schedule II - hydrocodone within the parameters of a collaborative practice arrangement;
 22 except that, such certificate shall not delegate the authority to administer any controlled substances
 23 listed in Schedules III, IV, and V of section 195.017, or Schedule II - hydrocodone for the purpose
 24 of inducing sedation or general anesthesia for therapeutic, diagnostic, or surgical procedures.

25 4. Advanced practice registered nurses, except for certified registered nurse anesthetists,
 26 shall not administer any controlled substances listed in Schedules III, IV, and V of section 195.017,
 27 or Schedule II - hydrocodone for the purpose of inducing general anesthesia for procedures that are
 28 outside the advanced practice registered nurse's scope of practice.

29 335.046. 1. An applicant for a license to practice as a registered professional nurse shall
 30 submit to the board a written application on forms furnished to the applicant. The original
 31 application shall contain the applicant's statements showing the applicant's education and other such
 32 pertinent information as the board may require. The applicant shall be of good moral character and
 33 have completed at least the high school course of study, or the equivalent thereof as determined by
 34 the state board of education, and have successfully completed the basic professional curriculum in
 35 an accredited or approved school of nursing and earned a professional nursing degree or diploma.
 36 Each application shall contain a statement that it is made under oath or affirmation and that its
 37 representations are true and correct to the best knowledge and belief of the person signing same,
 38 subject to the penalties of making a false affidavit or declaration. Applicants from non-English-
 39 speaking lands shall be required to submit evidence of proficiency in the English language. The
 40 applicant [~~must~~] shall be approved by the board and shall pass an examination as required by the
 41 board. The board may require by rule as a requirement for licensure that each applicant shall pass an
 42 oral or practical examination. Upon successfully passing the examination, the board may issue to
 43 the applicant a license to practice nursing as a registered professional nurse. The applicant for a
 44 license to practice registered professional nursing shall pay a license fee in such amount as set by
 45 the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be
 46 licensed as prescribed by rule.

47 2. An applicant for license to practice as a licensed practical nurse shall submit to the board
 48 a written application on forms furnished to the applicant. The original application shall contain the

1 applicant's statements showing the applicant's education and other such pertinent information as the
2 board may require. Such applicant shall be of good moral character, and have completed at least
3 two years of high school, or its equivalent as established by the state board of education, and have
4 successfully completed a basic prescribed curriculum in a state-accredited or approved school of
5 nursing, earned a nursing degree, certificate or diploma and completed a course approved by the
6 board on the role of the practical nurse. Each application shall contain a statement that it is made
7 under oath or affirmation and that its representations are true and correct to the best knowledge and
8 belief of the person signing same, subject to the penalties of making a false affidavit or declaration.
9 Applicants from non-English-speaking countries shall be required to submit evidence of their
10 proficiency in the English language. The applicant [~~must~~] shall be approved by the board and shall
11 pass an examination as required by the board. The board may require by rule as a requirement for
12 licensure that each applicant shall pass an oral or practical examination. Upon successfully passing
13 the examination, the board may issue to the applicant a license to practice as a licensed practical
14 nurse. The applicant for a license to practice licensed practical nursing shall pay a fee in such
15 amount as may be set by the board. The fee shall be uniform for all applicants. Applicants from
16 foreign countries shall be licensed as prescribed by rule.

17 3. (1) An applicant for a license to practice as an advanced practice registered nurse shall
18 submit a completed application as established by the board. The application shall, at a minimum,
19 contain:

20 (a) The applicant's advanced nursing education and other pertinent information as the board
21 may require;

22 (b) A statement under oath or affirmation that the applicant is of good moral character and
23 that the representations contained in the application are true and correct to the best knowledge and
24 belief of the applicant, subject to the penalties of making a false affidavit or declaration;

25 (c) Documentation that demonstrates the following educational requirements:

26 a. Prior to July 1, 1998, completion of a formal post-basic educational program from or
27 formally affiliated with an accredited college, university, or hospital of at least one academic year,
28 which includes advanced nurse theory and clinical nursing practice, leading to a graduate degree or
29 certificate with a concentration in an advanced nursing clinical specialty area;

30 b. From July 1, 1998, to June 30, 2009, completion of a graduate degree from an accredited
31 college or university with a concentration in an advanced practice nursing clinical specialty area,
32 which includes advanced nursing theory and clinical nursing practice;

33 c. On or after July 1, 2009, completion of an accredited graduate-level advanced practice
34 registered nursing program that prepared the applicant for one of the four APRN roles in at least one
35 population focus;

36 (d) Documentation of current certification in one of the four APRN roles from a nationally
37 recognized certifying body approved by the board, or current documentation of recognition as an
38 advanced practice registered nurse issued by the board prior to January 1, 2018; and

39 (e) Other evidence as required by board rule, including, as may be applicable, evidence of
40 proficiency in the English language.

41 (2) The applicant for a license to practice as an advanced practice registered nurse shall pay
42 a license fee in such amount as set by the board that shall be uniform for all such applicants.

43 (3) Upon issuance of a license, the license holder's advanced practice registered nursing
44 license and his or her professional nursing license shall be treated as one license for the purpose of
45 renewal and assessment of renewal fees.

46 4. Upon refusal of the board to allow any applicant to sit for either the registered
47 professional nurses' examination or the licensed practical nurses' examination, as the case may be,
48 the board shall comply with the provisions of section 621.120 and advise the applicant of his or her

1 right to have a hearing before the administrative hearing commission. The administrative hearing
2 commission shall hear complaints taken pursuant to section 621.120.

3 ~~[4.]~~ 5. The board shall not deny a license because of sex, religion, race, ethnic origin, age or
4 political affiliation.

5 335.056. The license of every person licensed under the provisions of ~~[sections 335.011 to~~
6 ~~335.096]~~ this chapter shall be renewed as provided. An application for renewal of license shall be
7 mailed to every person to whom a license was issued or renewed during the current licensing period.
8 The applicant shall complete the application and return it to the board by the renewal date with a
9 renewal fee in an amount to be set by the board. The fee shall be uniform for all applicants. The
10 certificates of renewal shall render the holder thereof a legal practitioner of nursing for the period
11 stated in the certificate of renewal. Any person who practices nursing as an advanced practice
12 registered nurse, as a registered professional nurse, or as a licensed practical nurse during the time
13 his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the
14 penalties provided for violation of the provisions of ~~[sections 335.011 to 335.096]~~ this chapter.

15 335.086. No person, firm, corporation, or association shall:

16 (1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to furnish any nursing
17 diploma, license, renewal, or record or aid or abet therein;

18 (2) Practice ~~[professional or practical]~~ nursing as defined ~~[by sections 335.011 to 335.096]~~
19 in this chapter under cover of any diploma, license, or record illegally or fraudulently obtained or
20 signed or issued unlawfully or under fraudulent representation;

21 (3) Practice ~~[professional nursing or practical]~~ nursing as defined ~~[by sections 335.011 to~~
22 ~~335.096]~~ in this chapter unless duly licensed to do so under the provisions of ~~[sections 335.011 to~~
23 ~~335.096]~~ this chapter;

24 (4) Use in connection with his or her name any designation tending to imply that he or she
25 is a licensed advanced practice registered nurse, a licensed registered professional nurse, or a
26 licensed practical nurse unless duly licensed so to practice under the provisions of ~~[sections 335.011~~
27 ~~to 335.096]~~ this chapter;

28 (5) Practice advanced practice nursing, professional nursing, or practical nursing during the
29 time his or her license issued under the provisions of ~~[sections 335.011 to 335.096]~~ this chapter shall
30 be suspended or revoked; or

31 (6) Conduct a nursing education program for the preparation of professional or practical
32 nurses unless the program has been accredited by the board."; and

33
34 Further amend said bill by amending the title, enacting clause, and intersectional references
35 accordingly.

36
37 THIS AMENDMENT IS A SUBSTITUTE FOR AMENDMENT 1514H01.07H