



Rep. Anna Moeller

Filed: 2/28/2023

10300HB2895ham001

LRB103 30134 AWJ 57604 a

1 AMENDMENT TO HOUSE BILL 2895

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 2895 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Department of Professional Regulation Law  
5 of the Civil Administrative Code of Illinois is amended by  
6 adding Section 2105-367 as follows:

7 (20 ILCS 2105/2105-367 new)

8 Sec. 2105-367. Rules; various medical and dental Acts. The  
9 Department shall adopt rules to implement this amendatory Act  
10 of the 103rd General Assembly.

11 Section 10. The Ambulatory Surgical Treatment Center Act  
12 is amended by changing Section 6.5 as follows:

13 (210 ILCS 5/6.5)

14 Sec. 6.5. Clinical privileges; advanced practice

1 registered nurses. All ambulatory surgical treatment centers  
2 (ASTC) licensed under this Act shall comply with the following  
3 requirements:

4 (1) No ASTC policy, rule, regulation, or practice  
5 shall be inconsistent with the provision of adequate  
6 collaboration and consultation in accordance with Section  
7 54.5 of the Medical Practice Act of 1987.

8 (2) Operative surgical procedures shall be performed  
9 only by a physician licensed to practice medicine in all  
10 its branches under the Medical Practice Act of 1987, a  
11 dentist licensed under the Illinois Dental Practice Act,  
12 or a podiatric physician licensed under the Podiatric  
13 Medical Practice Act of 1987, with medical staff  
14 membership and surgical clinical privileges granted by the  
15 consulting committee of the ASTC. A licensed physician,  
16 dentist, or podiatric physician may be assisted by a  
17 physician licensed to practice medicine in all its  
18 branches, dentist, dental assistant, podiatric physician,  
19 licensed advanced practice registered nurse, licensed  
20 physician assistant, licensed registered nurse, licensed  
21 practical nurse, surgical assistant, surgical technician,  
22 or other individuals granted clinical privileges to assist  
23 in surgery by the consulting committee of the ASTC.  
24 Payment for services rendered by an assistant in surgery  
25 who is not an ambulatory surgical treatment center  
26 employee shall be paid at the appropriate non-physician

1 modifier rate if the payor would have made payment had the  
2 same services been provided by a physician.

3 (2.5) A registered nurse licensed under the Nurse  
4 Practice Act and qualified by training and experience in  
5 operating room nursing shall be present in the operating  
6 room and function as the circulating nurse during all  
7 invasive or operative procedures. For purposes of this  
8 paragraph (2.5), "circulating nurse" means a registered  
9 nurse who is responsible for coordinating all nursing  
10 care, patient safety needs, and the needs of the surgical  
11 team in the operating room during an invasive or operative  
12 procedure.

13 (3) An advanced practice registered nurse is not  
14 required to possess prescriptive authority or a written  
15 collaborative agreement meeting the requirements of the  
16 Nurse Practice Act to provide advanced practice registered  
17 nursing services in an ambulatory surgical treatment  
18 center. An advanced practice registered nurse must possess  
19 clinical privileges granted by the consulting medical  
20 staff committee and ambulatory surgical treatment center  
21 in order to provide services. Individual advanced practice  
22 registered nurses may also be granted clinical privileges  
23 to order, select, and administer medications, including  
24 controlled substances, to provide delineated care. The  
25 attending physician must determine the advanced practice  
26 registered nurse's role in providing care for his or her

1 patients, except as otherwise provided in the consulting  
2 staff policies. The consulting medical staff committee  
3 shall periodically review the services of advanced  
4 practice registered nurses granted privileges.

5 ~~(4) The anesthesia service shall be under the~~  
6 ~~direction of a physician licensed to practice medicine in~~  
7 ~~all its branches who has had specialized preparation or~~  
8 ~~experience in the area or who has completed a residency in~~  
9 ~~anesthesiology. An anesthesiologist, Board certified or~~  
10 ~~Board eligible, is recommended. Anesthesia services may~~  
11 ~~only be administered pursuant to the order of a physician~~  
12 ~~licensed to practice medicine in all its branches,~~  
13 ~~licensed dentist, or licensed podiatric physician. (A) The~~  
14 individuals who, with clinical privileges granted by the  
15 medical staff and ASTC, may administer anesthesia services  
16 are limited to the following:

17 (i) an anesthesiologist; or

18 (ii) a physician licensed to practice medicine in  
19 all its branches; or

20 (iii) a dentist with authority to administer  
21 anesthesia under Section 8.1 of the Illinois Dental  
22 Practice Act; or

23 (iv) a licensed certified registered nurse  
24 anesthetist; or

25 (v) a podiatric physician licensed under the  
26 Podiatric Medical Practice Act of 1987.

1           (B)     (Blank).     ~~For anesthesia services, an~~  
2     ~~anesthesiologist shall participate through discussion of~~  
3     ~~and agreement with the anesthesia plan and shall remain~~  
4     ~~physically present and be available on the premises during~~  
5     ~~the delivery of anesthesia services for diagnosis,~~  
6     ~~consultation, and treatment of emergency medical~~  
7     ~~conditions. In the absence of 24 hour availability of~~  
8     ~~anesthesiologists with clinical privileges, an alternate~~  
9     ~~policy (requiring participation, presence, and~~  
10    ~~availability of a physician licensed to practice medicine~~  
11    ~~in all its branches) shall be developed by the medical~~  
12    ~~staff consulting committee in consultation with the~~  
13    ~~anesthesia service and included in the medical staff~~  
14    ~~consulting committee policies.~~

15           (C) A certified registered nurse anesthetist is not  
16     required to possess prescriptive authority or a written  
17     collaborative agreement meeting the requirements of  
18     Section 65-35 of the Nurse Practice Act to provide  
19     anesthesia services ~~ordered by a licensed physician,~~  
20     ~~dentist, or podiatric physician.~~ Licensed certified  
21     registered nurse anesthetists are authorized to select,  
22     order, and administer drugs and apply the appropriate  
23     medical devices in the provision of anesthesia services  
24     ~~under the anesthesia plan agreed with by the~~  
25     ~~anesthesiologist or, in the absence of an available~~  
26     ~~anesthesiologist with clinical privileges, agreed with by~~

1 ~~the operating physician, operating dentist, or operating~~  
2 ~~podiatric physician~~ in accordance with the medical staff  
3 consulting committee policies of a licensed ambulatory  
4 surgical treatment center.

5 (D) In accordance with the medical staff consulting  
6 committee policies of a licensed ambulatory surgical  
7 treatment center, a certified registered nurse anesthetist  
8 with clinical privileges may perform acts of advanced  
9 assessment and diagnosis and may provide such functions  
10 for which the certified registered nurse anesthetist is  
11 educationally and experientially prepared and which are  
12 consistent with the standards established by the national  
13 credentialing or certification for the specialty  
14 recognized by the Department.

15 (Source: P.A. 99-642, eff. 7-28-16; 100-513, eff. 1-1-18.)

16 Section 15. The Hospital Licensing Act is amended by  
17 changing Section 10.7 as follows:

18 (210 ILCS 85/10.7)

19 Sec. 10.7. Clinical privileges; advanced practice  
20 registered nurses. All hospitals licensed under this Act  
21 shall comply with the following requirements:

22 (1) No hospital policy, rule, regulation, or practice  
23 shall be inconsistent with the provision of adequate  
24 collaboration and consultation in accordance with Section

1 54.5 of the Medical Practice Act of 1987.

2 (2) Operative surgical procedures shall be performed  
3 only by a physician licensed to practice medicine in all  
4 its branches under the Medical Practice Act of 1987, a  
5 dentist licensed under the Illinois Dental Practice Act,  
6 or a podiatric physician licensed under the Podiatric  
7 Medical Practice Act of 1987, with medical staff  
8 membership and surgical clinical privileges granted at the  
9 hospital. A licensed physician, dentist, or podiatric  
10 physician may be assisted by a physician licensed to  
11 practice medicine in all its branches, dentist, dental  
12 assistant, podiatric physician, licensed advanced practice  
13 registered nurse, licensed physician assistant, licensed  
14 registered nurse, licensed practical nurse, surgical  
15 assistant, surgical technician, or other individuals  
16 granted clinical privileges to assist in surgery at the  
17 hospital. Payment for services rendered by an assistant in  
18 surgery who is not a hospital employee shall be paid at the  
19 appropriate non-physician modifier rate if the payor would  
20 have made payment had the same services been provided by a  
21 physician.

22 (2.5) A registered nurse licensed under the Nurse  
23 Practice Act and qualified by training and experience in  
24 operating room nursing shall be present in the operating  
25 room and function as the circulating nurse during all  
26 invasive or operative procedures. For purposes of this

1 paragraph (2.5), "circulating nurse" means a registered  
2 nurse who is responsible for coordinating all nursing  
3 care, patient safety needs, and the needs of the surgical  
4 team in the operating room during an invasive or operative  
5 procedure.

6 (3) An advanced practice registered nurse is not  
7 required to possess prescriptive authority or a written  
8 collaborative agreement meeting the requirements of the  
9 Nurse Practice Act to provide advanced practice registered  
10 nursing services in a hospital. An advanced practice  
11 registered nurse must possess clinical privileges  
12 recommended by the medical staff and granted by the  
13 hospital in order to provide services. Individual advanced  
14 practice registered nurses may also be granted clinical  
15 privileges to order, select, and administer medications,  
16 including controlled substances, to provide delineated  
17 care. The attending physician must determine the advanced  
18 practice registered nurse's role in providing care for his  
19 or her patients, except as otherwise provided in medical  
20 staff bylaws. The medical staff shall periodically review  
21 the services of advanced practice registered nurses  
22 granted privileges. This review shall be conducted in  
23 accordance with item (2) of subsection (a) of Section 10.8  
24 of this Act for advanced practice registered nurses  
25 employed by the hospital.

26 (4) ~~The anesthesia service shall be under the~~



1 ~~direction of a physician licensed to practice medicine in~~  
2 ~~all its branches who has had specialized preparation or~~  
3 ~~experience in the area or who has completed a residency in~~  
4 ~~anesthesiology. An anesthesiologist, Board certified or~~  
5 ~~Board eligible, is recommended. Anesthesia services may~~  
6 ~~only be administered pursuant to the order of a physician~~  
7 ~~licensed to practice medicine in all its branches,~~  
8 ~~licensed dentist, or licensed podiatric physician. (A) The~~  
9 individuals who, with clinical privileges granted at the  
10 hospital, may administer anesthesia services are limited  
11 to the following:

12 (i) an anesthesiologist; or

13 (ii) a physician licensed to practice medicine in  
14 all its branches; or

15 (iii) a dentist with authority to administer  
16 anesthesia under Section 8.1 of the Illinois Dental  
17 Practice Act; or

18 (iv) a licensed certified registered nurse  
19 anesthetist; or

20 (v) a podiatric physician licensed under the  
21 Podiatric Medical Practice Act of 1987.

22 (B) (Blank). ~~For anesthesia services, an~~  
23 ~~anesthesiologist shall participate through discussion of~~  
24 ~~and agreement with the anesthesia plan and shall remain~~  
25 ~~physically present and be available on the premises during~~  
26 ~~the delivery of anesthesia services for diagnosis,~~

1 ~~consultation, and treatment of emergency medical~~  
2 ~~conditions. In the absence of 24-hour availability of~~  
3 ~~anesthesiologists with medical staff privileges, an~~  
4 ~~alternate policy (requiring participation, presence, and~~  
5 ~~availability of a physician licensed to practice medicine~~  
6 ~~in all its branches) shall be developed by the medical~~  
7 ~~staff and licensed hospital in consultation with the~~  
8 ~~anesthesia service.~~

9 (C) A certified registered nurse anesthetist is not  
10 required to possess prescriptive authority or a written  
11 collaborative agreement meeting the requirements of  
12 Section 65-35 of the Nurse Practice Act to provide  
13 anesthesia services ~~ordered by a licensed physician,~~  
14 ~~dentist, or podiatric physician.~~ Licensed certified  
15 registered nurse anesthetists are authorized to select,  
16 order, and administer drugs and apply the appropriate  
17 medical devices in the provision of anesthesia services  
18 ~~under the anesthesia plan agreed with by the~~  
19 ~~anesthesiologist or, in the absence of an available~~  
20 ~~anesthesiologist with clinical privileges, agreed with by~~  
21 ~~the operating physician, operating dentist, or operating~~  
22 ~~podiatric physician~~ in accordance with the hospital's  
23 ~~alternative~~ policy.

24 (D) In accordance with the hospital's policies, a  
25 certified registered nurse anesthetist with clinical  
26 privileges may perform acts of advanced assessment and

1       diagnosis and may provide such functions for which the  
2       certified registered nurse anesthetist is educationally  
3       and experientially prepared and which are consistent with  
4       the standards established by the national credentialing or  
5       certification for the specialty recognized by the  
6       Department.

7       (Source: P.A. 99-642, eff. 7-28-16; 100-513, eff. 1-1-18.)

8           Section 20. The Illinois Dental Practice Act is amended by  
9       changing Section 8.1 as follows:

10           (225 ILCS 25/8.1) (from Ch. 111, par. 2308.1)

11           (Section scheduled to be repealed on January 1, 2026)

12           Sec. 8.1. Permit for the administration of anesthesia and  
13       sedation.

14           (a) No licensed dentist shall administer general  
15       anesthesia, deep sedation, or conscious sedation without first  
16       applying for and obtaining a permit for such purpose from the  
17       Department. The Department shall issue such permit only after  
18       ascertaining that the applicant possesses the minimum  
19       qualifications necessary to protect public safety. A person  
20       with a dental degree who administers anesthesia, deep  
21       sedation, or conscious sedation in an approved hospital  
22       training program under the supervision of either a licensed  
23       dentist holding such permit or a physician licensed to  
24       practice medicine in all its branches shall not be required to

1 obtain such permit.

2 (b) In determining the minimum permit qualifications that  
3 are necessary to protect public safety, the Department, by  
4 rule, shall:

5 (1) establish the minimum educational and training  
6 requirements necessary for a dentist to be issued an  
7 appropriate permit;

8 (2) establish the standards for properly equipped  
9 dental facilities (other than licensed hospitals and  
10 ambulatory surgical treatment centers) in which general  
11 anesthesia, deep sedation, or conscious sedation is  
12 administered, as necessary to protect public safety;

13 (3) establish minimum requirements for all persons who  
14 assist the dentist in the administration of general  
15 anesthesia, deep sedation, or conscious sedation,  
16 including minimum training requirements for each member of  
17 the dental team, monitoring requirements, recordkeeping  
18 requirements, and emergency procedures;

19 (4) ensure that the dentist has completed and  
20 maintains current certification in advanced cardiac life  
21 support or pediatric advanced life support and all persons  
22 assisting the dentist or monitoring the administration of  
23 general anesthesia, deep sedation, or conscious sedation  
24 maintain current certification in Basic Life Support  
25 (BLS); and

26 (5) establish continuing education requirements in

1           sedation techniques and airway management for dentists who  
2           possess a permit under this Section.

3           When establishing requirements under this Section, the  
4           Department shall consider the current American Dental  
5           Association guidelines on sedation and general anesthesia, the  
6           current "Guidelines for Monitoring and Management of Pediatric  
7           Patients During and After Sedation for Diagnostic and  
8           Therapeutic Procedures" established by the American Academy of  
9           Pediatrics and the American Academy of Pediatric Dentistry,  
10          and the current parameters of care and Office Anesthesia  
11          Evaluation (OAE) Manual established by the American  
12          Association of Oral and Maxillofacial Surgeons.

13          (c) (Blank). ~~A licensed dentist must hold an appropriate~~  
14 ~~permit issued under this Section in order to perform dentistry~~  
15 ~~while a nurse anesthetist administers conscious sedation, and~~  
16 ~~a valid written collaborative agreement must exist between the~~  
17 ~~dentist and the nurse anesthetist, in accordance with the~~  
18 ~~Nurse Practice Act.~~

19          ~~A licensed dentist must hold an appropriate permit issued~~  
20 ~~under this Section in order to perform dentistry while a nurse~~  
21 ~~anesthetist administers deep sedation or general anesthesia,~~  
22 ~~and a valid written collaborative agreement must exist between~~  
23 ~~the dentist and the nurse anesthetist, in accordance with the~~  
24 ~~Nurse Practice Act.~~

25          ~~For the purposes of this subsection (c), "nurse~~  
26 ~~anesthetist" means a licensed certified registered nurse~~

1 ~~anesthetist who holds a license as an advanced practice~~  
2 ~~registered nurse.~~

3 (Source: P.A. 100-201, eff. 8-18-17; 100-513, eff. 1-1-18;  
4 101-162, eff. 7-26-19.)

5 Section 25. The Medical Practice Act of 1987 is amended by  
6 changing Section 54.5 as follows:

7 (225 ILCS 60/54.5)

8 (Section scheduled to be repealed on January 1, 2027)

9 Sec. 54.5. Physician delegation of authority to physician  
10 assistants, advanced practice registered nurses without full  
11 practice authority, and prescribing psychologists.

12 (a) Physicians licensed to practice medicine in all its  
13 branches may delegate care and treatment responsibilities to a  
14 physician assistant under guidelines in accordance with the  
15 requirements of the Physician Assistant Practice Act of 1987.  
16 A physician licensed to practice medicine in all its branches  
17 may enter into collaborative agreements with no more than 7  
18 full-time equivalent physician assistants, except in a  
19 hospital, hospital affiliate, or ambulatory surgical treatment  
20 center as set forth by Section 7.7 of the Physician Assistant  
21 Practice Act of 1987 and as provided in subsection (a-5).

22 (a-5) A physician licensed to practice medicine in all its  
23 branches may collaborate with more than 7 physician assistants  
24 when the services are provided in a federal primary care

1 health professional shortage area with a Health Professional  
2 Shortage Area score greater than or equal to 12, as determined  
3 by the United States Department of Health and Human Services.

4 The collaborating physician must keep appropriate  
5 documentation of meeting this exemption and make it available  
6 to the Department upon request.

7 (b) A physician licensed to practice medicine in all its  
8 branches in active clinical practice may collaborate with an  
9 advanced practice registered nurse in accordance with the  
10 requirements of the Nurse Practice Act. Collaboration is for  
11 the purpose of providing medical consultation, and no  
12 employment relationship is required. A written collaborative  
13 agreement shall conform to the requirements of Section 65-35  
14 of the Nurse Practice Act. The written collaborative agreement  
15 shall be for services in the same area of practice or specialty  
16 as the collaborating physician in his or her clinical medical  
17 practice. A written collaborative agreement shall be adequate  
18 with respect to collaboration with advanced practice  
19 registered nurses if all of the following apply:

20 (1) The agreement is written to promote the exercise  
21 of professional judgment by the advanced practice  
22 registered nurse commensurate with his or her education  
23 and experience.

24 (2) The advanced practice registered nurse provides  
25 services based upon a written collaborative agreement with  
26 the collaborating physician, ~~except as set forth in~~

1 ~~subsection (b-5) of this Section.~~ With respect to labor  
2 and delivery, the collaborating physician must provide  
3 delivery services in order to participate with a certified  
4 nurse midwife.

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

9 (b-5) An anesthesiologist or physician licensed to  
10 practice medicine in all its branches may collaborate with a  
11 certified registered nurse anesthetist in accordance with  
12 Section 65-35 of the Nurse Practice Act for the provision of  
13 anesthesia services. Collaboration with respect to anesthesia  
14 ~~With respect to the provision of anesthesia services, the~~  
15 ~~collaborating anesthesiologist or physician shall have~~  
16 ~~training and experience in the delivery of anesthesia services~~  
17 ~~consistent with Department rules. Collaboration shall be~~  
18 ~~adequate if: (1) an anesthesiologist or a physician~~  
19 ~~participates in the joint formulation and joint approval of~~  
20 ~~orders or guidelines and periodically reviews such orders and~~  
21 ~~the services provided patients under such orders; and (2) for~~  
22 ~~anesthesia services, the anesthesiologist or physician~~  
23 ~~participates through discussion of and agreement with the~~  
24 ~~anesthesia plan and is physically present and available on the~~  
25 ~~premises during the delivery of anesthesia services for~~  
26 ~~diagnosis, consultation, and treatment of emergency medical~~



1 ~~conditions. Anesthesia~~ services in a hospital shall be  
2 conducted in accordance with Section 10.7 of the Hospital  
3 Licensing Act and in an ambulatory surgical treatment center  
4 in accordance with Section 6.5 of the Ambulatory Surgical  
5 Treatment Center Act.

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

9 (c) The collaborating physician shall have access to the  
10 medical records of all patients attended by a physician  
11 assistant. The collaborating physician shall have access to  
12 the medical records of all patients attended to by an advanced  
13 practice registered nurse.

14 (d) (Blank).

15 (e) A physician shall not be liable for the acts or  
16 omissions of a prescribing psychologist, physician assistant,  
17 or advanced practice registered nurse solely on the basis of  
18 having signed a supervision agreement or guidelines or a  
19 collaborative agreement, an order, a standing medical order, a  
20 standing delegation order, or other order or guideline  
21 authorizing a prescribing psychologist, physician assistant,  
22 or advanced practice registered nurse to perform acts, unless  
23 the physician has reason to believe the prescribing  
24 psychologist, physician assistant, or advanced practice  
25 registered nurse lacked the competency to perform the act or  
26 acts or commits willful and wanton misconduct.

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

6 (g) A collaborating physician may, but is not required to,  
7 delegate prescriptive authority to a physician assistant as  
8 part of a written collaborative agreement, and the delegation  
9 of prescriptive authority shall conform to the requirements of  
10 Section 7.5 of the Physician Assistant Practice Act of 1987.

11 (h) (Blank).

12 (i) A collaborating physician shall delegate prescriptive  
13 authority to a prescribing psychologist as part of a written  
14 collaborative agreement, and the delegation of prescriptive  
15 authority shall conform to the requirements of Section 4.3 of  
16 the Clinical Psychologist Licensing Act.

17 (j) As set forth in Section 22.2 of this Act, a licensee  
18 under this Act may not directly or indirectly divide, share,  
19 or split any professional fee or other form of compensation  
20 for professional services with anyone in exchange for a  
21 referral or otherwise, other than as provided in Section 22.2.

22 (Source: P.A. 99-173, eff. 7-29-15; 100-453, eff. 8-25-17;  
23 100-513, eff. 1-1-18; 100-605, eff. 1-1-19; 100-863, eff.  
24 8-14-18.)

25 Section 30. The Nurse Practice Act is amended by changing

1 Sections 65-35 and 65-45 and by adding Section 65-37 as  
2 follows:

3 (225 ILCS 65/65-35) (was 225 ILCS 65/15-15)

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

5 Sec. 65-35. Written collaborative agreements.

6 (a) A written collaborative agreement is required for all  
7 advanced practice registered nurses engaged in clinical  
8 practice prior to meeting the requirements of Section 65-43 or  
9 65-37, except for advanced practice registered nurses who are  
10 privileged to practice in a hospital, hospital affiliate, or  
11 ambulatory surgical treatment center.

12 (a-5) If an advanced practice registered nurse engages in  
13 clinical practice outside of a hospital, hospital affiliate,  
14 or ambulatory surgical treatment center in which he or she is  
15 privileged to practice, the advanced practice registered nurse  
16 must have a written collaborative agreement, except as set  
17 forth in Section 65-43 or 65-37.

18 (b) A written collaborative agreement shall describe the  
19 relationship of the advanced practice registered nurse with  
20 the collaborating physician and shall describe the categories  
21 of care, treatment, or procedures to be provided by the  
22 advanced practice registered nurse. A collaborative agreement  
23 with a podiatric physician must be in accordance with  
24 subsection (c-5) or (c-15) of this Section. A collaborative  
25 agreement with a dentist must be in accordance with subsection

1 (c-10) of this Section. A collaborative agreement with a  
2 podiatric physician must be in accordance with subsection  
3 (c-5) of this Section. Collaboration does not require an  
4 employment relationship between the collaborating physician  
5 and the advanced practice registered nurse.

6 The collaborative relationship under an agreement shall  
7 not be construed to require the personal presence of a  
8 collaborating physician at the place where services are  
9 rendered. Methods of communication shall be available for  
10 consultation with the collaborating physician in person or by  
11 telecommunications or electronic communications as set forth  
12 in the written agreement.

13 (b-5) Absent an employment relationship, a written  
14 collaborative agreement may not (1) restrict the categories of  
15 patients of an advanced practice registered nurse within the  
16 scope of the advanced practice registered nurses training and  
17 experience, (2) limit third party payors or government health  
18 programs, such as the medical assistance program or Medicare  
19 with which the advanced practice registered nurse contracts,  
20 or (3) limit the geographic area or practice location of the  
21 advanced practice registered nurse in this State.

22 (c) (Blank). ~~In the case of anesthesia services provided~~  
23 ~~by a certified registered nurse anesthetist, an~~  
24 ~~anesthesiologist, a physician, a dentist, or a podiatric~~  
25 ~~physician must participate through discussion of and agreement~~  
26 ~~with the anesthesia plan and remain physically present and~~

1 ~~available on the premises during the delivery of anesthesia~~  
2 ~~services for diagnosis, consultation, and treatment of~~  
3 ~~emergency medical conditions.~~

4 (c-5) A certified registered nurse anesthetist, who  
5 provides anesthesia services outside of a hospital or  
6 ambulatory surgical treatment center, shall enter into a  
7 written collaborative agreement with an anesthesiologist or  
8 the physician licensed to practice medicine in all its  
9 branches or the podiatric physician performing the procedure.

10 The collaborative agreement may, but is not required to,  
11 include the following terms: (i) that the certified registered  
12 nurse anesthetist and the anesthesiologist, physician, or  
13 podiatric physician participate through discussion of and  
14 reach agreement on the anesthesia plan; or (ii) that  
15 anesthesia services shall only be delivered when the  
16 anesthesiologist, physician, or podiatric physician is present  
17 and available on the premises for diagnosis, consultation, and  
18 treatment of emergency medical conditions. Outside of a

19 hospital or ambulatory surgical treatment center, the  
20 certified registered nurse anesthetist may provide only those  
21 services that the collaborating podiatric physician is  
22 authorized to provide pursuant to the Podiatric Medical  
23 Practice Act of 1987 and rules adopted thereunder. A certified  
24 registered nurse anesthetist may select, order, and administer  
25 medication, including controlled substances, and apply  
26 appropriate medical devices for delivery of anesthesia

1 services ~~under the anesthesia plan agreed with by the~~  
2 ~~anesthesiologist or the operating physician or operating~~  
3 ~~pediatric physician.~~

4 (c-10) A certified registered nurse anesthetist who  
5 provides anesthesia services in a dental office shall enter  
6 into a written collaborative agreement with an  
7 anesthesiologist or the physician licensed to practice  
8 medicine in all its branches or the operating dentist  
9 performing the procedure. The agreement shall describe the  
10 working relationship of the certified registered nurse  
11 anesthetist and dentist and shall authorize the categories of  
12 care, treatment, or procedures to be performed by the  
13 certified registered nurse anesthetist. The collaborative  
14 agreement may, but is not required to, include the following  
15 terms: (i) that the certified registered nurse anesthetist and  
16 the anesthesiologist, physician, or dentist participate  
17 through discussion of and reach agreement on the anesthesia  
18 plan; or (ii) that anesthesia services shall only be delivered  
19 when the anesthesiologist, physician, or dentist is present  
20 and available on the premises for diagnosis, consultation, and  
21 treatment of emergency medical conditions. ~~In a collaborating~~  
22 ~~dentist's office, the certified registered nurse anesthetist~~  
23 ~~may only provide those services that the operating dentist~~  
24 ~~with the appropriate permit is authorized to provide pursuant~~  
25 ~~to the Illinois Dental Practice Act and rules adopted~~  
26 ~~thereunder. For anesthesia services, an anesthesiologist,~~

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

11 (c-15) An advanced practice registered nurse who had a  
12 written collaborative agreement with a podiatric physician  
13 immediately before the effective date of Public Act 100-513  
14 may continue in that collaborative relationship or enter into  
15 a new written collaborative relationship with a podiatric  
16 physician under the requirements of this Section and Section  
17 65-40, as those Sections existed immediately before the  
18 amendment of those Sections by Public Act 100-513 with regard  
19 to a written collaborative agreement between an advanced  
20 practice registered nurse and a podiatric physician.

21 (d) A copy of the signed, written collaborative agreement  
22 must be available to the Department upon request from both the  
23 advanced practice registered nurse and the collaborating  
24 physician, dentist, or podiatric physician.

25 (e) Nothing in this Act shall be construed to limit the  
26 delegation of tasks or duties by a physician to a licensed

1 practical nurse, a registered professional nurse, or other  
2 persons in accordance with Section 54.2 of the Medical  
3 Practice Act of 1987. Nothing in this Act shall be construed to  
4 limit the method of delegation that may be authorized by any  
5 means, including, but not limited to, oral, written,  
6 electronic, standing orders, protocols, guidelines, or verbal  
7 orders.

8 (e-5) Nothing in this Act shall be construed to authorize  
9 an advanced practice registered nurse to provide health care  
10 services required by law or rule to be performed by a  
11 physician. The scope of practice of an advanced practice  
12 registered nurse does not include operative surgery. Nothing  
13 in this Section shall be construed to preclude an advanced  
14 practice registered nurse from assisting in surgery.

15 (f) An advanced practice registered nurse shall inform  
16 each collaborating physician, dentist, or podiatric physician  
17 of all collaborative agreements he or she has signed and  
18 provide a copy of these to any collaborating physician,  
19 dentist, or podiatric physician upon request.

20 (g) (Blank).

21 (Source: P.A. 100-513, eff. 1-1-18; 100-577, eff. 1-26-18;  
22 100-1096, eff. 8-26-18; 101-13, eff. 6-12-19.)

23 (225 ILCS 65/65-37 new)

24 Sec. 65-37. Full practice authority; certified registered  
25 nurse anesthetist.



1       (a) An Illinois-licensed advanced practice registered  
2 nurse certified as a certified registered nurse anesthetist  
3 may practice without a written collaborative agreement as set  
4 forth in this Section.

5       (b) An advanced practice registered nurse certified as a  
6 certified registered nurse anesthetist who (i) has attained  
7 national certification and completed a professional practice  
8 doctorate or (ii) files with the Department a notarized  
9 attestation of completion of at least 250 hours of continuing  
10 education or training and at least 4,000 hours of clinical  
11 experience after first attaining national certification shall  
12 not require a written collaborative agreement. Documentation  
13 of successful completion shall be provided to the Department  
14 upon request.

15       Continuing education or training hours required by this  
16 subsection shall be in the certified registered nurse  
17 anesthetist's area of certification as set forth by Department  
18 rule.

19       The clinical experience must be in the certified  
20 registered nurse anesthetist's area of certification. The  
21 clinical experience shall be in collaboration with a physician  
22 or physicians or a certified registered nurse anesthetist with  
23 full practice authority. Completion of the clinical experience  
24 must be attested to by the collaborating physician or  
25 physicians or employer, collaborating certified registered  
26 nurse anesthetist and the certified registered nurse

1 anesthetist. If the collaborating physician or physicians  
2 collaborating certified nurse anesthetist, or employer is  
3 unable to attest to the completion of the clinical experience,  
4 the Department may accept other evidence of clinical  
5 experience as established by rule.

6 (c) The scope of practice of a certified registered nurse  
7 anesthetist with full practice authority includes:

8 (1) all matters included in subsection (c) of Section  
9 65-30;

10 (2) practicing without a written collaborative  
11 agreement in all practice settings consistent with  
12 national certification;

13 (3) authority to prescribe both legend drugs and  
14 Schedule II through V controlled substances; this  
15 authority includes prescription of, selection of, orders  
16 for, administration of, storage of, acceptance of samples  
17 of, and dispensing over-the-counter medications, legend  
18 drugs, and controlled substances categorized as any  
19 Schedule II through V controlled substances, as defined in  
20 Article II of the Illinois Controlled Substances Act, and  
21 other preparations, including, but not limited to,  
22 botanical and herbal remedies;

23 (4) prescribing benzodiazepines or Schedule II  
24 narcotic drugs, such as opioids;

25 (5) authority to obtain an Illinois controlled  
26 substance license and a federal Drug Enforcement

1       Administration number;

2           (6) providing comprehensive pain management services,  
3       including acute, chronic, and interventional pain  
4       management; and

5           (7) delivery of the full range of anesthesia and  
6       related services.

7       (d) The Department shall adopt rules necessary to  
8       administer this Section, including, but not limited to,  
9       requiring the completion of forms and the payment of fees.

10       (e) Nothing in this Act shall be construed to authorize a  
11       certified registered nurse anesthetist with full practice  
12       authority to provide health care services required by law or  
13       rule to be performed by a physician.

14           (225 ILCS 65/65-45)   (was 225 ILCS 65/15-25)

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

16       Sec. 65-45. Advanced practice registered nursing in  
17       hospitals, hospital affiliates, or ambulatory surgical  
18       treatment centers.

19       (a) An advanced practice registered nurse may provide  
20       services in a hospital or a hospital affiliate as those terms  
21       are defined in the Hospital Licensing Act or the University of  
22       Illinois Hospital Act or a licensed ambulatory surgical  
23       treatment center without a written collaborative agreement  
24       pursuant to Section 65-35 of this Act. An advanced practice  
25       registered nurse must possess clinical privileges recommended

1 by the hospital medical staff and granted by the hospital or  
2 the consulting medical staff committee and ambulatory surgical  
3 treatment center in order to provide services. The medical  
4 staff or consulting medical staff committee shall periodically  
5 review the services of all advanced practice registered nurses  
6 granted clinical privileges, including any care provided in a  
7 hospital affiliate. Authority may also be granted when  
8 recommended by the hospital medical staff and granted by the  
9 hospital or recommended by the consulting medical staff  
10 committee and ambulatory surgical treatment center to  
11 individual advanced practice registered nurses to select,  
12 order, and administer medications, including controlled  
13 substances, to provide delineated care. In a hospital,  
14 hospital affiliate, or ambulatory surgical treatment center,  
15 the attending physician shall determine an advanced practice  
16 registered nurse's role in providing care for his or her  
17 patients, except as otherwise provided in the medical staff  
18 bylaws or consulting committee policies.

19 (a-2) An advanced practice registered nurse privileged to  
20 order medications, including controlled substances, may  
21 complete discharge prescriptions provided the prescription is  
22 in the name of the advanced practice registered nurse and the  
23 attending or discharging physician.

24 (a-3) Advanced practice registered nurses practicing in a  
25 hospital or an ambulatory surgical treatment center are not  
26 required to obtain a mid-level controlled substance license to

1 order controlled substances under Section 303.05 of the  
2 Illinois Controlled Substances Act.

3 (a-4) An advanced practice registered nurse meeting the  
4 requirements of Section 65-43 may be privileged to complete  
5 discharge orders and prescriptions under the advanced practice  
6 registered nurse's name.

7 (a-5) ~~For anesthesia services provided by a certified~~  
8 ~~registered nurse anesthetist, an anesthesiologist, physician,~~  
9 ~~dentist, or podiatric physician shall participate through~~  
10 ~~discussion of and agreement with the anesthesia plan and shall~~  
11 ~~remain physically present and be available on the premises~~  
12 ~~during the delivery of anesthesia services for diagnosis,~~  
13 ~~consultation, and treatment of emergency medical conditions,~~  
14 ~~unless hospital policy adopted pursuant to clause (B) of~~  
15 ~~subdivision (3) of Section 10.7 of the Hospital Licensing Act~~  
16 ~~or ambulatory surgical treatment center policy adopted~~  
17 ~~pursuant to clause (B) of subdivision (3) of Section 6.5 of the~~  
18 ~~Ambulatory Surgical Treatment Center Act provides otherwise. A~~  
19 certified registered nurse anesthetist may select, order, and  
20 administer medication for anesthesia services ~~under the~~  
21 ~~anesthesia plan agreed to by the anesthesiologist or the~~  
22 ~~physician,~~ in accordance with hospital ~~alternative~~ policy or  
23 the medical staff consulting committee policies of a licensed  
24 ambulatory surgical treatment center.

25 (b) An advanced practice registered nurse who provides  
26 services in a hospital shall do so in accordance with Section

1 10.7 of the Hospital Licensing Act and, in an ambulatory  
2 surgical treatment center, in accordance with Section 6.5 of  
3 the Ambulatory Surgical Treatment Center Act. Nothing in this  
4 Act shall be construed to require an advanced practice  
5 registered nurse to have a collaborative agreement to practice  
6 in a hospital, hospital affiliate, or ambulatory surgical  
7 treatment center.

8 (c) Advanced practice registered nurses certified as nurse  
9 practitioners, certified registered nurse anesthetists, nurse  
10 midwives, or clinical nurse specialists practicing in a  
11 hospital affiliate may be, but are not required to be,  
12 privileged to prescribe Schedule II through V controlled  
13 substances when such authority is recommended by the  
14 appropriate physician committee of the hospital affiliate and  
15 granted by the hospital affiliate. This authority may, but is  
16 not required to, include prescription of, selection of, orders  
17 for, administration of, storage of, acceptance of samples of,  
18 and dispensing over-the-counter medications, legend drugs,  
19 medical gases, and controlled substances categorized as  
20 Schedule II through V controlled substances, as defined in  
21 Article II of the Illinois Controlled Substances Act, and  
22 other preparations, including, but not limited to, botanical  
23 and herbal remedies.

24 To prescribe controlled substances under this subsection  
25 (c), an advanced practice registered nurse certified as a  
26 nurse practitioner, nurse midwife, or clinical nurse

1 specialist must obtain a controlled substance license.  
2 Medication orders shall be reviewed periodically by the  
3 appropriate hospital affiliate physicians committee or its  
4 physician designee.

5 The hospital affiliate shall file with the Department  
6 notice of a grant of prescriptive authority consistent with  
7 this subsection (c) and termination of such a grant of  
8 authority, in accordance with rules of the Department. Upon  
9 receipt of this notice of grant of authority to prescribe any  
10 Schedule II through V controlled substances, the licensed  
11 advanced practice registered nurse certified as a nurse  
12 practitioner, nurse midwife, or clinical nurse specialist may  
13 register for a mid-level practitioner controlled substance  
14 license under Section 303.05 of the Illinois Controlled  
15 Substances Act.

16 In addition, a hospital affiliate may, but is not required  
17 to, privilege an advanced practice registered nurse certified  
18 as a nurse practitioner, certified registered nurse  
19 anesthetist, nurse midwife, or clinical nurse specialist to  
20 prescribe any Schedule II controlled substances, if all of the  
21 following conditions apply:

22 (1) specific Schedule II controlled substances by oral  
23 dosage or topical or transdermal application may be  
24 designated, provided that the designated Schedule II  
25 controlled substances are routinely prescribed by advanced  
26 practice registered nurses in their area of certification;

1 the privileging documents must identify the specific  
2 Schedule II controlled substances by either brand name or  
3 generic name; privileges to prescribe or dispense Schedule  
4 II controlled substances to be delivered by injection or  
5 other route of administration may not be granted;

6 (2) any privileges must be controlled substances  
7 limited to the practice of the advanced practice  
8 registered nurse;

9 (3) any prescription must be limited to no more than a  
10 30-day supply;

11 (4) the advanced practice registered nurse must  
12 discuss the condition of any patients for whom a  
13 controlled substance is prescribed monthly with the  
14 appropriate physician committee of the hospital affiliate  
15 or its physician designee; and

16 (5) the advanced practice registered nurse must meet  
17 the education requirements of Section 303.05 of the  
18 Illinois Controlled Substances Act.

19 (d) An advanced practice registered nurse meeting the  
20 requirements of Section 65-43 or 65-37 may be privileged to  
21 prescribe controlled substances categorized as Schedule II  
22 through V in accordance with Section 65-43.

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

24 Section 35. The Podiatric Medical Practice Act of 1987 is  
25 amended by changing Section 20.5 as follows:



1 (225 ILCS 100/20.5)

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

3 Sec. 20.5. Delegation of authority to advanced practice  
4 registered nurses.

5 (a) A podiatric physician in active clinical practice may  
6 collaborate with an advanced practice registered nurse in  
7 accordance with the requirements of the Nurse Practice Act.  
8 Collaboration shall be for the purpose of providing podiatric  
9 care and no employment relationship shall be required. A  
10 written collaborative agreement shall conform to the  
11 requirements of Section 65-35 of the Nurse Practice Act. A  
12 written collaborative agreement and podiatric physician  
13 collaboration and consultation shall be adequate with respect  
14 to advanced practice registered nurses if all of the following  
15 apply:

16 (1) With respect to the provision of anesthesia  
17 services by a certified registered nurse anesthetist, the  
18 collaborating podiatric physician must have training and  
19 experience in the delivery of anesthesia consistent with  
20 Department rules unless the certified registered nurse  
21 anesthetist has full practice authority under the  
22 requirements of Section 65-37.

23 (2) Methods of communication are available with the  
24 collaborating podiatric physician in person or through  
25 telecommunications or electronic communications for

1 consultation, collaboration, and referral as needed to  
2 address patient care needs.

3 (3) (Blank). ~~With respect to the provision of~~  
4 ~~anesthesia services by a certified registered nurse~~  
5 ~~anesthetist, an anesthesiologist, physician, or podiatric~~  
6 ~~physician shall participate through discussion of and~~  
7 ~~agreement with the anesthesia plan and shall remain~~  
8 ~~physically present and be available on the premises during~~  
9 ~~the delivery of anesthesia services for diagnosis,~~  
10 ~~consultation, and treatment of emergency medical~~  
11 ~~conditions. The anesthesiologist or operating podiatric~~  
12 ~~physician must agree with the anesthesia plan prior to the~~  
13 ~~delivery of services.~~

14 (b) The collaborating podiatric physician shall have  
15 access to the records of all patients attended to by an  
16 advanced practice registered nurse.

17 (c) Nothing in this Section shall be construed to limit  
18 the delegation of tasks or duties by a podiatric physician to a  
19 licensed practical nurse, a registered professional nurse, or  
20 other appropriately trained persons.

21 (d) A podiatric physician shall not be liable for the acts  
22 or omissions of an advanced practice registered nurse solely  
23 on the basis of having signed guidelines or a collaborative  
24 agreement, an order, a standing order, a standing delegation  
25 order, or other order or guideline authorizing an advanced  
26 practice registered nurse to perform acts, unless the

1     podiatric physician has reason to believe the advanced  
2     practice registered nurse lacked the competency to perform the  
3     act or acts or commits willful or wanton misconduct.

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

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

10            Section 99. Effective date. This Act takes effect upon  
11     becoming law."