



Rep. John E. Bradley

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LRB098 05035 MGM 43443 a

1 AMENDMENT TO HOUSE BILL 1052

2 AMENDMENT NO. _____. Amend House Bill 1052 by replacing
3 everything after the enacting clause with the following:

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

6 (225 ILCS 60/54.5)

7 (Section scheduled to be repealed on December 31, 2013)

8 Sec. 54.5. Physician delegation of authority to physician
9 assistants and advanced practice nurses.

10 (a) Physicians licensed to practice medicine in all its
11 branches may delegate care and treatment responsibilities to a
12 physician assistant under guidelines in accordance with the
13 requirements of the Physician Assistant Practice Act of 1987. A
14 physician licensed to practice medicine in all its branches may
15 enter into supervising physician agreements with no more than 5
16 physician assistants as set forth in subsection (a) of Section

1 7 of the Physician Assistant Practice Act of 1987.

2 (b) A physician licensed to practice medicine in all its
3 branches in active clinical practice may collaborate with an
4 advanced practice nurse in accordance with the requirements of
5 the Nurse Practice Act. Collaboration is for the purpose of
6 providing medical consultation, and no employment relationship
7 is required. A written collaborative agreement shall conform to
8 the requirements of Section 65-35 of the Nurse Practice Act.
9 The written collaborative agreement shall be for services the
10 collaborating physician generally provides or may provide in ~~to~~
11 his or her ~~patients in the normal course of~~ clinical medical
12 practice. A written collaborative agreement shall be adequate
13 with respect to collaboration with advanced practice nurses if
14 all of the following apply:

15 (1) The agreement is written to promote the exercise of
16 professional judgment by the advanced practice nurse
17 commensurate with his or her education and experience. The
18 agreement need not describe the exact steps that an
19 advanced practice nurse must take with respect to each
20 specific condition, disease, or symptom, but must specify
21 those procedures that require a physician's presence as the
22 procedures are being performed.

23 (2) Practice guidelines and orders are developed and
24 approved jointly by the advanced practice nurse and
25 collaborating physician, as needed, based on the practice
26 of the practitioners. Such guidelines and orders and the

1 patient services provided thereunder are periodically
2 reviewed by the collaborating physician.

3 (3) The advance practice nurse provides services the
4 collaborating physician generally provides or may provide
5 in ~~to~~ his or her ~~patients in the normal course of~~ clinical
6 medical practice, except as set forth in subsection (b-5)
7 of this Section. With respect to labor and delivery, the
8 collaborating physician must provide delivery services in
9 order to participate with a certified nurse midwife.

10 (4) The collaborating physician and advanced practice
11 nurse consult at least once a month to provide
12 collaboration and consultation.

13 (5) Methods of communication are available with the
14 collaborating physician in person or through
15 telecommunications for consultation, collaboration, and
16 referral as needed to address patient care needs.

17 (6) The agreement contains provisions detailing notice
18 for termination or change of status involving a written
19 collaborative agreement, except when such notice is given
20 for just cause.

21 (b-5) An anesthesiologist or physician licensed to
22 practice medicine in all its branches may collaborate with a
23 certified registered nurse anesthetist in accordance with
24 Section 65-35 of the Nurse Practice Act for the provision of
25 anesthesia services. With respect to the provision of
26 anesthesia services, the collaborating anesthesiologist or

1 physician shall have training and experience in the delivery of
2 anesthesia services consistent with Department rules.

3 Collaboration shall be adequate if:

4 (1) an anesthesiologist or a physician participates in
5 the joint formulation and joint approval of orders or
6 guidelines and periodically reviews such orders and the
7 services provided patients under such orders; and

8 (2) for anesthesia services, the anesthesiologist or
9 physician participates through discussion of and agreement
10 with the anesthesia plan and is physically present and
11 available on the premises during the delivery of anesthesia
12 services for diagnosis, consultation, and treatment of
13 emergency medical conditions. Anesthesia services in a
14 hospital shall be conducted in accordance with Section 10.7
15 of the Hospital Licensing Act and in an ambulatory surgical
16 treatment center in accordance with Section 6.5 of the
17 Ambulatory Surgical Treatment Center Act.

18 (b-10) The anesthesiologist or operating physician must
19 agree with the anesthesia plan prior to the delivery of
20 services.

21 (c) The supervising physician shall have access to the
22 medical records of all patients attended by a physician
23 assistant. The collaborating physician shall have access to the
24 medical records of all patients attended to by an advanced
25 practice nurse.

26 (d) (Blank).

1 (e) A physician shall not be liable for the acts or
2 omissions of a physician assistant or advanced practice nurse
3 solely on the basis of having signed a supervision agreement or
4 guidelines or a collaborative agreement, an order, a standing
5 medical order, a standing delegation order, or other order or
6 guideline authorizing a physician assistant or advanced
7 practice nurse to perform acts, unless the physician has reason
8 to believe the physician assistant or advanced practice nurse
9 lacked the competency to perform the act or acts or commits
10 willful and wanton misconduct.

11 (f) A collaborating physician may, but is not required to,
12 delegate prescriptive authority to an advanced practice nurse
13 as part of a written collaborative agreement, and the
14 delegation of prescriptive authority shall conform to the
15 requirements of Section 65-40 of the Nurse Practice Act.

16 (g) A supervising physician may, but is not required to,
17 delegate prescriptive authority to a physician assistant as
18 part of a written supervision agreement, and the delegation of
19 prescriptive authority shall conform to the requirements of
20 Section 7.5 of the Physician Assistant Practice Act of 1987.

21 (h) For the purposes of this Section, "generally provides
22 or may provide in his or her clinical medical practice" means
23 categories of care or treatment, not specific tasks or duties,
24 that the physician provides individually or through delegation
25 to other persons so that the physician has the experience and
26 ability to provide collaboration and consultation. This

1 definition shall not be construed to prohibit an advanced
2 practice nurse from providing primary health treatment or care
3 within the scope of his or her training and experience,
4 including, but not limited to, health screenings, patient
5 histories, physical examinations, women's health examinations,
6 or school physicals that may be provided as part of the routine
7 practice of an advanced practice nurse or on a volunteer basis.

8 (Source: P.A. 96-618, eff. 1-1-10; 97-358, eff. 8-12-11;
9 97-1071, eff. 8-24-12.)

10 Section 10. The Nurse Practice Act is amended by changing
11 Section 65-35 as follows:

12 (225 ILCS 65/65-35) (was 225 ILCS 65/15-15)

13 (Section scheduled to be repealed on January 1, 2018)

14 Sec. 65-35. Written collaborative agreements.

15 (a) A written collaborative agreement is required for all
16 advanced practice nurses engaged in clinical practice, except
17 for advanced practice nurses who are authorized to practice in
18 a hospital or ambulatory surgical treatment center.

19 (a-5) If an advanced practice nurse engages in clinical
20 practice outside of a hospital or ambulatory surgical treatment
21 center in which he or she is authorized to practice, the
22 advanced practice nurse must have a written collaborative
23 agreement.

24 (b) A written collaborative agreement shall describe the

1 working relationship of the advanced practice nurse with the
2 collaborating physician or podiatrist and shall authorize the
3 categories of care, treatment, or procedures to be performed by
4 the advanced practice nurse. A collaborative agreement with a
5 dentist must be in accordance with subsection (c-10) of this
6 Section. Collaboration does not require an employment
7 relationship between the collaborating physician and advanced
8 practice nurse. ~~Absent an employment relationship, an~~
9 ~~agreement may not restrict the categories of patients or~~
10 ~~third party payment sources accepted by the advanced practice~~
11 ~~nurse.~~ Collaboration means the relationship under which an
12 advanced practice nurse works with a collaborating physician or
13 podiatrist in an active clinical practice to deliver health
14 care services in accordance with (i) the advanced practice
15 nurse's training, education, and experience and (ii)
16 collaboration and consultation as documented in a jointly
17 developed written collaborative agreement.

18 The agreement shall promote the exercise of professional
19 judgment by the advanced practice nurse commensurate with his
20 or her education and experience. The services to be provided by
21 the advanced practice nurse shall be services that the
22 collaborating physician or podiatrist is authorized to and
23 generally provides or may provide ~~to his or her patients in the~~
24 ~~normal course of~~ his or her clinical medical or podiatric
25 practice, except as set forth in subsections (b-5) or
26 ~~subsection~~ (c-5) of this Section. The agreement need not

1 describe the exact steps that an advanced practice nurse must
2 take with respect to each specific condition, disease, or
3 symptom but must specify which authorized procedures require
4 the presence of the collaborating physician or podiatrist as
5 the procedures are being performed. The collaborative
6 relationship under an agreement shall not be construed to
7 require the personal presence of a physician or podiatrist at
8 the place where services are rendered. Methods of communication
9 shall be available for consultation with the collaborating
10 physician or podiatrist in person or by telecommunications in
11 accordance with established written guidelines as set forth in
12 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 nurse within the scope of the
16 advanced practice nurses training and experience, (2) limit
17 third party payors or government health programs, such as the
18 medical assistance program or Medicare with which the advanced
19 practice nurse contracts, or (3) limit the geographic area or
20 practice location of the advanced practice nurse in this State.

21 (c) Collaboration and consultation under all collaboration
22 agreements shall be adequate if a collaborating physician or
23 podiatrist does each of the following:

24 (1) Participates in the joint formulation and joint
25 approval of orders or guidelines with the advanced practice
26 nurse and he or she periodically reviews such orders and

1 the services provided patients under such orders in
2 accordance with accepted standards of medical practice or
3 podiatric practice and advanced practice nursing practice.

4 (2) Provides collaboration and consultation with the
5 advanced practice nurse at least once a month. In the case
6 of anesthesia services provided by a certified registered
7 nurse anesthetist, an anesthesiologist, physician,
8 dentist, or podiatrist must participate through discussion
9 of and agreement with the anesthesia plan and remain
10 physically present and available on the premises during the
11 delivery of anesthesia services for diagnosis,
12 consultation, and treatment of emergency medical
13 conditions.

14 (3) Is available through telecommunications for
15 consultation on medical problems, complications, or
16 emergencies or patient referral. In the case of anesthesia
17 services provided by a certified registered nurse
18 anesthetist, an anesthesiologist, physician, dentist, or
19 podiatrist must participate through discussion of and
20 agreement with the anesthesia plan and remain physically
21 present and available on the premises during the delivery
22 of anesthesia services for diagnosis, consultation, and
23 treatment of emergency medical conditions.

24 The agreement must contain provisions detailing notice for
25 termination or change of status involving a written
26 collaborative agreement, except when such notice is given for

1 just cause.

2 (c-5) A certified registered nurse anesthetist, who
3 provides anesthesia services outside of a hospital or
4 ambulatory surgical treatment center shall enter into a written
5 collaborative agreement with an anesthesiologist or the
6 physician licensed to practice medicine in all its branches or
7 the podiatrist performing the procedure. Outside of a hospital
8 or ambulatory surgical treatment center, the certified
9 registered nurse anesthetist may provide only those services
10 that the collaborating podiatrist is authorized to provide
11 pursuant to the Podiatric Medical Practice Act of 1987 and
12 rules adopted thereunder. A certified registered nurse
13 anesthetist may select, order, and administer medication,
14 including controlled substances, and apply appropriate medical
15 devices for delivery of anesthesia services under the
16 anesthesia plan agreed with by the anesthesiologist or the
17 operating physician or operating podiatrist.

18 (c-10) A certified registered nurse anesthetist who
19 provides anesthesia services in a dental office shall enter
20 into a written collaborative agreement with an
21 anesthesiologist or the physician licensed to practice
22 medicine in all its branches or the operating dentist
23 performing the procedure. The agreement shall describe the
24 working relationship of the certified registered nurse
25 anesthetist and dentist and shall authorize the categories of
26 care, treatment, or procedures to be performed by the certified

1 registered nurse anesthetist. In a collaborating dentist's
2 office, the certified registered nurse anesthetist may only
3 provide those services that the operating dentist with the
4 appropriate permit is authorized to provide pursuant to the
5 Illinois Dental Practice Act and rules adopted thereunder. For
6 anesthesia services, an anesthesiologist, physician, or
7 operating dentist shall participate through discussion of and
8 agreement with the anesthesia plan and shall remain physically
9 present and be available on the premises during the delivery of
10 anesthesia services for diagnosis, consultation, and treatment
11 of emergency medical conditions. A certified registered nurse
12 anesthetist may select, order, and administer medication,
13 including controlled substances, and apply appropriate medical
14 devices for delivery of anesthesia services under the
15 anesthesia plan agreed with by the operating dentist.

16 (d) A copy of the signed, written collaborative agreement
17 must be available to the Department upon request from both the
18 advanced practice nurse and the collaborating physician or
19 podiatrist.

20 (e) Nothing in this Act shall be construed to limit the
21 delegation of tasks or duties by a physician to a licensed
22 practical nurse, a registered professional nurse, or other
23 persons in accordance with Section 54.2 of the Medical Practice
24 Act of 1987. Nothing in this Act shall be construed to limit
25 the method of delegation that may be authorized by any means,
26 including, but not limited to, oral, written, electronic,

1 standing orders, protocols, guidelines, or verbal orders.

2 (f) An advanced practice nurse shall inform each
3 collaborating physician, dentist, or podiatrist of all
4 collaborative agreements he or she has signed and provide a
5 copy of these to any collaborating physician, dentist, or
6 podiatrist upon request.

7 (g) For the purposes of this Act, "generally provides or
8 may provide in ~~to his or her patients in the normal course of~~
9 his or her clinical medical practice" means categories of care
10 or treatment services, not specific tasks or duties, the
11 physician ~~or podiatrist routinely~~ provides individually or
12 through delegation to other persons so that the physician ~~or~~
13 ~~podiatrist~~ has the experience and ability to provide
14 collaboration and consultation. This definition shall not be
15 construed to prohibit an advanced practice nurse from providing
16 primary health treatment or care within the scope of his or her
17 training and experience, including, but not limited to, health
18 screenings, patient histories, physical examinations, women's
19 health examinations, or school physicals that may be provided
20 as part of the routine practice of an advanced practice nurse
21 or on a volunteer basis.

22 For the purposes of this Act, "generally provides to his or
23 her patients in the normal course of his or her clinical
24 podiatric practice" means services, not specific tasks or
25 duties, that the podiatrist routinely provides individually or
26 through delegation to other persons so that the podiatrist has

1 the experience and ability to provide collaboration and
2 consultation.

3 (Source: P.A. 96-618, eff. 1-1-10; 97-358, eff. 8-12-11.)".