AN ACT

Amending the act of May 22, 1951 (P.L.317, No.69), entitled "An act relating to the practice of professional nursing; providing for the licensing of nurses and for the revocation and suspension of such licenses, subject to appeal, and for their reinstatement; providing for the renewal of such licenses; regulating nursing in general; prescribing penalties and repealing certain laws," further providing for title, for definitions, for State Board of Nursing, for dietitian-nutritionist license required, for unauthorized practices and acts not prohibited, for temporary practice permit, for graduates of schools of other states, territories or Dominion of Canada, for persons entitled to practice, for certified registered nurse practitioners and qualifications, for scope of practice for certified registered nurse practitioners, for prescriptive authority for certified registered nurse practitioners, for prescriptive authority for certified registered nurse practitioners, for Drug Review Committee, for professional liability, for reporting of multiple licensure, for continuing nursing education, for punishment for violations, for refusal, suspension or revocation of licenses, for reinstatement of license and for injunction or other process, and providing for the expiration of the State Board of Nursing's power to license certified registered nurse practitioners. PROVIDING FOR CERTIFIED REGISTERED NURSE PILOT PROGRAM.
hereby enacts as follows:

Section 1. The title of the act of May 22, 1951 (P.L.317, No.69), known as The Professional Nursing Law, is amended to read:

AN ACT

Relating to the practice of professional nursing and the practice of advanced practice registered nursing; providing for the licensing of nurses and for the revocation and suspension of such licenses, subject to appeal, and for their reinstatement; providing for the renewal of such licenses; regulating nursing in general; prescribing penalties and repealing certain laws.

Section 2. Section 2(1), (10), (12), (13) and (14) of the act are amended and the section is amended by adding paragraphs to read:

Section 2. Definitions. When used in this act, the following words and phrases shall have the following meanings unless the context provides otherwise:

(1) The "Practice of Professional Nursing" means diagnosing and treating human responses to actual or potential health problems through such services as casefinding, health teaching, health counseling, and provision of care supportive to or restorative of life and well being, and executing medical regimens as prescribed by a licensed physician or dentist. The foregoing shall not be deemed to include acts of medical diagnosis or prescription of medical therapeutic or corrective measures, except as performed by an advanced practice registered nurse-certified nurse practitioner acting in accordance with rules and regulations promulgated by the Board.
**Medical nutrition therapy** means the component of nutrition therapy that concerns determining and recommending nutrient needs based on nutritional assessment and medical problems relative to diets prescribed by a licensed physician or an advanced practice registered nurse certified nurse practitioner, including:

(i) tube feedings;

(ii) specialized intravenous solutions;

(iii) specialized oral solutions; and

(iv) interactions of prescription drugs with food or nutrients.

**Certified registered nurse practitioner** means a registered nurse licensed in this Commonwealth who is certified by the board in a particular clinical specialty area.

**Collaboration** means a process in which a certified registered nurse practitioner or an advanced practice registered nurse-certified nurse practitioner works with one or more physicians to deliver health care services within the scope of the certified registered nurse practitioner's or advanced practice registered nurse-certified nurse practitioner's expertise. The process includes all of the following:

(i) Immediate availability of a licensed physician to a certified registered nurse practitioner or an advanced practice registered nurse-certified nurse practitioner through direct communications or by radio, telephone or telecommunications.

(ii) A predetermined plan for emergency services.

(iii) A physician available to a certified registered nurse practitioner or an advanced practice registered nurse-certified nurse practitioner.
nurse practitioner on a regularly scheduled basis for referrals, review of the standards of medical practice incorporating consultation and chart review, drug and other medical protocols within the practice setting, periodic updating in medical diagnosis and therapeutics and cosigning records when necessary to document accountability by both parties.

[(14) “Drug Review Committee” means the committee established in section 8.4 whose function is to approve or disapprove, by addition or deletion, the categories of drugs that may be prescribed by certified registered nurse practitioners.]

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(16) “Advanced practice registered nurse-certified nurse practitioner” means a registered nurse licensed in this Commonwealth to practice independently in a population focus area in which the registered nurse is certified by a board-recognized national certification program.

(17) “Population focus area” means a category of patients for which an advanced practice registered nurse-certified nurse practitioner has the educational preparation to provide care and services. The categories of population focus include:

(i) Family and individuals across the lifespan.
(ii) Adult gerontology.
(iii) Neonatal.
(iv) Pediatrics.
(v) Women’s health and gender-related health.
(vi) Psychiatric and mental health.
(vii) Any other similar area designated by the board.

(18) “Controlled substance” means a drug designated as a controlled substance under the act of April 14, 1972 (P.L.233,
No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."

(19) "Nonproprietary drug" means a drug containing a quantity of a controlled substance or a drug which is required by an applicable Federal or State law to be dispensed only by prescription.

(20) "Proprietary drug" means a nonprescription, non-narcotic medicine or drug which may be sold without a prescription and which is prepackaged for use by the consumer and labeled in accordance with the requirements of the statutes and regulations of the Federal Government and the Commonwealth.

(21) "Licensed independent practitioner" means an advanced practice registered nurse-certified nurse practitioner licensed under section 8.1(i) or (l) to provide care and services, without direction or supervision, within the scope of the practitioner's license.

(22) "Practice of Advanced Practice Registered Nursing" means the practice of an advanced practice registered nurse-certified nurse practitioner to assess, diagnose, treat, prescribe and order, within a population focus area approved by the board of nursing that includes the advanced practice registered nurse-certified nurse practitioner's scope of practice. The term shall include, but not be limited to, performing acts of medical diagnosis or prescription of medical therapeutic or corrective measures.

Section 3. Sections 2.1(k) and (l), 3.1(b), 4, 4.1, 7(b), 8, 8.1, 8.2, 8.3, 8.4, 8.7, 11.1, 12.1(g)(1), 13(b), 14(a)(1), (2) and (4) and (b)(6), 15.2 and 15.4 of the act are amended to read:

Section 2.1. State Board of Nursing. * * *
(k) The Board shall have the right and duty to establish rules and regulations for the practice of professional nursing, the practice of advanced practice registered nursing, the practice of dietetics-nutrition and the administration of this act. Copies of such rules and regulations shall be available for distribution to the public.

(l) Any powers and duties imposed on the State Board of Medicine or jointly imposed on the State Board of Medicine and the State Board of Nursing, with respect to certified registered nurse practitioners, advance practice registered nurse-certificate nurse practitioners, by or pursuant to law or regulation shall, after the effective date of this subsection, be exercised solely by the State Board of Nursing. This subsection shall not apply to 49 Pa. Code §§ 21.283(4) (relating to prescribing and dispensing drugs) and 21.321 (relating to performance of tasks without direction, performance of tasks without training; other) unless the State Board of Nursing promulgates a regulation to exercise the duties imposed on the State Board of Medicine by those sections.

Section 3.1. Dietitian-Nutritionist License Required.—*

(b) Nothing in this section shall be construed to require or preclude third-party insurance reimbursement. Nothing herein shall preclude an insurer or other third party payor from requiring that a licensed dietitian-nutritionist obtain a referral from a licensed physician, an advanced practice registered nurse-certificate nurse practitioner, a dentist or podiatrist or that a licensed dietitian-nutritionist file an evaluation and treatment plan with the insurer or third party payer as a precondition of reimbursement.

Section 4. Unauthorized Practices; Acts not Prohibited.—
This act confers no authority to practice dentistry, podiatry, optometry, chiropractic, medicine or surgery, nor does it prohibit—

(1) Home care of the sick by friends, domestic servants, nursemaids, companions, or household aides of any type, so long as such persons do not represent or hold themselves out to be licensed nurses, licensed registered nurses, or registered nurses, or use in connection with their names, any designation tending to imply that they are licensed to practice under the provisions of this act nor services rendered by any physicians, osteopaths, dentists or chiropractors, podiatrists, optometrists, or any person licensed pursuant to the act of March 2, 1956 (P.L.1211, No.376), known as the "Practical Nurse Law."

(2) Care of the sick, with or without compensation or personal profit, when done solely in connection with the practice of the religious tenets of any church by adherents thereof.

(3) The practice of professional nursing or the practice of advanced practice registered nursing by a person temporarily in this Commonwealth licensed by another state, territory or possession of the United States or a foreign country, in compliance with an engagement made outside of this Commonwealth, which engagement requires that such person accompany and care for a patient while temporarily in this Commonwealth: Provided, however, That said engagement shall not be of more than six (6) months' duration.

(4) The practice of professional nursing or the practice of advanced practice registered nursing, pursuant to a temporary practice permit, by a graduate of an approved program of
professional nursing in Pennsylvania or any other state, working
under qualified supervision, during the period not to exceed one
(1) year between completion of his or her program and
notification of the results of a licensing examination taken by
such person, and during such additional period as the Board may
in each case especially permit.

(5) The practice of professional nursing or the practice of
advanced practice registered nursing, pursuant to a temporary
practice permit, by a person who holds a current license or
other evidence of the right to practice professional nursing[, as
that term is defined in this act], or to practice of advanced
practice registered nursing issued by any other state, territory
or possession of the United States or the Dominion of Canada,
during the period that an application filed by such person for
licensure in Pennsylvania is pending before the Board, but not
for a period of more than one (1) year and during such
additional period as the Board may in each case especially
permit.

(6) The practice of professional nursing[, within the
definition of this act] or the practice of advanced practice
registered nursing, by any person when such person is engaged in
the practice [of nursing] as an employee of the United States.

Section 4.1. Temporary Practice Permit. (a) In order for a
person to practice professional nursing or to practice advanced
practice registered nursing during the one (1) year period from
completion of his or her education program or the one (1) year
period from the application for licensure by a person who holds
a current license issued by any other state, territory or
possession of the United States or the Dominion of Canada, the
Board may issue a temporary practice permit which is
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nonrenewable and valid for a period of one (1) year and during
such additional period as the Board may in each case especially
permit, except that the temporary practice permit shall expire
if such person fails the licensing examination.

(b) Within ninety (90) days of the date a temporary practice
permit to practice as an advanced practice registered nurse-
certified nurse practitioner is issued by the Board to an
individual who was licensed or certified by another state,
territory or possession of the United States or a foreign
country, the individual shall comply with the requirements under
sections 8.2 and 8.3 with regard to acting in collaboration with
a physician and in accordance with a collaborative or written-
agreement with a physician, unless the individual qualifies for
the exception from the collaboration requirement according to
the Board under section 8.1(l).

Section 7. Graduates of Schools of Other States, Territories-
or Dominion of Canada.--* * *

(b) The Board may issue a [certification to registered nurse-
practitioners who have] license as an advanced practice-
registered nurse-certified nurse practitioner to a registered
nurse who has completed a course of study considered by the
Board to be equivalent to that required in this State at the-
time such course was completed or who is licensed or certified
by another state, territory or possession of the United States
or a foreign country as deemed equivalent to Pennsylvania's
[certification] licensure requirements in accordance with the
[joint] rules and regulations of the [Boards of Nursing and
Medicine] Board.

* * *

Section 8. Persons Entitled to Practice.--(a) The Board
shall issue to each person who meets the professional nursing
licensure requirements of this act, a certificate setting forth
that such person is licensed to engage in the practice of
professional nursing and entitled to use the title "registered
nurse" and the letters "R.N."

(b) The Board shall issue to each person who meets the
dietitian-nutritionist licensure requirements of this act a
certificate setting forth that such person is licensed as a
dietitian-nutritionist and entitled to use the title "licensed
dietitian-nutritionist" and the letters "L.D.N." A record of
all persons each person licensed as dietitian-nutritionists
each person licensed as a dietitian-nutritionist in this Commonwealth shall be kept in
the office of the Board and shall be open to public inspection
and copying upon payment of a nominal fee for copying the
record.

(c) The Board shall issue to each person who meets the
advanced practice registered nurse-certified nurse practitioner
licensure requirements of this act a certificate setting forth
that such person is licensed as an advanced practice registered
nurse-certified nurse practitioner and entitled to use the title
"advanced practice registered nurse-certified nurse
practitioner" and the letters "APRN-CNP." A record of each
person licensed as an advanced practice registered nurse
practitioner in this Commonwealth shall be kept in
the office of the Board and shall be open to public
inspection and copying upon payment of a nominal fee for copying the
record.

Section 8.1. [Certified Registered Nurse Practitioners; Qualifications.--(a) The board may certify a licensed
registered nurse as a certified registered nurse practitioner in

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a particular clinical specialty area if the nurse satisfies the
requirements established by this act and regulations promulgated
by the board. Certification of a nurse by the board shall expire
on the same date as the license of that nurse expires.

(b) (1) Beginning on the effective date of this section, a
nurse shall not qualify for initial certification by the board
under subsection (a) unless the nurse:

(i) is a graduate of an accredited, board approved master's
or post master's nurse practitioner program; and

(ii) holds certification as a certified registered nurse
practitioner from a board-recognized national certification
organization which required passing of a national certifying
examination in the particular clinical specialty area in which
the nurse is seeking certification by the board.

(2) This subsection shall not apply to a nurse who:

(i) holds certification from the board as a certified
registered nurse practitioner on the effective date of this
subsection; or

(ii) would otherwise qualify for certification as a
certified registered nurse practitioner under section 7(b).

(3) In order to provide a transition period for persons who
completed or were enrolled in an approved educational program on
the effective date of this section and to permit those persons

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(ii) fulfills all administrative requirements of the board and possesses all of the other qualifications for certification in effect immediately prior to the effective date of this section.

(c) As a condition for biennial renewal of certification by the board, a certified registered nurse practitioner must, in the two (2) years prior to renewal, complete at least thirty (30) hours of continuing education approved by the board. In the case of a certified registered nurse practitioner who is prescribing medical therapeutic or corrective measures pursuant to section 8.3, that continuing education must include at least sixteen (16) hours in pharmacology in that two-year period.

Advanced Practice Registered Nurse-Certified Nurse Practitioner.--(d) A registered nurse who holds current certification by the board on the effective date of this subsection as a certified registered nurse practitioner in a population focus area on the effective date of this subsection shall automatically be deemed to be licensed by the board as an advanced practice registered nurse-certified nurse practitioner in the population focus area for which the registered nurse is otherwise qualified. The board shall issue appropriate written notice of the license as an advanced practice registered nurse-certified nurse practitioner, except that the issuance of that notice shall not be a condition precedent to practice in accordance with the license.

(e) Except as provided in subsection (d), an individual shall not qualify for an initial license as an advanced practice registered nurse-certified nurse practitioner on or after the effective date of this subsection unless the person meets the following criteria:
(1) Holds a current license in this Commonwealth as a registered nurse.

(2) Is a graduate of an accredited, board-approved master's or post-master's nurse practitioner or doctorate in nursing program.

(3) Holds current certification as an advanced practice registered nurse-certified nurse practitioner from a board-recognized national certification program which required passing a national certifying examination in a population focus area or population focus area in which the nurse is seeking licensure by the board.

(f) (1) An initial license under subsection (d) as an advanced practice registered nurse-certified nurse practitioner shall expire on the same date as the nurse's then current license as a registered nurse is scheduled to expire. The license as an advanced practice registered nurse-certified nurse practitioner shall thereafter be renewed biennially on the same date as the nurse's license as a registered nurse.

(2) An initial license under subsection (d) or section 7(b) as an advanced practice registered nurse-certified nurse practitioner shall expire on the same date as the nurse's then current license as a registered nurse is scheduled to expire. The license as an advanced practice registered nurse-certified nurse practitioner shall thereafter be renewed biennially on the same date as the nurse's license as a registered nurse.

(3) As a condition for biennial renewal by the board of a license as an advanced practice registered nurse-certified nurse practitioner, the nurse must do all of the following:

(i) Maintain a current license in this Commonwealth as a registered nurse.
(ii) Maintain current certification through a board-recognized national certification program in the population focus area in which the nurse is licensed as an advanced practice registered nurse-certified nurse practitioner by the board.

(iii) In the two (2) years prior to renewal, complete at least thirty (30) hours of continuing education approved by the board. For an advanced practice registered nurse-certified nurse practitioner who is prescribing medical therapeutic or corrective measures under section 8.3, the continuing education must include at least sixteen (16) hours in pharmacology in the two-year period.

(g) The board shall establish a procedure by which a license as an advanced practice registered nurse-certified nurse practitioner may be amended prior to the biennial renewal date in order to authorize a nurse to practice in a population focus area in which the nurse was not certified on the effective date of this subsection or on the date on which the nurse's current license as an advanced practice registered nurse-certified nurse practitioner was issued or renewed. The board shall authorize an advanced practice registered nurse-certified nurse practitioner to practice in an additional population focus area only if the nurse holds current certification from a board-recognized national certification program which requires the passing of a national certifying examination in the additional population focus area.

(h) (1) The use of the terms "certified registered nurse-practitioner," "registered nurse practitioner," "certified nurse practitioner" and "nurse practitioner" in any other act shall be deemed to include a person licensed as a certified nurse-practitioner.
practitioner under this section or section 7(b).

(2) A registered nurse who is licensed by the board as an advanced practice registered nurse-certified nurse practitioner in a population focus area is entitled to use the title "advanced practice registered nurse certified nurse practitioner" and the letters "APRN CNP." It shall be unlawful for any other person to use the title "advanced practice registered nurse certified nurse practitioner" or the letters "APRN CNP."

(i) An advanced practice registered nurse certified nurse practitioner may form a professional corporation with one or more of the following:

(ii) Other registered nurses.

(ii) Other health care practitioners who treat human ailments and conditions and are licensed to provide health care services in this Commonwealth without receiving a referral or supervision from another health care practitioner.

(2) This subsection shall be construed to abrogate the requirement that the State Board of Medicine and the State Board of Osteopathic Medicine expressly authorize the combined practice of advanced practice registered nurse-certified nurse practitioners with doctors of medicine or doctors of osteopathic medicine, respectively, found in 15 Pa.C.S. § 2903(d)(1)(ii) (relating to formation of professional corporations).

(i) An advanced practice registered nurse certified nurse practitioner who has engaged in the practice of professional nursing in collaboration with a physician for a period of not less than three (3) years and not less than three thousand six hundred (3,600) hours in accordance with a collaborative or written agreement with a physician shall not be subject to the
requirements under sections 8.2(b) and 8.3(a)(2)(i).

(k) An advanced practice registered nurse-certified nurse practitioner who qualifies for the exception under subsection (j) shall file a form with the board attesting to having engaged in the practice of professional nursing in collaboration with a physician for a period of not less than three (3) years and not less than three thousand six hundred (3,600) hours. The form shall be developed by the board by regulation.

(l) A registered nurse who was licensed or certified by another state, territory or possession of the United States or a foreign country and received a license as an advanced practice registered nurse-certified nurse practitioner issued by the board or a temporary practice permit to practice as an advanced practice registered nurse-certified nurse practitioner under section 4.1 may qualify for the exception under subsection (j) if the advanced practice registered nurse-certified nurse practitioner satisfactorily demonstrates to the board the completion of no less than three (3) years and no less than three thousand six hundred (3,600) hours of practice in collaboration with a physician deemed equivalent to the requirements of subsection (j) which occurred in this Commonwealth or in one or more other states, territories or possessions of the United States or foreign countries where the advanced practice registered nurse-certified nurse practitioner was previously, or is currently, licensed.

(m) The advanced practice registered nurse practitioner is accountable to patients, the nursing profession and the board and shall:

(1) comply with the requirements of this chapter and the quality expectations of advanced nursing care rendered;
(2) recognize limits of knowledge and experience;
(3) plan for the management of situations beyond the
advanced practice registered nurse-certified nurse
practitioner's expertise; and
(4) consult with or refer patients to other health care
providers, as appropriate.

Section 8.2. Scope of Practice for [Certified Registered
Nurse Practitioners] Advanced Practice Registered Nurse-
Certified Nurse Practitioners. (a) A certified registered
nurse practitioner while functioning in the expanded role as a
professional nurse] An advanced practice registered nurse-
certified nurse practitioner shall practice within the scope of
practice of the [particular clinical specialty] population focus-
area in which the nurse is [certified] licensed by the board.
Notwithstanding any other provision of law, an advanced practice-
registered nurse-certified nurse practitioner who meets the
requirements under section 8.1(j) or (l) is entitled to all of
the following:
(1) To practice as a licensed independent practitioner
within the scope of practice of a particular population focus-
area in which the nurse is licensed by the board.
(2) To be recognized as a primary care provider under
managed care and other health care plans.
(b) [A certified registered] Except as provided under-
section 8.1(j) or (l), an advanced practice registered nurse-
certified nurse practitioner may perform acts of medical
diagnosis in collaboration with a physician and in accordance-
with regulations promulgated by the board.
(c) Except as provided in subsection (c.1), [a certified-
registered nurse] an advanced practice registered nurse-

certified nurse practitioner may prescribe medical therapeutic or corrective measures if the nurse is acting in accordance with the provisions of section 8.3.

(c.1) Except as limited by subsection (c.2), and in addition to existing authority, [a certified registered nurse] an advanced practice registered nurse-certified nurse practitioner shall have authority to do all of the following, provided that the certified nurse practitioner advanced practice registered nurse-certified nurse practitioner is acting within the scope of the [certified registered nurse] advanced practice registered nurse-certified nurse practitioner's collaborative or written agreement with a physician and the certified registered nurse advanced practice registered nurse-certified nurse practitioner's [specialty certification] population focus area:

(1) Order home health and hospice care.
(2) Order durable medical equipment.
(3) Issue oral orders [to the extent permitted by the health care facilities' by-laws, rules, regulations or administrative policies and guidelines].
(4) Make physical therapy and dietitian referrals.
(5) Make respiratory, speech and occupational therapy referrals.
(6) Perform disability assessments for the program providing Temporary Assistance to Needy Families (TANF).
(7) Issue homebound schooling certifications.
(8) Perform and sign the initial assessment of methadone treatment evaluations[, provided that any] and order [for] methadone treatment [shall be made only by a physician].

(c.2) Nothing in this section shall be construed to
(1) Supersede the authority of the Department of Health and
the Department of Public Welfare to regulate the types of health
care professionals who are eligible for medical staff membership
or clinical privileges.

(2) Restrict the authority of a health care facility to
determine the scope of practice and supervision or other
oversight requirements for health care professionals practicing
within the facility.] Notwithstanding any provision of the act
of July 19, 1979 (P.L.130, No.48), known as the "Health Care
Facilities Act," no regulation or order of the Department of
Health, the Department of Human Services or the Insurance
Department shall supersede the decision of the governing body of
a health care facility that the types of health care
professionals who are eligible for medical staff membership or
clinical privileges at the facility include advanced practice
registered nurse-certified nurse practitioners when practicing
as licensed independent practitioners.

(d) Nothing in this section shall be construed to limit or
prohibit [a certified registered] an advanced practice
registered nurse-certified nurse practitioner from engaging in
those activities which normally constitute the practice of
professional nursing as defined in section 2.

Section 8.3. Prescriptive Authority for [Certified
Registered] Advanced Practice Registered Nurse Certified Nurse
Practitioners. (a) [A certified registered] An advanced
practice registered nurse certified nurse practitioner may
prescribe medical therapeutic or corrective measures if the
nurse
(1) has successfully completed at least forty-five (45)
hours of coursework specific to advanced pharmacology at a level
above that required by a professional nursing education program;

(2) (i) except as provided under subparagraph (ii), is
acting in collaboration with a physician as set forth in a
written agreement which shall, at a minimum, identify the
following:

[(i)] [A] the area of practice in which the nurse is
certified;

[(ii)] [B] the categories of drugs from which the nurse may
prescribe or dispense, and

[(iii)] [C] the circumstances and how often the

(ii) is an advanced practice registered nurse-certified
nurse practitioner that qualifies for the exception from
section 8.1(i) or (l) and is practicing within a population
focus area in which the nurse is certified by a board-recognized
national certification program; and

(3) is acting in accordance with regulations promulgated by
the board.

(b) [A certified registered] An advanced practice registered
nurse-certified nurse practitioner who satisfies the
requirements of subsection (a) may prescribe and dispense [those
categories of drugs that certified registered nurse
practitioners were authorized to prescribe and dispense by board
regulations in effect on the effective date of this section,
subject to the restrictions on certain drug categories imposed
by those regulations. The board shall add to or delete from the
categories of authorized drugs in accordance with the provisions
of section 8.4] proprietary and nonproprietary drugs, subject to
any restrictions imposed by board regulations or by Federal law.

Section 8.4. [Drug Review Committee.  (a) The Drug Review
Committee is hereby established and shall consist of seven members as follows:

(1) The Secretary of Health or, at the discretion of the Secretary of Health, the Physician General as his or her designee, who shall act as chairman.

(2) Two certified registered nurse practitioners who are actively engaged in clinical practice, appointed to three-year terms by the Secretary of Health.

(3) Two licensed physicians who are actively engaged in clinical practice, appointed to three-year terms by the Secretary of Health, at least one of whom shall, at the time of appointment, be collaborating with one or more certified registered nurse practitioners in accordance with section 8.3(a).

(4) Two licensed pharmacists who are actively engaged in the practice of pharmacy, appointed to three-year terms by the Secretary of Health.

(b) (1) The board shall submit to the Drug Review Committee any proposed change to the categories of drugs that certified registered nurse practitioners were authorized to prescribe pursuant to board regulations in effect on the effective date of this section. The board shall not change, by addition or deletion, the categories of authorized drugs without prior approval of the Drug Review Committee.

(2) Within sixty (60) days of a submission by the board under paragraph (1), a majority of the Drug Review Committee shall vote to approve or disapprove the proposed change.

(3) If a majority of the Drug Review Committee fails to vote to approve or disapprove the proposed change within sixty (60) days of receipt of a submission by the board under paragraph...
(1), the Drug Review Committee shall be deemed to have approved the proposed change.] (Reserved).

Section 8.7. Professional Liability. -- (Reserved).

Section 8.7. Professional Liability. -- (A certified registered) (a) An advanced practice registered nurse-certified nurse practitioner practicing in this Commonwealth shall maintain a level of professional liability coverage as required for a nonparticipating health care provider under the act of March 20, 2002 (P.L.154, No.13), known as the "Medical Care Availability and Reduction of Error (Mcare) Act," but shall not be eligible to participate in the Medical Care Availability and Reduction of Error (Mcare) Fund.

(b) An advanced practice registered nurse-certified nurse practitioner who qualifies for the exception under section 8.1(i) or (l) and operates without collaboration shall satisfy the liability coverage requirement under subsection (a) by maintaining an individual policy in the advanced practice registered nurse-certified nurse practitioner's own name.

Section 11.1. Reporting of Multiple Licensure. -- Any licensed professional nurse or dietitian-nutritionist of this Commonwealth who is also licensed to practice nursing, advanced practice registered nursing or dietetics-nutrition in any other state, territory, possession or country shall report this information to the Board on the biennial registration application. Any disciplinary action taken in other states shall be reported to the Board on the biennial registration application or within ninety (90) days of final disposition, whichever is sooner. Multiple licensure shall be noted by the Board on the licensee's record, and such state, territory, possession or country shall be notified by the Board of any disciplinary actions taken against said licensee in this Commonwealth.
Section 12.1. Continuing Nursing Education. -- * * *

(g) In lieu of meeting the requirements of this section:

(1) [Certified registered] Advanced practice registered
nurse certified nurse practitioners and dietetics nutrition-
licensees shall fulfill the requirements for continuing
education in accordance with sections 8.1 and 11,
respectively.

Section 13. Punishment for Violations. * * * *

(b) In addition to any other civil remedy or criminal-
penalty provided for in this act, the Board, by a vote of the-
majority of the maximum number of the authorized membership of-
the Board as provided by law or by a vote of the majority of the-
duly qualified and confirmed membership or a minimum of five (5)
members, whichever is greater, may levy a civil penalty of up to-
one thousand dollars ($1,000) on any current licensee who-
violates any provision of this act or on any person who-
practices nursing, practices advanced practice registered-
nursing or holds himself or herself forth as a licensed-
dietitian-nutritionist without being properly licensed to do so-
under this act or on the responsible officers or employees of any-
corporation, copartnership, institution or association violating-
any of the provisions of this act. The Board shall levy this-
penalty only after affording the accused party the opportunity-
for a hearing, as provided in Title 2 of the Pennsylvania-
Consolidated Statutes (relating to administrative law and-
procedure).

Section 14. Refusal, Suspension or Revocation of Licenses. --

(a) The Board may refuse, suspend or revoke any license in any
case where the Board shall find that—

(1) The licensee is on repeated occasions negligent or incompetent in the practice of professional nursing, advanced practice registered nursing or dietetics-nutrition.

(2) The licensee is unable to practice professional nursing or the practice of advanced practice registered nursing with reasonable skill and safety to patients by reason of mental or physical illness or condition or physiological or psychological dependence upon alcohol, hallucinogenic or narcotic drugs or other drugs which tend to impair judgment or coordination, so long as such dependence shall continue. In enforcing this clause—

(2), the Board shall, upon probable cause, have authority to compel a licensee to submit to a mental or physical examination as designated by it. After notice, hearing, adjudication and appeal as provided for in section 15, failure of a licensee to submit to such examination when directed shall constitute an admission of the allegations against him or her unless failure is due to circumstances beyond his or her control, consequent upon which a default and final order may be entered without the taking of testimony or presentation of evidence. A licensee affected under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume a competent practice of professional nursing or the practice of advanced practice registered nursing with reasonable skill and safety to patients.

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(4) The licensee has committed fraud or deceit in:

(i) the practice of nursing, the practice of advanced practice registered nursing or in securing his or her admission to such practice or nursing school; or
(ii) the practice of dietetics-nutrition or in securing his or her license as a dietitian-nutritionist.

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(b) When the Board finds that the license of any nurse or dietitian nutritionist may be refused, revoked or suspended under the terms of subsection (a), the Board may:

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(6) Restore or reissue, in its discretion, a suspended license to practice professional or practical nursing, advanced practice registered nursing or dietetics-nutrition and impose any disciplinary or corrective measure which it might originally have imposed.

Section 15.2. Reinstatement of License. Unless ordered to do so by Commonwealth Court or an appeal therefrom, the Board shall not reinstate the license of a person to practice nursing, advanced practice registered nursing or dietetics-nutrition which has been revoked. Any person whose license has been revoked may reapply for a license, after a period of at least five (5) years, but must meet all of the licensing qualifications of this act for the license applied for, to include the examination requirement, if he or she desires to practice at any time after such revocation.

Section 15.4. Injunction or Other Process. It shall be unlawful for any person to practice or attempt to offer to practice nursing, practice advanced practice registered nursing or hold himself or herself forth as a licensed dietitian nutritionist, as defined in this act, or an advanced practice registered nurse-certified nurse practitioner without having at the time of so doing a valid, unexpired, unrevoked and unsuspended license issued under this act. The unlawful practice
of nursing [as defined in this act] or the unlawful practice of
advanced practice registered nursing may be enjoined by the
courts on petition of the Board or the Commissioner of
Professional and Occupational Affairs. In any such proceeding,
it shall not be necessary to show that any person is
individually injured by the actions complained of. If it is
determined that the respondent has engaged in the unlawful
practice of nursing or the unlawful practice of advanced
practice registered nursing, the court shall enjoin him or her
from so practicing unless and until he or she has been duly
licensed. Procedure in such cases shall be the same as in any
other injunction suit. The remedy by injunction hereby given is
in addition to any other civil or criminal prosecution and
punishment.

Section 4. The authority of the State Board of Nursing to
certify a licensed registered nurse as an advanced practice-
registered nurse—certified nurse practitioner shall expire on
the effective date of this section.

Section 5. Within 90 days after the effective date of this
section, the State Board of Nursing, the Department of Health,
the Department of Human Services and other affected agencies
shall initiate the promulgation of regulations necessary to
carry out the provisions of this act. The promulgation of the
regulations shall not be a condition precedent to the
applicability of this act.

Section 6. This act shall take effect in 60 days.

SECTION 1. THE ACT OF MAY 22, 1951 (P.L.317, NO.69), KNOWN AS THE PROFESSIONAL NURSING LAW, IS AMENDED BY ADDING A SECTION TO READ:

SECTION 8.8. CERTIFIED REGISTERED NURSE PRACTITIONER PILOT
PROGRAM.--(A) THE BOARD SHALL ESTABLISH THE CERTIFIED REGISTERED NURSE PRACTITIONER PILOT PROGRAM TO ALLOW AN ELIGIBLE CERTIFIED REGISTERED NURSE PRACTITIONER TO RECEIVE AN ADDITIONAL CERTIFICATION TO PRACTICE AS AN INDEPENDENT PRACTITIONER IN A HEALTH PROFESSIONAL SHORTAGE AREA.

(B) A CERTIFIED REGISTERED NURSE PRACTITIONER SHALL BE ELIGIBLE TO PARTICIPATE IN THE PROGRAM IF THE CERTIFIED REGISTERED NURSE PRACTITIONER MEETS ALL OF THE FOLLOWING CRITERIA:

(1) THE CERTIFIED REGISTERED NURSE PRACTITIONER HOLDS A CURRENT LICENSE TO PRACTICE IN THIS COMMONWEALTH.

(2) THE CERTIFIED REGISTERED NURSE PRACTITIONER RECEIVED NO DISCIPLINARY ACTION OR HAS NO PENDING DISCIPLINARY ACTION WITHIN THE FIVE (5) YEARS IMMEDIATELY PRECEDING THE DATE OF THE CERTIFIED REGISTERED NURSE PRACTITIONER'S APPLICATION UNDER PARAGRAPH (4).

(3) THE CERTIFIED REGISTERED NURSE PRACTITIONER ENGAGED IN THE PRACTICE OF PROFESSIONAL NURSING IN COLLABORATION WITH A PHYSICIAN FOR A PERIOD OF NOT LESS THAN THREE (3) YEARS AND NOT LESS THAN THREE THOUSAND SIX HUNDRED (3,600) HOURS IN ACCORDANCE WITH A COLLABORATIVE OR WRITTEN AGREEMENT WITH A PHYSICIAN AND THE PRACTICE OCCURRED IN A PRIMARY CARE SETTING WITHIN THE FIVE (5) YEARS IMMEDIATELY PRECEDING THE DATE OF THE CERTIFIED REGISTERED NURSE PRACTITIONER'S APPLICATION UNDER PARAGRAPH (4).

(4) THE CERTIFIED REGISTERED NURSE PRACTITIONER SUBMITS AN APPLICATION WITH THE BOARD ON A FORM PRESCRIBED BY THE BOARD AND PAYS A FEE ESTABLISHED BY THE BOARD. THE APPLICATION SHALL ATTEST THAT THE CERTIFIED REGISTERED NURSE PRACTITIONER MEETS THE CRITERIA TO PARTICIPATE IN THE PROGRAM UNDER PARAGRAPH (3) AND SHALL BE SIGNED BY A CURRENT OR FORMER COLLABORATING
PHYSICIAN UNDER PARAGRAPH (3). IF THE CERTIFIED REGISTERED NURSE
PRACTITIONER IS UNABLE TO OBTAIN THE SIGNATURE REQUIRED UNDER
THIS PARAGRAPH, THE BOARD MAY ACCEPT ANY OTHER DOCUMENTATION
ATTESTING THAT THE CERTIFIED REGISTERED NURSE PRACTITIONER MEETS
THE CRITERIA TO PARTICIPATE IN THE PROGRAM UNDER PARAGRAPH (3).

(C) WHILE PRACTICING IN A HEALTH PROFESSIONAL SHORTAGE AREA
UNDER THE PROGRAM, A CERTIFIED REGISTERED NURSE PRACTITIONER
MAY:

(1) PRACTICE IN ACCORDANCE WITH SECTION 8.2 WITHOUT A
COLLABORATIVE AGREEMENT; AND

(2) PRESCRIBE MEDICAL THERAPEUTIC OR CORRECTIVE MEASURES IN
ACCORDANCE WITH SECTION 8.3 WITHOUT A COLLABORATIVE AGREEMENT.

(D) IN ORDER TO CONTINUE TO PARTICIPATE IN THE PROGRAM, A
CERTIFIED REGISTERED NURSE PRACTITIONER SHALL BE SUBJECT TO
BIENNIAL RENEWAL AND SHALL SUBMIT A RENEWAL APPLICATION ON A
FORM PRESCRIBED BY THE BOARD, PAY A FEE ESTABLISHED BY THE BOARD
AND COMPLETE TEN (10) HOURS OF CONTINUING EDUCATION APPROVED BY
THE BOARD IN PATIENT SAFETY AND RISK MANAGEMENT. THE RENEWAL
APPLICATION UNDER THIS SUBSECTION SHALL ATTEST THAT THE
CERTIFIED REGISTERED NURSE PRACTITIONER COMPLETED THE CONTINUING
EDUCATION REQUIRED UNDER THIS SUBSECTION. THE CONTINUING
EDUCATION REQUIRED UNDER THIS SUBSECTION SHALL BE IN ADDITION TO
THE CONTINUING EDUCATION REQUIRED UNDER SECTION 8.1(C).

(E) WHILE PRACTICING IN A HEALTH PROFESSIONAL SHORTAGE AREA
UNDER THE PROGRAM, THE CLINICAL PRACTICE OF A CERTIFIED
REGISTERED NURSE PRACTITIONER SHALL BE LIMITED TO PRIMARY CARE,
INCLUDING FAMILY PRACTICE, INTERNAL MEDICINE, GYNECOLOGY OR
PEDIATRICS. A CERTIFIED REGISTERED NURSE PRACTITIONER SHALL
IMMEDIATELY NOTIFY THE BOARD IN WRITING IF THE CERTIFIED
REGISTERED NURSE PRACTITIONER CHANGES PRACTICE SETTINGS OR
PROVIDES CARE IN AN AREA THAT IS NOT A HEALTH PROFESSIONAL SHORTAGE AREA. A CERTIFIED REGISTERED NURSE PRACTITIONER WHO FAILS TO PROVIDE THE NOTICE REQUIRED UNDER THIS SUBSECTION OR WHO IS FOUND TO BE PRACTICING OUTSIDE OF THE PRACTICE SETTINGS OR HEALTH PROFESSIONAL SHORTAGE AREA SPECIFIED IN THE NOTICE SHALL NOT BE AUTHORIZED TO CONTINUE PARTICIPATION IN THE PROGRAM AND DISCIPLINARY ACTIONS MAY BE TAKEN ON THE CERTIFIED REGISTERED NURSE PRACTITIONER'S LICENSE AS DEEMED NECESSARY BY THE BOARD.

(F) WHILE PARTICIPATING IN THE PROGRAM IN A HEALTH PROFESSIONAL SHORTAGE AREA, A CERTIFIED REGISTERED NURSE PRACTITIONER SHALL BE ACCOUNTABLE TO THE BOARD, NURSING PROFESSION AND PATIENTS AND SHALL HAVE THE FOLLOWING DUTIES:

(1) THE CERTIFIED REGISTERED NURSE PRACTITIONER SHALL COMPLY WITH THE REQUIREMENTS OF THIS ACT AND THE STANDARD OF CARE OF ADVANCED NURSING CARE RENDERED.

(2) THE CERTIFIED REGISTERED NURSE PRACTITIONER SHALL RECOGNIZE THE CERTIFIED REGISTERED NURSE PRACTITIONER'S LIMITATION REGARDING KNOWLEDGE AND EXPERIENCE.

(3) THE CERTIFIED REGISTERED NURSE PRACTITIONER SHALL WEAR A NAME IDENTIFICATION BADGE STATING THE INDIVIDUAL'S PROFESSIONAL TITLE AND SHALL INFORM NEW PATIENTS IN WRITING ABOUT THE CERTIFIED REGISTERED NURSE PRACTITIONER'S QUALIFICATIONS, INCLUDING A DISCLOSURE THAT THE CERTIFIED REGISTERED NURSE PRACTITIONER IS NOT A PHYSICIAN, AND THE NATURE OF THE CERTIFIED REGISTERED NURSE PRACTITIONER'S AUTONOMOUS PRACTICE BEFORE OR DURING THE INITIAL PATIENT ENCOUNTER.

(4) THE CERTIFIED REGISTERED NURSE PRACTITIONER SHALL PLAN FOR THE MANAGEMENT OF SITUATIONS BEYOND THE CERTIFIED REGISTERED NURSE PRACTITIONER'S EXPERTISE.
THE CERTIFIED REGISTERED NURSE PRACTITIONER SHALL CONSULT WITH AND REFER PATIENTS TO OTHER HEALTH CARE PROVIDERS, AS APPROPRIATE.

THE FOLLOWING SHALL APPLY:

1. THE BOARD SHALL BE RESPONSIBLE FOR ADMINISTERING THE PROGRAM. WITHIN 60 DAYS OF THE EFFECTIVE DATE OF THIS SUBSECTION, THE BOARD SHALL ESTABLISH A SUBCOMMITTEE TO ASSIST THE BOARD IN ADMINISTERING THE PROGRAM. THE SUBCOMMITTEE SHALL CONSIST OF THE FOLLOWING MEMBERS:

   I. THE SECRETARY OF HEALTH OR A DESIGNEE FROM THE DEPARTMENT OF HEALTH, BUREAU OF HEALTH PLANNING, THAT HAS EXPERIENCE AND EXPERTISE IN HEALTH PROFESSIONAL SHORTAGE AREAS, WHO SHALL SERVE AS CHAIR OF THE SUBCOMMITTEE.

   II. TWO CERTIFIED REGISTERED NURSE PRACTITIONERS WHO ARE ACTIVELY ENGAGED IN PRIMARY CARE CLINICAL PRACTICE. THE CERTIFIED REGISTERED NURSE PRACTITIONERS SHALL BE SELECTED BY A STATEWIDE PROFESSIONAL ORGANIZATION REPRESENTING CERTIFIED REGISTERED NURSE PRACTITIONERS ENGAGED IN PRIMARY CARE CLINICAL PRACTICE. THE STATEWIDE PROFESSIONAL ORGANIZATION SHALL SUBMIT THE NAMES OF THE CERTIFIED REGISTERED NURSE PRACTITIONERS SELECTED UNDER THIS SUBPARAGRAPH TO THE BOARD FOR APPOINTMENT ON THE SUBCOMMITTEE.

   III. TWO LICENSED PHYSICIANS, ONE OF WHOM SHALL BE AN ALLOPATHIC PHYSICIAN AND ONE OF WHOM SHALL BE AN OSTEOPATHIC PHYSICIAN, WHO ARE ACTIVELY ENGAGED IN PRIMARY CARE CLINICAL PRACTICE. THE LICENSED PHYSICIANS SHALL BE SELECTED BY STATEWIDE PROFESSIONAL ORGANIZATIONS REPRESENTING FAMILY MEDICINE, INTERNAL MEDICINE OR PEDIATRICS. THE STATEWIDE PROFESSIONAL ORGANIZATIONS SHALL SUBMIT THE NAMES OF THE LICENSED PHYSICIANS SELECTED UNDER THIS SUBPARAGRAPH TO THE BOARD FOR APPOINTMENT ON THE SUBCOMMITTEE.
THE SUBCOMMITTEE. AT THE TIME OF APPOINTMENT UNDER THIS
SUBPARAGRAPH, THE LICENSED PHYSICIANS SHALL MEET ALL OF THE
FOLLOWING CRITERIA:

(A) THE LICENSED PHYSICIANS SHALL BE COLLABORATING WITH A
CERTIFIED REGISTERED NURSE PRACTITIONER OR SHALL HAVE
COLLABORATED WITH A CERTIFIED REGISTERED NURSE PRACTITIONER
WITHIN THE PRECEDING THREE (3) YEARS.

(B) THE LICENSED PHYSICIANS SHALL BE NATIONALLY BOARD
CERTIFIED IN FAMILY MEDICINE, INTERNAL MEDICINE OR PEDIATRICS.

(2) THE SUBCOMMITTEE SHALL HAVE THE FOLLOWING DUTIES:

(I) PROVIDE GUIDANCE TO CERTIFIED REGISTERED NURSE
PRACTITIONERS REGARDING THE QUALIFICATIONS TO PARTICIPATE IN THE
PROGRAM.

(II) APPROVE THE TEMPORARY REGULATIONS PROMULGATED UNDER
SUBSECTION (M).

(III) REVIEW APPLICATIONS FOR CERTIFICATION TO PARTICIPATE
IN THE PROGRAM.

(IV) COLLABORATE WITH THE BOARD TO APPROVE, ISSUE, TRACK AND
REVOKE THE CERTIFICATION OF CERTIFIED REGISTERED NURSE
PRACTITIONERS TO PARTICIPATE IN THE PROGRAM.

(V) CONDUCT A PRELIMINARY REVIEW OF A CERTIFIED REGISTERED
NURSE PRACTITIONER'S APPLICATION TO PARTICIPATE IN THE PROGRAM.

IF THE SUBCOMMITTEE DETERMINES THAT THE CERTIFIED REGISTERED
NURSE PRACTITIONER MEETS THE CRITERIA TO PARTICIPATE IN THE
PROGRAM UNDER SUBSECTION (B), THE SUBCOMMITTEE SHALL SUBMIT A
NOTICE OF PREAPPROVAL TO THE BOARD. THE BOARD MAY NOT ISSUE A
CERTIFICATION TO PARTICIPATE IN THE PROGRAM TO A CERTIFIED
REGISTERED NURSE PRACTITIONER IF THE CERTIFIED REGISTERED NURSE
PRACTITIONER'S APPLICATION HAS NOT BEEN PREAPPROVED BY THE
SUBCOMMITTEE UNDER THIS SUBPARAGRAPH.
(H) While participating in the program in a health professional shortage area, a certified registered nurse practitioner shall be recognized as a primary care provider.

(I) A certified registered nurse practitioner who participates in the program shall be deemed to be a participating health care provider as defined in section 702 of the act of March 20, 2002 (P.L.154, No.13), known as the medical care availability and reduction of error (MCARE) act, shall meet the requirements under section 711 of the medical care availability and reduction of error (MCARE) act, and shall be assessed under section 712 of the medical care availability and reduction of error (MCARE) act. Upon receiving an assessment under section 712 of the medical care availability and reduction of error (MCARE) act, the certified registered nurse practitioner who participates in the program shall be eligible to receive money from claims paid by the medical care availability and reduction of error fund. For purposes of the program, the board shall be considered a licensure authority as defined in section 702 of the medical care availability and reduction of error (MCARE) act.

(J) If a certified registered nurse practitioner intends to practice simultaneously under the program, and pursuant to a collaboration agreement with a physician who is external to the program, the collaborating physician shall have no legal responsibility for acts or omissions of the certified registered nurse practitioner practicing under the program.

(K) The following shall apply:

(1) Five (5) years after the effective date of this subsection, the joint state government commission shall conduct a study on the program and, within six (6) months of commencing 20190HB0100PN4452.
THE STUDY, SUBMIT THE STUDY TO THE CONSUMER PROTECTION AND THE PROFESSIONAL LICENSURE COMMITTEE OF THE SENATE AND THE PROFESSIONAL LICENSURE COMMITTEE OF THE HOUSE OF REPRESENTATIVES FOR THE PURPOSE OF EVALUATING THE PROGRAM. THE STUDY SHALL INCLUDE, BUT NOT BE LIMITED TO, ALL OF THE FOLLOWING INFORMATION:

(I) THE NUMBER OF CERTIFIED REGISTERED NURSE PRACTITIONERS WHO PARTICIPATED IN THE PROGRAM AND THE HEALTH PROFESSIONAL SHORTAGE AREAS WHERE THEY PARTICIPATED.

(II) THE NUMBER OF CERTIFIED REGISTERED NURSE PRACTITIONERS WHO WERE REJECTED FROM PARTICIPATING IN THE PROGRAM AND THE REASON WHY THEY WERE REJECTED.

(III) THE NUMBER OF CERTIFIED REGISTERED NURSE PRACTITIONERS THAT LEFT THE PROGRAM AND THE REASON WHY THEY LEFT THE PROGRAM.

(IV) THE ACCESS TO PATIENT CARE, PATIENT OUTCOMES AND EMERGENCY ROOM USE IN THE HEALTH PROFESSIONAL SHORTAGE AREAS COVERED UNDER THE PROGRAM AS COMPARED TO THE ACCESS TO PATIENT CARE, PATIENT OUTCOMES AND EMERGENCY ROOM USE IN THE AREAS NOT COVERED BY THE PROGRAM.

(V) THE NUMBER OF REFERRALS BY CERTIFIED REGISTERED NURSE PRACTITIONERS TO EMERGENCY HOSPITALS, THE SEVERITY OF ILLNESS EXPERIENCED BY EACH REFERRED PATIENT AND THE NUMBER OF REPEAT VISITS BY PATIENTS TO EMERGENCY HOSPITALS.

(VI) A COMPARISON OF THE USE OF ADVANCED DIAGNOSTIC TESTS AND IMAGING BY CERTIFIED REGISTERED NURSE PRACTITIONERS PARTICIPATING IN THE PROGRAM AND THE USE OF ADVANCED DIAGNOSTIC TESTS AND IMAGING BY PRIMARY CARE PHYSICIANS IN THE SAME HEALTH PROFESSIONAL SHORTAGE AREA.

(VII) THE NUMBER OF COMPLAINTS FILED WITH THE BOARD, THE NATURE OF THE COMPLAINTS AND THE DISCIPLINARY ACTIONS THAT WERE
TAKEN.

(VIII) THE NUMBER OF REFERRALS BY CERTIFIED REGISTERED NURSE PRACTITIONERS TO PHYSICIAN SPECIALISTS AS COMPARED TO PRIMARY CARE PHYSICIANS IN THE SAME HEALTH PROFESSIONAL SHORTAGE AREAS COVERED UNDER THE PROGRAM, INCLUDING THE TYPES OF SPECIALISTS REFERRED TO BY CERTIFIED REGISTERED NURSE PRACTITIONERS, THE REASONS FOR THE REFERRALS AND THE NUMBER OF VISITS WITH EACH CERTIFIED REGISTERED NURSE PRACTITIONER BEFORE THE REFERRALS.

(IX) THE NUMBER OF CERTIFIED REGISTERED NURSE PRACTITIONERS THAT ARE EMPLOYED WHILE PARTICIPATING IN THE PROGRAM VERSUS THE NUMBER OF CERTIFIED REGISTERED NURSE PRACTITIONERS THAT ARE WORKING IN PRIVATE PRACTICE UNDER THE PROGRAM.

(X) ANY OTHER RELEVANT INFORMATION TO EVALUATE THE PROGRAM.

(2) THE JOINT STATE GOVERNMENT COMMISSION SHALL OBTAIN DEIDENTIFIED DATA FROM HEALTH INSURANCE COMPANY CLAIMS ON PATIENTS RECEIVING CARE FROM A CERTIFIED REGISTERED NURSE PRACTITIONER PARTICIPATING IN THE PROGRAM FOR THE PURPOSE OF COLLECTING DATA TO COMPLETE THE STUDY UNDER PARAGRAPH (1).

(3) THE BOARD SHALL PROVIDE THE JOINT STATE GOVERNMENT COMMISSION, UPON REQUEST, WITH ALL INFORMATION NECESSARY TO COMPLETE THE STUDY UNDER PARAGRAPH (1).

(L) THE DEPARTMENT SHALL NOTIFY THE BOARD AND SUBCOMMITTEE IMMEDIATELY UPON RECEIVING NOTIFICATION OF AN ALLEGED VIOLATION OF THIS SECTION. THE BOARD SHALL MAINTAIN CURRENT RECORDS OF ALL REPORTS OF ALLEGED VIOLATIONS AND PERIODICALLY REVIEW THE RECORDS FOR THE PURPOSE OF DETERMINING THAT EACH ALLEGED VIOLATION HAS BEEN RESOLVED IN A TIMELY MANNER, AND IF NECESSARY, FORWARD THE REPORTS TO THE STATE BOARD OF MEDICINE OR THE STATE BOARD OF OSTEOPATHIC MEDICINE FOR INFORMATIONAL PURPOSES.
THE BOARD SHALL PROMULGATE REGULATIONS NECESSARY TO IMPLEMENT THE PROGRAM AS APPROVED BY THE SUBCOMMITTEE ESTABLISHED UNDER SUBSECTION (G)(1) AND WITH THE CONSIDERATION OF ANY RECOMMENDATIONS MADE BY THE CONSUMER PROTECTION AND PROFESSIONAL LICENSURE COMMITTEE OF THE SENATE AND THE PROFESSIONAL LICENSURE COMMITTEE OF THE HOUSE OF REPRESENTATIVES FOR THE PURPOSE OF EVALUATING THE PROGRAM. IN ORDER TO FACILITATE THE PROMPT IMPLEMENTATION OF THE PROGRAM, REGULATIONS PROMULGATED BY THE BOARD SHALL BE DEEMED TEMPORARY REGULATIONS WHICH SHALL NOT EXPIRE FOR A PERIOD OF SIX (6) YEARS FOLLOWING PUBLICATION. TEMPORARY REGULATIONS PROMULGATED UNDER THIS SUBSECTION SHALL NOT BE SUBJECT TO:

(1) SECTION 612 OF THE ACT OF APRIL 9, 1929 (P.L.177, NO.175), KNOWN AS THE ADMINISTRATIVE CODE OF 1929.

(2) SECTIONS 204(B) AND 301(10) OF THE ACT OF OCTOBER 15, 1980 (P.L.950, NO.164), KNOWN AS THE COMMONWEALTH ATTORNEYS ACT.

(3) SECTIONS 201, 202, 203, 204 AND 205 OF THE ACT OF JULY 31, 1968 (P.L.769, NO.240), REFERRED TO AS THE COMMONWEALTH DOCUMENTS LAW.


NOTHING IN THIS SECTION SHALL BE CONSTRUED TO:


(2) PROHIBIT A CERTIFIED REGISTERED NURSE PRACTITIONER CERTIFIED UNDER THE PROGRAM FROM CONSULTING WITH OR SEEKING INFORMATION RELATED TO PATIENT CARE FROM A PHYSICIAN. FOR THE
PURPOSE OF THIS SECTION, NO PHYSICIAN-PATIENT RELATIONSHIP SHALL BE ESTABLISHED BETWEEN A PATIENT AND A PHYSICIAN WITH WHOM THE CERTIFIED REGISTERED NURSE PRACTITIONER CONSULTS OR FROM WHOM CLINICAL INFORMATION OR GUIDANCE IS SOUGHT.

(O) THE PROGRAM SHALL EXPIRE SIX (6) YEARS AFTER THE EFFECTIVE DATE OF THIS SUBSECTION. UPON THE EXPIRATION OF THE PROGRAM, THE FOLLOWING SHALL APPLY:

(1) A CERTIFIED REGISTERED NURSE PRACTITIONER SHALL BE DEEMED TO HAVE RETIRED AS A HEALTH CARE PRACTITIONER FOR THE PURPOSES OF THE MEDICAL CARE AVAILABILITY AND REDUCTION OF ERROR (MCARE) ACT.

(2) A CERTIFIED REGISTERED NURSE PRACTITIONER MAY NOT PRACTICE UNDER THE PROGRAM.

(P) AS USED IN THIS SECTION, THE FOLLOWING WORDS AND PHRASES SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SUBSECTION:

"HEALTH PROFESSIONAL SHORTAGE AREA" SHALL MEAN A GEOGRAPHIC OR POPULATION AREA IN THIS COMMONWEALTH DESIGNATED BY THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES THAT INDICATES A HEALTH CARE PROFESSIONAL SHORTAGE IN PRIMARY CARE.

"PROGRAM" SHALL MEAN THE CERTIFIED REGISTERED NURSE PILOT PROGRAM ESTABLISHED UNDER SUBSECTION (A).

SECTION 2. THIS ACT SHALL TAKE EFFECT AS FOLLOWS:

(1) SECTION 8.8(G) AND (M) OF THE ACT SHALL TAKE EFFECT IMMEDIATELY.

(2) THIS SECTION SHALL TAKE EFFECT IMMEDIATELY.

(3) THE REMAINDER OF THIS ACT SHALL TAKE EFFECT IN 180 DAYS.