

1 AMENDMENT TO SENATE BILL 217

2 AMENDMENT NO. _____. Amend Senate Bill 217 by replacing
3 the title with the following:

4 "AN ACT concerning the licensure of nurses."; and

5 by replacing everything after the enacting clause with the
6 following:

7 "ARTICLE 5

8 Section 5-1. Short title. This Article may be cited as
9 the Advanced Practice Registered Nurse Compact Act.

10 Section 5-5. Ratification and approval of compact. The
11 advanced practice registered nurse compact is hereby enacted
12 into law and entered into on behalf of this State with any
13 state that legally joins therein in substantially the
14 following form:

15 ARTICLE I

16 Findings and Declaration of Purpose

17 (a) The party states find that:

18 (1) The health and safety of the public are
19 affected by the degree of compliance with APRN

1 licensure/authority to practice requirements and the
2 effectiveness of enforcement activities related to state
3 APRN licensure/authority to practice laws;

4 (2) Violations of APRN licensure/authority to
5 practice and other laws regulating the practice of
6 nursing may result in injury or harm to the public;

7 (3) The expanded mobility of APRNs and the use of
8 advanced communication technologies as part of our
9 nation's health care delivery system require greater
10 coordination and cooperation among states in the areas of
11 APRN licensure/authority to practice and regulation;

12 (4) New practice modalities and technology make
13 compliance with individual state APRN licensure/authority
14 to practice laws difficult and complex;

15 (5) The current system of duplicative APRN
16 licensure/authority to practice for APRNs practicing in
17 multiple states is cumbersome and redundant to both APRNs
18 and states;

19 (6) Uniformity of APRN requirements throughout the
20 states promotes public safety and public health benefits;
21 and

22 (7) Access to APRN services increases the public's
23 access to health care, particularly in rural and
24 underserved areas.

25 (b) The general purposes of this Compact are to:

26 (1) Facilitate the states' responsibilities to
27 protect the public's health and safety;

28 (2) Ensure and encourage the cooperation of party
29 states in the areas of APRN licensure/authority to
30 practice and regulation including promotion of uniform
31 licensure requirements;

32 (3) Facilitate the exchange of information between
33 party states in the areas of APRN regulation,
34 investigation and adverse actions;

1 boards.

2 (g) "Current significant investigative information"
3 means:

4 (1) Investigative information that a licensing
5 board, after a preliminary inquiry that includes
6 notification and an opportunity for the APRN to respond
7 if required by state law, has reason to believe is not
8 groundless and, if proved true, would indicate more than
9 a minor infraction; or

10 (2) Investigative information that indicates that
11 the APRN represents an immediate threat to public health
12 and safety regardless of whether the APRN has been
13 notified and had an opportunity to respond.

14 (h) "Home state" means the party state that is the
15 APRN's primary state of residence.

16 (i) "Home state action" means any administrative, civil,
17 equitable or criminal action permitted by the home state's
18 laws which are imposed on an APRN by the home state's
19 licensing board or other authority including actions against
20 an individual's license/authority to practice such as:
21 revocation, suspension, probation or any other action which
22 affects an APRN's authorization to practice.

23 (j) "Licensing board" means a party state's regulatory
24 body responsible for issuing APRN licensure/authority to
25 practice.

26 (k) "Multistate advanced practice privilege" means
27 current, authority from a remote state permitting an APRN to
28 practice in that state in the same role and title as the APRN
29 is licensed/authorized to practice in the home state to the
30 extent that the remote state laws recognize such APRN role
31 and title. A remote state has the authority, in accordance
32 with existing state due process laws, to take actions against
33 the APRN's privilege, including revocation, suspension,
34 probation, or any other action that affects an APRN's

1 multistate privilege to practice.

2 (l) "Party state" means any state that has adopted this
3 Compact.

4 (m) "Prescriptive authority" means the legal authority
5 to prescribe medications and devices as defined by party
6 state laws.

7 (n) "Remote state" means a party state, other than the
8 home state,

9 (1) Where the patient is located at the time APRN
10 care is provided, or,

11 (2) In the case of APRN practice not involving a
12 patient, in such party state where the recipient of APRN
13 practice is located.

14 (o) "Remote state action" means

15 (1) Any administrative, civil, equitable or
16 criminal action permitted by a remote state's laws which
17 are imposed on an APRN by the remote state's licensing
18 board or other authority including actions against an
19 individual's multistate advanced practice privilege in
20 the remote state, and

21 (2) Cease and desist and other injunctive or
22 equitable orders issued by remote states or the licensing
23 boards thereof.

24 (p) "State" means a state, territory, or possession of
25 the United States.

26 (q) "State practice laws" means a party state's laws and
27 regulations that govern APRN practice, define the scope of
28 advanced nursing practice including prescriptive authority,
29 and create the methods and grounds for imposing discipline.
30 State practice laws do not include the requirements necessary
31 to obtain and retain APRN licensure/authority to practice as
32 an APRN, except for qualifications or requirements of the
33 home state.

34 (r) "Unencumbered" means that a state has no current

1 disciplinary action against an APRN's license/authority to
2 practice.

3 ARTICLE III

4 General Provisions and Jurisdiction

5 (a) All party states shall participate in the Nurse
6 Licensure Compact for registered nurses and licensed
7 practical/vocational nurses in order to enter into the APRN
8 Compact.

9 (b) No state shall enter the APRN Compact until the
10 state adopts, at a minimum, the APRN Uniform
11 Licensure/Authority to Practice Requirements for each APRN
12 role and title recognized by the state seeking to enter the
13 APRN Compact.

14 (c) APRN Licensure/Authority to practice issued by a
15 home state to a resident in that state will be recognized by
16 each party state as authorizing a multistate advanced
17 practice privilege to the extent that the role and title are
18 recognized by each party state. To obtain or retain APRN
19 licensure/authority to practice as an APRN, an applicant must
20 meet the home state's qualifications for authority or renewal
21 of authority as well as all other applicable state laws.

22 (d) The APRN multistate advanced practice privilege does
23 not include prescriptive authority, and does not affect any
24 requirements imposed by states to grant to an APRN initial
25 and continuing prescriptive authority according to state
26 practice laws. However, a party state may grant prescriptive
27 authority to an individual on the basis of a multistate
28 advanced practice privilege to the extent permitted by state
29 practice laws.

30 (e) A party state may, in accordance with state due
31 process laws, limit or revoke the multistate advanced
32 practice privilege in the party state and may take any other
33 necessary actions under the party state's applicable laws to

1 protect the health and safety of the party state's citizens.
2 If a party state takes action, the party state shall promptly
3 notify the administrator of the coordinated licensure
4 information system. The administrator of the coordinated
5 licensure information system shall promptly notify the home
6 state of any such actions by remote states.

7 (f) An APRN practicing in a party state must comply with
8 the state practice laws of the state in which the patient is
9 located at the time care is provided. The APRN practice
10 includes patient care and all advanced nursing practice
11 defined by the party state's practice laws. The APRN
12 practice will subject an APRN to the jurisdiction of the
13 licensing board, the courts, and the laws of the party state.

14 (g) Individuals not residing in a party state may apply
15 for APRN licensure/authority to practice as an APRN under the
16 laws of a party state. However, the authority to practice
17 granted to these individuals will not be recognized as
18 granting the privilege to practice as an APRN in any other
19 party state unless explicitly agreed to by that party state.

20 ARTICLE IV

21 Applications for APRN Licensure/Authority
22 to Practice in a Party State

23 (a) Once an application for APRN licensure/authority to
24 practice is submitted, a party state shall ascertain, through
25 the Coordinated Licensure Information System, whether:

26 (1) The applicant has held or is the holder of a
27 nursing license/authority to practice issued by another
28 state;

29 (2) The applicant has had a history of previous
30 disciplinary action by any state;

31 (3) An encumbrance exists on any license/authority
32 to practice; and

33 (4) Any other adverse action by any other state has

1 Article III, the following provisions apply:

2 (a) The licensing board of a remote state shall promptly
3 report to the administrator of the coordinated licensure
4 information system any remote state actions including the
5 factual and legal basis for such action, if known. The
6 licensing board of a remote state shall also promptly report
7 any significant current investigative information yet to
8 result in a remote state action. The administrator of the
9 coordinated licensure information system shall promptly
10 notify the home state of any such reports.

11 (b) The licensing board of a party state shall have the
12 authority to complete any pending investigations for an APRN
13 who changes primary state of residence during the course of
14 such investigations. It shall also have the authority to take
15 appropriate action(s), and shall promptly report the
16 conclusions of such investigations to the administrator of
17 the coordinated licensure information system. The
18 administrator of the coordinated licensure information system
19 shall promptly notify the new home state of any such actions.

20 (c) A remote state may take adverse action affecting the
21 multistate advanced practice privilege to practice within
22 that party state. However, only the home state shall have the
23 power to impose adverse action against the APRN
24 licensure/authority to practice issued by the home state.

25 (d) For purposes of imposing adverse action, the
26 licensing board of the home state shall give the same
27 priority and effect to reported conduct received from a
28 remote state as it would if such conduct had occurred within
29 the home state. In so doing, it shall apply its own state
30 laws to determine appropriate action.

31 (e) The home state may take adverse action based on the
32 factual findings of the remote state, so long as each state
33 follows its own procedures for imposing such adverse action.

34 (f) Nothing in this Compact shall override a party

1 state's decision that participation in an alternative program
2 may be used in lieu of adverse action and that such
3 participation shall remain non-public if required by the
4 party state's laws. Party states must require APRNs who enter
5 any alternative programs to agree not to practice in any
6 other party state during the term of the alternative program
7 without prior authorization from such other party state.

8 (g) All home state licensing board disciplinary orders,
9 agreed or otherwise, which limit the scope of the APRN's
10 practice or require monitoring of the APRN as a condition of
11 the order shall include the requirements that the APRN will
12 limit her or his practice to the home state during the
13 pendency of the order. This requirement may allow the APRN to
14 practice in other party states with prior written
15 authorization from both the home state and party state
16 licensing boards.

17 ARTICLE VI

18 Additional Authorities Invested in Party State

19 Licensing Boards

20 Notwithstanding any other powers, party state licensing
21 boards shall have the authority to:

22 (a) If otherwise permitted by state law, recover from
23 the affected APRN the costs of investigations and disposition
24 of cases resulting from any adverse action taken against that
25 APRN;

26 (b) Issue subpoenas for both hearings and
27 investigations, which require the attendance and testimony of
28 witnesses, and the production of evidence. Subpoenas issued
29 by a licensing board in a party state for the attendance and
30 testimony of witnesses, and/or the production of evidence
31 from another party state, shall be enforced in the latter
32 state by any court of competent jurisdiction, according to
33 the practice and procedure of that court applicable to

1 subpoenas issued in proceedings pending before it. The
2 issuing authority shall pay any witness fees, travel
3 expenses, mileage and other fees required by the service
4 statutes of the state where the witnesses and/or evidence are
5 located;

6 (c) Issue cease and desist orders to limit or revoke an
7 APRN's privilege or licensure/authority to practice in their
8 state; and

9 (d) Promulgate uniform rules and regulations as provided
10 for in Article VIII(c).

11 ARTICLE VII

12 Coordinated Licensure Information System

13 (a) All party states shall participate in a cooperative
14 effort to create a coordinated database of all APRNs. This
15 system will include information on the APRN
16 licensure/authority to practice and disciplinary history of
17 each APRN, as contributed by party states, to assist in the
18 coordination of APRN licensure/authority to practice and
19 enforcement efforts.

20 (b) Notwithstanding any other provision of law, all
21 party states' licensing boards shall promptly report adverse
22 actions, actions against multistate advanced practice
23 privileges, any current significant investigative information
24 yet to result in adverse action, denials of applications, and
25 the reasons for such denials, to the coordinated licensure
26 information system.

27 (c) Current significant investigative information shall
28 be transmitted through the coordinated licensure information
29 system only to party state licensing boards.

30 (d) Notwithstanding any other provision of law, all
31 party states' licensing boards contributing information to
32 the coordinated licensure information system may designate
33 information that may not be shared with non-party states or

1 disclosed to other entities or individuals without the
2 express permission of the contributing state.

3 (e) Any personally identifiable information obtained by
4 a party states' licensing board from the coordinated
5 licensure information system may not be shared with non-party
6 states or disclosed to other entities or individuals except
7 to the extent permitted by the laws of the party state
8 contributing the information.

9 (f) Any information contributed to the coordinated
10 licensure information system that is subsequently required to
11 be expunged by the laws of the party state contributing that
12 information, shall also be expunged from the coordinated
13 licensure information system.

14 (g) The Compact administrators, acting jointly with each
15 other and in consultation with the administrator of the
16 coordinated licensure information system, shall formulate
17 necessary and proper procedures for the identification,
18 collection and exchange of information under this Compact.

19 ARTICLE VIII

20 Compact Administration and Interchange of Information

21 (a) The head of the licensing board, or his/her
22 designee, of each party state shall be the administrator of
23 this Compact for his/her state.

24 (b) The Compact administrator of each party state shall
25 furnish to the Compact administrator of each other party
26 state any information and documents including, but not
27 limited to, a uniform data set of investigations, identifying
28 information, licensure data, and disclosable alternative
29 program participation information to facilitate the
30 administration of this Compact.

31 (c) Compact administrators shall have the authority to
32 develop uniform rules to facilitate and coordinate
33 implementation of this Compact. These uniform rules shall be

1 adopted by party states, under the authority invested under
2 Article VI (d).

3 ARTICLE IX

4 Immunity

5 No party state or the officers or employees or agents of
6 a party state's licensing board who acts in accordance with
7 the provisions of this Compact shall be liable on account of
8 any act or omission in good faith while engaged in the
9 performance of their duties under this Compact. Good faith in
10 this article shall not include willful misconduct, gross
11 negligence, or recklessness.

12 ARTICLE X

13 Entry into Force, Withdrawal and Amendment

14 (a) This Compact shall enter into force and become
15 effective as to any state when it has been enacted into the
16 laws of that state. Any party state may withdraw from this
17 Compact by enacting a statute repealing the same, but no such
18 withdrawal shall take effect until six months after the
19 withdrawing state has given notice of the withdrawal to the
20 executive heads of all other party states.

21 (b) No withdrawal shall affect the validity or
22 applicability by the licensing boards of states remaining
23 party to the Compact of any report of adverse action
24 occurring prior to the withdrawal.

25 (c) Nothing contained in this Compact shall be construed
26 to invalidate or prevent any APRN licensure/authority to
27 practice agreement or other cooperative arrangement between a
28 party state and a non-party state that is made in accordance
29 with the other provisions of this Compact.

30 (d) This Compact may be amended by the party states. No
31 amendment to this Compact shall become effective and binding

1 upon the party states unless and until it is enacted into the
2 laws of all party states.

3 ARTICLE XI

4 Construction and Severability

5 (a) This Compact shall be liberally construed so as to
6 effectuate the purposes thereof. The provisions of this
7 Compact shall be severable and if any phrase, clause,
8 sentence or provision of this Compact is declared to be
9 contrary to the constitution of any party state or of the
10 United States or the applicability thereof to any government,
11 agency, person or circumstance is held invalid, the validity
12 of the remainder of this Compact and the applicability
13 thereof to any government, agency, person or circumstance
14 shall not be affected thereby. If this Compact shall be held
15 contrary to the constitution of any state party thereto, the
16 Compact shall remain in full force and effect as to the
17 remaining party states and in full force and effect as to the
18 party state affected as to all severable matters.

19 (b) In the event party states find a need for settling
20 disputes arising under this Compact:

21 (1) The party states may submit the issues in
22 dispute to an arbitration panel which will be comprised
23 of an individual appointed by the Compact administrator
24 in the home state; an individual appointed by the Compact
25 administrator in the remote state(s) involved; and an
26 individual mutually agreed upon by the Compact
27 administrators of all the party states involved in the
28 dispute.

29 (2) The decision of a majority of the arbitrators
30 shall be final and binding.

31 Section 5-10. Compact administrator; expenses. The
32 Director of Professional Regulation shall serve as the

1 compact administrator for this State and any expenses he or
2 she incurs in so serving shall be paid from the appropriation
3 for the ordinary and contingent expenses of the Department of
4 Professional Regulation.

5 ARTICLE 10

6 Section 10-1. Short title. This Article may be cited as
7 the Nurse Licensure Compact Act.

8 Section 10-5. Nurse Licensure Compact. The State of
9 Illinois ratifies and approves the Nurse Licensure Compact
10 and enters into it with all other jurisdictions that legally
11 join in the compact, which is, in form, substantially as
12 follows:

13 ARTICLE I. Findings and Declaration of Purpose

14 (a) The party states find that:

15 (1) the health and safety of the public are
16 affected by the degree of compliance with and the
17 effectiveness of enforcement activities related to state
18 nurse licensure laws;

19 (2) violations of nurse licensure and other laws
20 regulating the practice of nursing may result in injury
21 or harm to the public;

22 (3) the expanded mobility of nurses and the use of
23 advanced communication technologies as part of our
24 nation's healthcare delivery system require greater
25 coordination and cooperation among states in the areas of
26 nurse licensure and regulation;

27 (4) new practice modalities and technology make
28 compliance with individual state nurse licensure laws
29 difficult and complex;

30 (5) the current system of duplicative licensure for

1 nurses practicing in multiple states is cumbersome and
2 redundant to both nurses and states.

3 (b) The general purposes of this Compact are to:

4 (1) facilitate the states' responsibility to
5 protect the public's health and safety;

6 (2) ensure and encourage the cooperation of party
7 states in the areas of nurse licensure and regulation;

8 (3) facilitate the exchange of information between
9 party states in the areas of nurse regulation,
10 investigation and adverse actions;

11 (4) promote compliance with the laws governing the
12 practice of nursing in each jurisdiction;

13 (5) invest all party states with the authority to
14 hold a nurse accountable for meeting all state practice
15 laws in the state in which the patient is located at the
16 time care is rendered through the mutual recognition of
17 party state licenses.

18 ARTICLE II. Definitions

19 As used in this Compact:

20 (a) "Adverse Action" means a home or remote state
21 action.

22 (b) "Alternative program" means a voluntary,
23 non-disciplinary monitoring program approved by a nurse
24 licensing board.

25 (c) "Coordinated licensure information system" means an
26 integrated process for collecting, storing, and sharing
27 information on nurse licensure and enforcement activities
28 related to nurse licensure laws, which is administered by a
29 non-profit organization composed of and controlled by state
30 nurse licensing boards.

31 (d) "Current significant investigative information"
32 means:

33 (1) investigative information that a licensing

1 board, after a preliminary inquiry that includes
2 notification and an opportunity for the nurse to respond
3 if required by state law, has reason to believe is not
4 groundless and, if proved true, would indicate more than
5 a minor infraction; or

6 (2) investigative information that indicates that
7 the nurse represents an immediate threat to public health
8 and safety regardless of whether the nurse has been
9 notified and had an opportunity to respond.

10 (e) "Home state" means the party state which is the
11 nurse's primary state of residence.

12 (f) "Home state action" means any administrative, civil,
13 equitable or criminal action permitted by the home state's
14 laws which are imposed on a nurse by the home state's
15 licensing board or other authority including actions against
16 an individual's license such as: revocation, suspension,
17 probation or any other action which affects a nurse's
18 authorization to practice.

19 (g) "Licensing board" means a party state's regulatory
20 body responsible for issuing nurse licenses.

21 (h) "Multistate licensure privilege" means current,
22 official authority from a remote state permitting the
23 practice of nursing as either a registered nurse or a
24 licensed practical/vocational nurse in such party state. All
25 party states have the authority, in accordance with existing
26 state due process law, to take actions against the nurse's
27 privilege such as: revocation, suspension, probation or any
28 other action which affects a nurse's authorization to
29 practice.

30 (i) "Nurse" means a registered nurse or licensed
31 practical/vocational nurse, as those terms are defined by
32 each party's state practice laws.

33 (j) "Party state" means any state that has adopted this
34 Compact.

1 (k) "Remote state" means a party state, other than the
2 home state,

3 (1) where the patient is located at the time
4 nursing care is provided, or,

5 (2) in the case of the practice of nursing not
6 involving a patient, in such party state where the
7 recipient of nursing practice is located.

8 (l) "Remote state action" means

9 (1) any administrative, civil, equitable or
10 criminal action permitted by a remote state's laws which
11 are imposed on a nurse by the remote state's licensing
12 board or other authority including actions against an
13 individual's multistate licensure privilege to practice
14 in the remote state, and

15 (2) cease and desist and other injunctive or
16 equitable orders issued by remote states or the licensing
17 boards thereof.

18 (m) "State" means a state, territory, or possession of
19 the United States, the District of Columbia or the
20 Commonwealth of Puerto Rico.

21 (n) "State practice laws" means those individual party's
22 state laws and regulations that govern the practice of
23 nursing, define the scope of nursing practice, and create the
24 methods and grounds for imposing discipline. "State practice
25 laws" does not include the initial qualifications for
26 licensure or requirements necessary to obtain and retain a
27 license, except for qualifications or requirements of the
28 home state.

29 ARTICLE III. General Provisions and Jurisdiction

30 (a) A license to practice registered nursing issued by a
31 home state to a resident in that state will be recognized by
32 each party state as authorizing a multistate licensure
33 privilege to practice as a registered nurse in such party

1 state. A license to practice licensed practical/vocational
2 nursing issued by a home state to a resident in that state
3 will be recognized by each party state as authorizing a
4 multistate licensure privilege to practice as a licensed
5 practical/vocational nurse in such party state. In order to
6 obtain or retain a license, an applicant must meet the home
7 state's qualifications for licensure and license renewal as
8 well as all other applicable state laws.

9 (b) Party states may, in accordance with state due
10 process laws, limit or revoke the multistate licensure
11 privilege of any nurse to practice in their state and may
12 take any other actions under their applicable state laws
13 necessary to protect the health and safety of their citizens.
14 If a party state takes such action, it shall promptly notify
15 the administrator of the coordinated licensure information
16 system. The administrator of the coordinated licensure
17 information system shall promptly notify the home state of
18 any such actions by remote states.

19 (c) Every nurse practicing in a party state must comply
20 with the state practice laws of the state in which the
21 patient is located at the time care is rendered. In addition,
22 the practice of nursing is not limited to patient care, but
23 shall include all nursing practice as defined by the state
24 practice laws of a party state. The practice of nursing will
25 subject a nurse to the jurisdiction of the nurse licensing
26 board and the courts, as well as the laws, in that party
27 state.

28 (d) This Compact does not affect additional requirements
29 imposed by states for advanced practice registered nursing.
30 However, a multistate licensure privilege to practice
31 registered nursing granted by a party state shall be
32 recognized by other party states as a license to practice
33 registered nursing if one is required by state law as a
34 precondition for qualifying for advanced practice registered

1 nurse authorization.

2 (e) Individuals not residing in a party state shall
3 continue to be able to apply for nurse licensure as provided
4 for under the laws of each party state. However, the license
5 granted to these individuals will not be recognized as
6 granting the privilege to practice nursing in any other party
7 state unless explicitly agreed to by that party state.

8 ARTICLE IV. Applications for Licensure in a Party State

9 (a) Upon application for a license, the licensing board
10 in a party state shall ascertain, through the coordinated
11 licensure information system, whether the applicant has ever
12 held, or is the holder of, a license issued by any other
13 state, whether there are any restrictions on the multistate
14 licensure privilege, and whether any other adverse action by
15 any state has been taken against the license.

16 (b) A nurse in a party state shall hold licensure in
17 only one party state at a time, issued by the home state.

18 (c) A nurse who intends to change primary state of
19 residence may apply for licensure in the new home state in
20 advance of such change. However, new licenses will not be
21 issued by a party state until after a nurse provides evidence
22 of change in primary state of residence satisfactory to the
23 new home state's licensing board.

24 (d) When a nurse changes primary state of residence by:

25 (1) moving between two party states, and obtains a
26 license from the new home state, the license from the
27 former home state is no longer valid;

28 (2) moving from a non-party state to a party state,
29 and obtains a license from the new home state, the
30 individual state license issued by the non-party state is
31 not affected and will remain in full force if so provided
32 by the laws of the non-party state;

33 (3) moving from a party state to a non-party state,

1 the license issued by the prior home state converts to an
2 individual state license, valid only in the former home
3 state, without the multistate licensure privilege to
4 practice in other party states.

5 ARTICLE V. Adverse Actions

6 In addition to the General Provisions described in
7 Article III, the following provisions apply:

8 (a) The licensing board of a remote state shall promptly
9 report to the administrator of the coordinated licensure
10 information system any remote state actions including the
11 factual and legal basis for such action, if known. The
12 licensing board of a remote state shall also promptly report
13 any significant current investigative information yet to
14 result in a remote state action. The administrator of the
15 coordinated licensure information system shall promptly
16 notify the home state of any such reports.

17 (b) The licensing board of a party state shall have the
18 authority to complete any pending investigations for a nurse
19 who changes primary state of residence during the course of
20 such investigations. It shall also have the authority to take
21 appropriate action(s), and shall promptly report the
22 conclusions of such investigations to the administrator of
23 the coordinated licensure information system. The
24 administrator of the coordinated licensure information system
25 shall promptly notify the new home state of any such actions.

26 (c) A remote state may take adverse action affecting the
27 multistate licensure privilege to practice within that party
28 state. However, only the home state shall have the power to
29 impose adverse action against the license issued by the home
30 state.

31 (d) For purposes of imposing adverse action, the
32 licensing board of the home state shall give the same
33 priority and effect to reported conduct received from a

1 remote state as it would if such conduct had occurred within
2 the home state. In so doing, it shall apply its own state
3 laws to determine appropriate action.

4 (e) The home state may take adverse action based on the
5 factual findings of the remote state, so long as each state
6 follows its own procedures for imposing such adverse action.

7 (f) Nothing in this Compact shall override a party
8 state's decision that participation in an alternative program
9 may be used in lieu of licensure action and that such
10 participation shall remain non-public if required by the
11 party state's laws. Party states must require nurses who
12 enter any alternative programs to agree not to practice in
13 any other party state during the term of the alternative
14 program without prior authorization from such other party
15 state.

16 ARTICLE VI. Additional Authorities Invested

17 in Party State Nurse Licensing Boards

18 Notwithstanding any other powers, party state nurse
19 licensing boards shall have the authority to:

20 (a) if otherwise permitted by state law, recover from
21 the affected nurse the costs of investigations and
22 disposition of cases resulting from any adverse action taken
23 against that nurse;

24 (b) issue subpoenas for both hearings and investigations
25 which require the attendance and testimony of witnesses, and
26 the production of evidence. Subpoenas issued by a nurse
27 licensing board in a party state for the attendance and
28 testimony of witnesses, and/or the production of evidence
29 from another party state, shall be enforced in the latter
30 state by any court of competent jurisdiction, according to
31 the practice and procedure of that court applicable to
32 subpoenas issued in proceedings pending before it. The
33 issuing authority shall pay any witness fees, travel

1 expenses, mileage and other fees required by the service
2 statutes of the state where the witnesses and/or evidence are
3 located.

4 (c) issue cease and desist orders to limit or revoke a
5 nurse's authority to practice in their state;

6 (d) promulgate uniform rules and regulations as provided
7 for in Article VIII(c).

8 ARTICLE VII. Coordinated Licensure Information System

9 (a) All party states shall participate in a cooperative
10 effort to create a coordinated data base of all licensed
11 registered nurses and licensed practical/vocational nurses.
12 This system will include information on the licensure and
13 disciplinary history of each nurse, as contributed by party
14 states, to assist in the coordination of nurse licensure and
15 enforcement efforts.

16 (b) Notwithstanding any other provision of law, all
17 party states' licensing boards shall promptly report adverse
18 actions, actions against multistate licensure privileges, any
19 current significant investigative information yet to result
20 in adverse action, denials of applications, and the reasons
21 for such denials, to the coordinated licensure information
22 system.

23 (c) Current significant investigative information shall
24 be transmitted through the coordinated licensure information
25 system only to party state licensing boards.

26 (d) Notwithstanding any other provision of law, all
27 party states' licensing boards contributing information to
28 the coordinated licensure information system may designate
29 information that may not be shared with non-party states or
30 disclosed to other entities or individuals without the
31 express permission of the contributing state.

32 (e) Any personally identifiable information obtained by
33 a party states' licensing board from the coordinated

1 licensure information system may not be shared with non-party
2 states or disclosed to other entities or individuals except
3 to the extent permitted by the laws of the party state
4 contributing the information.

5 (f) Any information contributed to the coordinated
6 licensure information system that is subsequently required to
7 be expunged by the laws of the party state contributing that
8 information, shall also be expunged from the coordinated
9 licensure information system.

10 (g) The Compact administrators, acting jointly with each
11 other and in consultation with the administrator of the
12 coordinated licensure information system, shall formulate
13 necessary and proper procedures for the identification,
14 collection and exchange of information under this Compact.

15 ARTICLE VIII. Compact Administration and
16 Interchange of Information

17 (a) The head of the nurse licensing board, or his/her
18 designee, of each party state shall be the administrator of
19 this Compact for his/her state.

20 (b) The Compact administrator of each party state shall
21 furnish to the Compact administrator of each other party
22 state any information and documents including, but not
23 limited to, a uniform data set of investigations, identifying
24 information, licensure data, and disclosable alternative
25 program participation information to facilitate the
26 administration of this Compact.

27 (c) Compact administrators shall have the authority to
28 develop uniform rules to facilitate and coordinate
29 implementation of this Compact. These uniform rules shall be
30 adopted by party states, under the authority invested under
31 Article VI (d).

32 ARTICLE IX. Immunity

1 No party state or the officers or employees or agents of
2 a party state's nurse licensing board who acts in accordance
3 with the provisions of this Compact shall be liable on
4 account of any act or omission in good faith while engaged in
5 the performance of their duties under this Compact. Good
6 faith in this article shall not include willful misconduct,
7 gross negligence, or recklessness.

8 ARTICLE X. Entry into Force, Withdrawal and Amendment

9 (a) This Compact shall enter into force and become
10 effective as to any state when it has been enacted into the
11 laws of that state. Any party state may withdraw from this
12 Compact by enacting a statute repealing the same, but no such
13 withdrawal shall take effect until six months after the
14 withdrawing state has given notice of the withdrawal to the
15 executive heads of all other party states.

16 (b) No withdrawal shall affect the validity or
17 applicability by the licensing boards of states remaining
18 party to the Compact of any report of adverse action
19 occurring prior to the withdrawal.

20 (c) Nothing contained in this Compact shall be construed
21 to invalidate or prevent any nurse licensure agreement or
22 other cooperative arrangement between a party state and a
23 non-party state that is made in accordance with the other
24 provisions of this Compact.

25 (d) This Compact may be amended by the party states. No
26 amendment to this Compact shall become effective and binding
27 upon the party states unless and until it is enacted into the
28 laws of all party states.

29 ARTICLE XI. Construction and Severability

30 (a) This Compact shall be liberally construed so as to
31 effectuate the purposes thereof. The provisions of this

1 Compact shall be severable and if any phrase, clause,
2 sentence or provision of this Compact is declared to be
3 contrary to the constitution of any party state or of the
4 United States or the applicability thereof to any government,
5 agency, person or circumstance is held invalid, the validity
6 of the remainder of this Compact and the applicability
7 thereof to any government, agency, person or circumstance
8 shall not be affected thereby. If this Compact shall be held
9 contrary to the constitution of any state party thereto, the
10 Compact shall remain in full force and effect as to the
11 remaining party states and in full force and effect as to the
12 party state affected as to all severable matters.

13 (b) In the event party states find a need for settling
14 disputes arising under this Compact:

15 (1) The party states may submit the issues in
16 dispute to an arbitration panel which will be comprised
17 of an individual appointed by the Compact administrator
18 in the home state; an individual appointed by the Compact
19 administrator in the remote state(s) involved; and an
20 individual mutually agreed upon by the Compact
21 administrators of all the party states involved in the
22 dispute.

23 (2) The decision of a majority of the arbitrators
24 shall be final and binding.

25 Section 10-10. Compact administrator. The head of the
26 nurse licensing board as used to define the compact
27 administrator in Article VIII(a) of the Compact shall mean
28 the Nursing Act Coordinator as defined under Section 10-15 of
29 the Nursing and Advanced Practice Nursing Act.

30 Section 10-15. Compact Evaluation Initiative. Upon the
31 effective date of this Compact, the licensing board shall
32 participate in a Compact Evaluation Initiative designed to

1 evaluate the effectiveness and operability of the Compact.
2 Such Compact Evaluation Initiative shall be conducted by an
3 outside researcher. A component of the Evaluation shall
4 include a remote state identification system through which
5 nurses shall designate those remote states in which the nurse
6 is practicing. A nurse's practice information in such
7 identification system shall be updated upon issuance and
8 renewal of the nurse license. The Evaluation shall continue
9 until the year 2005, after which time a report shall be
10 produced for comment by the participating licensing boards
11 and shall be submitted to the General Assembly in the form of
12 a Nurse Licensure Compact evaluation report.

13 Section 10-20. Costs of investigation and disposition of
14 cases. To facilitate cross-state enforcement efforts, the
15 General Assembly finds that it is necessary for Illinois to
16 have the power to recover from the affected nurse the costs
17 of investigations and disposition of cases resulting from
18 adverse actions taken by this State against that nurse.

19 Section 10-25. Statutory obligations. This Compact is
20 designed to facilitate the regulation of nurses and does not
21 relieve employers from complying with statutorily imposed
22 obligations.

23 Section 10-30. State labor laws. This Compact does not
24 supersede existing State labor laws.

25 ARTICLE 90

26 Section 90-5. The Nursing and Advanced Practice Nursing
27 Act is amended by changing Sections 5-10, 5-15, 10-30, and
28 15-10 as follows:

1 (225 ILCS 65/5-10)

2 (Section scheduled to be repealed on January 1, 2008)

3 Sec. 5-10. Definitions. Each of the following terms,
4 when used in this Act, shall have the meaning ascribed to it
5 in this Section, except where the context clearly indicates
6 otherwise:

7 (a) "Department" means the Department of Professional
8 Regulation.

9 (b) "Director" means the Director of Professional
10 Regulation.

11 (c) "Board" means the Board of Nursing appointed by the
12 Director.

13 (d) "Academic year" means the customary annual schedule
14 of courses at a college, university, or approved school,
15 customarily regarded as the school year as distinguished from
16 the calendar year.

17 (e) "Approved program of professional nursing education"
18 and "approved program of practical nursing education" are
19 programs of professional or practical nursing, respectively,
20 approved by the Department under the provisions of this Act.

21 (f) "Nursing Act Coordinator" means a registered
22 professional nurse appointed by the Director to carry out the
23 administrative policies of the Department.

24 (g) "Assistant Nursing Act Coordinator" means a
25 registered professional nurse appointed by the Director to
26 assist in carrying out the administrative policies of the
27 Department.

28 (h) "Registered" is the equivalent of "licensed".

29 (i) "Practical nurse" or "licensed practical nurse"
30 means a person who is licensed as a practical nurse under
31 this Act or holds the privilege to practice under this Act
32 and practices practical nursing as defined in paragraph (j)
33 of this Section. Only a practical nurse licensed or granted
34 the privilege to practice under this Act is entitled to use

1 the title "licensed practical nurse" and the abbreviation
2 "L.P.N."

3 (j) "Practical nursing" means the performance of nursing
4 acts requiring the basic nursing knowledge, judgement, and
5 skill acquired by means of completion of an approved
6 practical nursing education program. Practical nursing
7 includes assisting in the nursing process as delegated by and
8 under the direction of a registered professional nurse. The
9 practical nurse may work under the direction of a licensed
10 physician, dentist, podiatrist, or other health care
11 professional determined by the Department.

12 (k) "Registered Nurse" or "Registered Professional
13 Nurse" means a person who is licensed as a professional nurse
14 under this Act or holds the privilege to practice under this
15 Act and practices nursing as defined in paragraph (l) of this
16 Section. Only a registered nurse licensed or granted the
17 privilege to practice under this Act is entitled to use the
18 titles "registered nurse" and "registered professional nurse"
19 and the abbreviation, "R.N."

20 (l) "Registered professional nursing practice" includes
21 all nursing specialities and means the performance of any
22 nursing act based upon professional knowledge, judgment, and
23 skills acquired by means of completion of an approved
24 registered professional nursing education program. A
25 registered professional nurse provides nursing care
26 emphasizing the importance of the whole and the
27 interdependence of its parts through the nursing process to
28 individuals, groups, families, or communities, that includes
29 but is not limited to: (1) the assessment of healthcare
30 needs, nursing diagnosis, planning, implementation, and
31 nursing evaluation; (2) the promotion, maintenance, and
32 restoration of health; (3) counseling, patient education,
33 health education, and patient advocacy; (4) the
34 administration of medications and treatments as prescribed by

1 a physician licensed to practice medicine in all of its
2 branches, a licensed dentist, a licensed podiatrist, or a
3 licensed optometrist or as prescribed by a physician
4 assistant in accordance with written guidelines required
5 under the Physician Assistant Practice Act of 1987 or by an
6 advanced practice nurse in accordance with a written
7 collaborative agreement required under the Nursing and
8 Advanced Practice Nursing Act; (5) the coordination and
9 management of the nursing plan of care; (6) the delegation to
10 and supervision of individuals who assist the registered
11 professional nurse implementing the plan of care; and (7)
12 teaching and supervision of nursing students. The foregoing
13 shall not be deemed to include those acts of medical
14 diagnosis or prescription of therapeutic or corrective
15 measures that are properly performed only by physicians
16 licensed in the State of Illinois.

17 (m) "Current nursing practice update course" means a
18 planned nursing education curriculum approved by the
19 Department consisting of activities that have educational
20 objectives, instructional methods, content or subject matter,
21 clinical practice, and evaluation methods, related to basic
22 review and updating content and specifically planned for
23 those nurses previously licensed in the United States or its
24 territories and preparing for reentry into nursing practice.

25 (n) "Professional assistance program for nurses" means a
26 professional assistance program that meets criteria
27 established by the Board of Nursing and approved by the
28 Director, which provides a non-disciplinary treatment
29 approach for nurses licensed under this Act whose ability to
30 practice is compromised by alcohol or chemical substance
31 addiction.

32 (o) "Privilege to practice" means the authorization to
33 practice as a practical nurse or a registered nurse in the
34 State under the Nurse Licensure Compact or as an advanced

1 practice nurse under the Advanced Practice Registered Nurse
2 Compact.

3 (p) "License" or "licensed" means the permission granted
4 a person to practice nursing under this Act, including the
5 privilege to practice.

6 (g) "Licensee" means a person who has been issued a
7 license to practice nursing in the state or who holds the
8 privilege to practice nursing in this State.

9 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98;
10 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

11 (225 ILCS 65/5-15)

12 (Section scheduled to be repealed on January 1, 2008)

13 Sec. 5-15. Policy; application of Act. For the protection
14 of life and the promotion of health, and the prevention of
15 illness and communicable diseases, any person practicing or
16 offering to practice professional and practical nursing in
17 Illinois shall submit evidence that he or she is qualified to
18 practice, and shall be licensed or hold the privilege to
19 practice as provided under this Act. No person shall
20 practice or offer to practice professional or practical
21 nursing in Illinois or use any title, sign, card or device to
22 indicate that such a person is practicing professional or
23 practical nursing unless such person has been licensed or
24 holds the privilege to practice under the provisions of this
25 Act.

26 This Act does not prohibit the following:

27 (a) The practice of nursing in Federal employment
28 in the discharge of the employee's duties by a person who
29 is employed by the United States government or any
30 bureau, division or agency thereof and is a legally
31 qualified and licensed nurse of another state or
32 territory and not in conflict with Sections 10-5, 10-30,
33 and 10-45 of this Act.

1 (b) Nursing that is included in their program of
2 study by students enrolled in programs of nursing or in
3 current nurse practice update courses approved by the
4 Department.

5 (c) The furnishing of nursing assistance in an
6 emergency.

7 (d) The practice of nursing by a nurse who holds an
8 active license in another state when providing services
9 to patients in Illinois during a bonafide emergency or in
10 immediate preparation for or during interstate transit.

11 (e) The incidental care of the sick by members of
12 the family, domestic servants or housekeepers, or care of
13 the sick where treatment is by prayer or spiritual means.

14 (f) Persons from being employed as nursing aides,
15 attendants, orderlies, and other auxiliary workers in
16 private homes, long term care facilities, nurseries,
17 hospitals or other institutions.

18 (g) The practice of practical nursing by one who
19 has applied in writing to the Department in form and
20 substance satisfactory to the Department, for a license
21 as a licensed practical nurse and who has complied with
22 all the provisions under Section 10-30, except the
23 passing of an examination to be eligible to receive such
24 license, until: the decision of the Department that the
25 applicant has failed to pass the next available
26 examination authorized by the Department or has failed,
27 without an approved excuse, to take the next available
28 examination authorized by the Department or until the
29 withdrawal of the application, but not to exceed 3
30 months. No applicant for licensure practicing under the
31 provisions of this paragraph shall practice practical
32 nursing except under the direct supervision of a
33 registered professional nurse licensed under this Act or
34 a licensed physician, dentist or podiatrist. In no

1 instance shall any such applicant practice or be employed
2 in any supervisory capacity.

3 (h) The practice of practical nursing by one who is
4 a licensed practical nurse under the laws of another U.S.
5 jurisdiction and has applied in writing to the
6 Department, in form and substance satisfactory to the
7 Department, for a license as a licensed practical nurse
8 and who is qualified to receive such license under
9 Section 10-30, until (1) the expiration of 6 months after
10 the filing of such written application, (2) the
11 withdrawal of such application, or (3) the denial of such
12 application by the Department.

13 (i) The practice of professional nursing by one who
14 has applied in writing to the Department in form and
15 substance satisfactory to the Department for a license as
16 a registered professional nurse and has complied with all
17 the provisions under Section 10-30 except the passing of
18 an examination to be eligible to receive such license,
19 until the decision of the Department that the applicant
20 has failed to pass the next available examination
21 authorized by the Department or has failed, without an
22 approved excuse, to take the next available examination
23 authorized by the Department or until the withdrawal of
24 the application, but not to exceed 3 months. No
25 applicant for licensure practicing under the provisions
26 of this paragraph shall practice professional nursing
27 except under the direct supervision of a registered
28 professional nurse licensed under this Act. In no
29 instance shall any such applicant practice or be employed
30 in any supervisory capacity.

31 (j) The practice of professional nursing by one who
32 is a registered professional nurse under the laws of
33 another state, territory of the United States or country
34 and has applied in writing to the Department, in form and

1 substance satisfactory to the Department, for a license
2 as a registered professional nurse and who is qualified
3 to receive such license under Section 10-30, until (1)
4 the expiration of 6 months after the filing of such
5 written application, (2) the withdrawal of such
6 application, or (3) the denial of such application by the
7 Department.

8 (k) The practice of professional nursing that is
9 included in a program of study by one who is a registered
10 professional nurse under the laws of another state or
11 territory of the United States or foreign country,
12 territory or province and who is enrolled in a graduate
13 nursing education program or a program for the completion
14 of a baccalaureate nursing degree in this State, which
15 includes clinical supervision by faculty as determined by
16 the educational institution offering the program and the
17 health care organization where the practice of nursing
18 occurs. The educational institution will file with the
19 Department each academic term a list of the names and
20 origin of license of all professional nurses practicing
21 nursing as part of their programs under this provision.

22 (l) Any person licensed in this State under any
23 other Act from engaging in the practice for which she or
24 he is licensed.

25 (m) Delegation to authorized direct care staff
26 trained under Section 15.4 of the Mental Health and
27 Developmental Disabilities Administrative Act.

28 An applicant for license practicing under the exceptions
29 set forth in subparagraphs (g), (h), (i), and (j) of this
30 Section shall use the title R.N. Lic. Pend. or L.P.N. Lic.
31 Pend. respectively and no other.

32 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98;
33 90-655, eff. 7-30-98; 90-742, eff. 8-13-98; 91-630, eff.
34 8-19-99.)

1 (225 ILCS 65/10-30)

2 (Section scheduled to be repealed on January 1, 2008)

3 Sec. 10-30. Qualifications for licensure.

4 (a) Each applicant who successfully meets the
5 requirements of this Section shall be entitled to licensure
6 as a Registered Nurse or Licensed Practical Nurse, whichever
7 is applicable.

8 (b) An applicant for licensure by examination to
9 practice as a registered nurse or licensed practical nurse
10 shall:

11 (1) submit a completed written application, on
12 forms provided by the Department and fees as established
13 by the Department;

14 (2) for registered nurse licensure, have graduated
15 from a professional nursing education program approved by
16 the Department;

17 (2.5) for licensed practical nurse licensure, have
18 graduated graduate from a practical nursing education
19 program approved by the Department;

20 (3) have not violated the provisions of Section
21 10-45 of this Act. The Department may take into
22 consideration any felony conviction of the applicant, but
23 such a conviction shall not operate as an absolute bar to
24 licensure;

25 (4) meet all other requirements as established by
26 rule;

27 (5) pay, either to the Department or its designated
28 testing service, a fee covering the cost of providing the
29 examination. Failure to appear for the examination on
30 the scheduled date at the time and place specified after
31 the applicant's application for examination has been
32 received and acknowledged by the Department or the
33 designated testing service shall result in the forfeiture
34 of the examination fee.

1 If an applicant neglects, fails, or refuses to take an
2 examination or fails to pass an examination for a license
3 under this Act within 3 years after filing the application,
4 the application shall be denied. However, the applicant may
5 make a new application accompanied by the required fee and
6 provide evidence of meeting the requirements in force at the
7 time of the new application.

8 An applicant may take and successfully complete a
9 Department-approved examination in another jurisdiction.
10 However, an applicant who has never been licensed previously
11 in any jurisdiction that utilizes a Department-approved
12 examination and who has taken and failed to pass the
13 examination within 3 years after filing the application must
14 submit proof of successful completion of a
15 Department-authorized nursing education program or
16 recompletion of an approved registered nursing program or
17 licensed practical nursing program, as appropriate, prior to
18 re-application.

19 An applicant shall have one year from the date of
20 notification of successful completion of the examination to
21 apply to the Department for a license. If an applicant fails
22 to apply within one year, the applicant shall be required to
23 again take and pass the examination unless licensed in
24 another jurisdiction of the United States within one year of
25 passing the examination.

26 (c) An applicant for licensure by endorsement who is a
27 registered professional nurse or a licensed practical nurse
28 licensed by examination under the laws of another state or
29 territory of the United States or a foreign country,
30 jurisdiction, territory, or province shall:

31 (1) submit a completed written application, on
32 forms supplied by the Department, and fees as established
33 by the Department;

34 (2) for registered nurse licensure, have graduated

1 from a professional nursing education program approved by
2 the Department;

3 (2.5) for licensed practical nurse licensure, have
4 graduated from a practical nursing education program
5 approved by the Department;

6 (3) submit verification of licensure status
7 directly from the United States jurisdiction of
8 licensure, if applicable, as defined by rule;

9 (4) have passed the examination authorized by the
10 Department;

11 (5) meet all other requirements as established by
12 rule.

13 (d) All applicants for registered nurse licensure
14 pursuant to item (2) of subsection (b) and item (2) of
15 subsection (c) of this Section who are graduates of nursing
16 educational programs in a country other than the United
17 States or its territories must submit to the Department
18 certification of successful completion of the Commission of
19 Graduates of Foreign Nursing Schools (CGFNS) examination. An
20 applicant who is unable to provide appropriate documentation
21 to satisfy CGFNS of her or his educational qualifications for
22 the CGFNS examination shall be required to pass an
23 examination to test competency in the English language, which
24 shall be prescribed by the Department, if the applicant is
25 determined by the Board to be educationally prepared in
26 nursing. The Board shall make appropriate inquiry into the
27 reasons for any adverse determination by CGFNS before making
28 its own decision.

29 An applicant licensed in another state or territory who
30 is applying for licensure and has received her or his
31 education in a country other than the United States or its
32 territories shall be exempt from the completion of the
33 Commission of Graduates of Foreign Nursing Schools (CGFNS)
34 examination if the applicant meets all of the following

1 requirements:

2 (1) successful passage of the licensure examination
3 authorized by the Department;

4 (2) holds an active, unencumbered license in
5 another state; and

6 (3) has been actively practicing for a minimum of 2
7 years in another state.

8 (e) (Blank).

9 (f) Pending the issuance of a license under subsection
10 (c) of this Section, the Department may grant an applicant a
11 temporary license to practice nursing as a registered nurse
12 or as a licensed practical nurse if the Department is
13 satisfied that the applicant holds an active, unencumbered
14 license in good standing in another jurisdiction. If the
15 applicant holds more than one current active license, or one
16 or more active temporary licenses from other jurisdictions,
17 the Department shall not issue a temporary license until it
18 is satisfied that each current active license held by the
19 applicant is unencumbered. The temporary license, which
20 shall be issued no later than 14 working days following
21 receipt by the Department of an application for the temporary
22 license, shall be granted upon the submission of the
23 following to the Department:

24 (1) a signed and completed application for
25 licensure under subsection (a) of this Section as a
26 registered nurse or a licensed practical nurse;

27 (2) proof of a current, active license in at least
28 one other jurisdiction and proof that each current active
29 license or temporary license held by the applicant within
30 the last 5 years is unencumbered;

31 (3) a signed and completed application for a
32 temporary license; and

33 (4) the required temporary license fee.

34 (g) The Department may refuse to issue an applicant a

1 temporary license authorized pursuant to this Section if,
2 within 14 working days following its receipt of an
3 application for a temporary license, the Department
4 determines that:

5 (1) the applicant has been convicted of a crime
6 under the laws of a jurisdiction of the United States:
7 (i) which is a felony; or (ii) which is a misdemeanor
8 directly related to the practice of the profession,
9 within the last 5 years;

10 (2) within the last 5 years the applicant has had a
11 license or permit related to the practice of nursing
12 revoked, suspended, or placed on probation by another
13 jurisdiction, if at least one of the grounds for
14 revoking, suspending, or placing on probation is the same
15 or substantially equivalent to grounds in Illinois; or

16 (3) it intends to deny licensure by endorsement.

17 For purposes of this Section, an "unencumbered license"
18 means a license against which no disciplinary action has been
19 taken or is pending and for which all fees and charges are
20 paid and current.

21 (h) The Department may revoke a temporary license issued
22 pursuant to this Section if:

23 (1) it determines that the applicant has been
24 convicted of a crime under the law of any jurisdiction of
25 the United States that is (i) a felony or (ii) a
26 misdemeanor directly related to the practice of the
27 profession, within the last 5 years;

28 (2) it determines that within the last 5 years the
29 applicant has had a license or permit related to the
30 practice of nursing revoked, suspended, or placed on
31 probation by another jurisdiction, if at least one of the
32 grounds for revoking, suspending, or placing on probation
33 is the same or substantially equivalent to grounds in
34 Illinois; or

1 (3) it determines that it intends to deny licensure
2 by endorsement.

3 A temporary license shall expire 6 months from the date
4 of issuance. Further renewal may be granted by the
5 Department in hardship cases, as defined by rule and upon
6 approval of the Director. However, a temporary license shall
7 automatically expire upon issuance of the Illinois license or
8 upon notification that the Department intends to deny
9 licensure, whichever occurs first.

10 (i) Applicants have 3 years from the date of application
11 to complete the application process. If the process has not
12 been completed within 3 years from the date of application,
13 the application shall be denied, the fee forfeited, and the
14 applicant must reapply and meet the requirements in effect at
15 the time of reapplication.

16 (j) A practical nurse licensed by a party state under
17 the Nurse Licensure Compact is granted the privilege to
18 practice practical nursing in this State. A registered nurse
19 licensed by a party state under the Nurse Licensure Compact
20 is granted the privilege to practice registered nursing in
21 this State. A practical nurse or registered nurse who has
22 been granted the privilege to practice nursing in this State
23 under this subsection, shall notify the Department, prior to
24 commencing employment in this State as a practical or
25 registered nurse, of the identity and location of the nurse's
26 prospective employer. A practical nurse or registered nurse
27 who has been granted the privilege to practice nursing in
28 this State under this subsection is subject to the schedule
29 of fees authorized under Section 20-35 and the criminal
30 background check required under Section 5-23 of this Act,
31 provided that the practical or registered nurse may exercise
32 his or her privilege to practice pending completion of the
33 criminal background check.

34 (Source: P.A. 92-39, eff. 6-29-01; 92-744, eff. 7-25-02;

1 revised 2-17-03.)

2 (225 ILCS 65/15-10)

3 (Section scheduled to be repealed on January 1, 2008)

4 Sec. 15-10. Advanced practice nurse; qualifications;
5 roster.

6 (a) A person shall be qualified for licensure as an
7 advanced practice nurse if that person:

8 (1) has applied in writing in form and substance
9 satisfactory to the Department and has not violated a
10 provision of this Act or the rules adopted under this
11 Act. The Department may take into consideration any
12 felony conviction of the applicant but a conviction shall
13 not operate as an absolute bar to licensure;

14 (2) holds a current license to practice as a
15 registered nurse in Illinois;

16 (3) has successfully completed requirements to
17 practice as, and holds a current, national certification
18 as, a nurse midwife, clinical nurse specialist, nurse
19 practitioner, or certified registered nurse anesthetist
20 from the appropriate national certifying body as
21 determined by rule of the Department;

22 (4) has paid the required fees as set by rule; and

23 (5) has successfully completed a post-basic
24 advanced practice formal education program in the area of
25 his or her nursing specialty.

26 (b) In addition to meeting the requirements of
27 subsection (a), except item (5) of that subsection, beginning
28 July 1, 2001 or 12 months after the adoption of final rules
29 to implement this Section, whichever is sooner, applicants
30 for initial licensure shall have a graduate degree
31 appropriate for national certification in a clinical advanced
32 practice nursing specialty.

33 (c) The Department shall provide by rule for APN

1 licensure of registered professional nurses who (1) apply for
2 licensure before July 1, 2001 and (2) submit evidence of
3 completion of a program described in item (5) of subsection
4 (a) or in subsection (b) and evidence of practice for at
5 least 10 years as a nurse practitioner.

6 (d) The Department shall maintain a separate roster of
7 advanced practice nurses licensed under this Title and their
8 licenses shall indicate "Registered Nurse/Advanced Practice
9 Nurse".

10 (e) An advanced practice nurse licensed by a party state
11 under the Advanced Practice Registered Nurse Compact is
12 granted the privilege to practice advanced practice nursing
13 in this State. An advanced practice nurse who has been
14 granted the privilege to practice advanced practice nursing
15 in this State under this subsection, shall notify the
16 Department, prior to commencing employment in this State as
17 an advanced practice nurse, of the identity and location of
18 the nurse's prospective employer. An advanced practice nurse
19 who has been granted the privilege to practice advanced
20 practice nursing in this State under this subsection is
21 subject to the schedule of fees authorized under Section
22 20-35 and the criminal background check required under
23 Section 5-23 of this Act, provided that the advanced practice
24 nurse may exercise his or her privilege to practice pending
25 completion of the criminal background check.

26 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

27 ARTICLE 99

28 Section 99-5. Effective date. This Act takes effect upon
29 becoming law."