

SB3116



100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

SB3116

Introduced 2/15/2018, by Sen. Mattie Hunter

SYNOPSIS AS INTRODUCED:

225 ILCS 65/65-35.1

225 ILCS 65/65-40

was 225 ILCS 65/15-20

Amends the Nurse Practice Act. In provisions concerning written collaborative agreements, restores the ability of podiatric physicians to collaborate with advanced practice registered nurses. Makes other changes. Effective immediately.

LRB100 17649 XWW 32820 b

A BILL FOR

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 Nurse Practice Act is amended by changing
5 Sections 65-35.1 and 65-40 as follows:

6 (225 ILCS 65/65-35.1)

7 (Section scheduled to be repealed on January 1, 2028)

8 Sec. 65-35.1. Written collaborative agreement; temporary
9 practice. Any advanced practice registered nurse required to
10 enter into a written collaborative agreement with a
11 collaborating physician or collaborating podiatrist is
12 authorized to continue to practice for up to 90 days after the
13 termination of a collaborative agreement provided the advanced
14 practice registered nurse seeks any needed collaboration at a
15 local hospital and refers patients who require services beyond
16 the training and experience of the advanced practice registered
17 nurse to a physician or other health care provider.

18 (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18.)

19 (225 ILCS 65/65-40) (was 225 ILCS 65/15-20)

20 (Section scheduled to be repealed on January 1, 2028)

21 Sec. 65-40. Written collaborative agreement; prescriptive
22 authority.

1 (a) A collaborating physician or podiatric physician may,
2 but is not required to, delegate prescriptive authority to an
3 advanced practice registered nurse as part of a written
4 collaborative agreement. This authority may, but is not
5 required to, include prescription of, selection of, orders for,
6 administration of, storage of, acceptance of samples of, and
7 dispensing over the counter medications, legend drugs, medical
8 gases, and controlled substances categorized as any Schedule
9 III through V controlled substances, as defined in Article II
10 of the Illinois Controlled Substances Act, and other
11 preparations, including, but not limited to, botanical and
12 herbal remedies. The collaborating physician or podiatric
13 physician must have a valid current Illinois controlled
14 substance license and federal registration to delegate
15 authority to prescribe delegated controlled substances.

16 (b) To prescribe controlled substances under this Section,
17 an advanced practice registered nurse must obtain a mid-level
18 practitioner controlled substance license. Medication orders
19 shall be reviewed periodically by the collaborating physician
20 or podiatric physician.

21 (c) The collaborating physician or podiatric physician ~~e~~
22 shall file with the Department and the Prescription Monitoring
23 Program notice of delegation of prescriptive authority and
24 termination of such delegation, in accordance with rules of the
25 Department. Upon receipt of this notice delegating authority to
26 prescribe any Schedule III through V controlled substances, the

1 licensed advanced practice registered nurse shall be eligible
2 to register for a mid-level practitioner controlled substance
3 license under Section 303.05 of the Illinois Controlled
4 Substances Act.

5 (d) In addition to the requirements of subsections (a),
6 (b), and (c) of this Section, a collaborating physician or
7 podiatric physician may, but is not required to, delegate
8 authority to an advanced practice registered nurse to prescribe
9 any Schedule II controlled substances, if all of the following
10 conditions apply:

11 (1) Specific Schedule II controlled substances by oral
12 dosage or topical or transdermal application may be
13 delegated, provided that the delegated Schedule II
14 controlled substances are routinely prescribed by the
15 collaborating physician or podiatric physician. This
16 delegation must identify the specific Schedule II
17 controlled substances by either brand name or generic name.
18 Schedule II controlled substances to be delivered by
19 injection or other route of administration may not be
20 delegated.

21 (2) Any delegation must be controlled substances that
22 the collaborating physician or podiatric physician
23 prescribes.

24 (3) Any prescription must be limited to no more than a
25 30-day supply, with any continuation authorized only after
26 prior approval of the collaborating physician or podiatric

1 physician.

2 (4) The advanced practice registered nurse must
3 discuss the condition of any patients for whom a controlled
4 substance is prescribed monthly with the delegating
5 physician.

6 (5) The advanced practice registered nurse meets the
7 education requirements of Section 303.05 of the Illinois
8 Controlled Substances Act.

9 (e) Nothing in this Act shall be construed to limit the
10 delegation of tasks or duties by a physician to a licensed
11 practical nurse, a registered professional nurse, or other
12 persons. Nothing in this Act shall be construed to limit the
13 method of delegation that may be authorized by any means,
14 including, but not limited to, oral, written, electronic,
15 standing orders, protocols, guidelines, or verbal orders.

16 (f) Nothing in this Section shall be construed to apply to
17 any medication authority including Schedule II controlled
18 substances of an advanced practice registered nurse for care
19 provided in a hospital, hospital affiliate, or ambulatory
20 surgical treatment center pursuant to Section 65-45.

21 (g) (Blank).

22 (h) Nothing in this Section shall be construed to prohibit
23 generic substitution.

24 (i) Nothing in this Section shall be construed to apply to
25 an advanced practice registered nurse who meets the
26 requirements of Section 65-43.

1 (Source: P.A. 100-513, eff. 1-1-18.)

2 Section 99. Effective date. This Act takes effect upon
3 becoming law.