

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILLNo. **717** Session of
2015

INTRODUCED BY VANCE, SCARNATI, BAKER, YUDICHAK, HUTCHINSON,
SCHWANK, HUGHES, BARTOLOTTA, SCAVELLO, LEACH, WOZNIAK,
MCGARRIGLE, STEFANO, McILHINNEY, FOLMER, ARGALL, COSTA,
TEPLITZ, TARTAGLIONE, BLAKE, KITCHEN, RESCHENTHALER AND
MENSCH, APRIL 10, 2015

SENATOR TOMLINSON, CONSUMER PROTECTION AND PROFESSIONAL
LICENSURE, AS AMENDED, MAY 18, 2016

AN ACT

1 Amending the act of May 22, 1951 (P.L.317, No.69), entitled, as
2 amended, "An act relating to the practice of professional
3 nursing; providing for the licensing of nurses and for the
4 revocation and suspension of such licenses, subject to
5 appeal, and for their reinstatement; providing for the
6 renewal of such licenses; regulating nursing in general;
7 prescribing penalties and repealing certain laws," further
8 providing for definitions; and providing for licensure as a
9 certified nurse practitioner.

10 The General Assembly of the Commonwealth of Pennsylvania
11 hereby enacts as follows:

12 Section 1. Section 2(1), (10), ~~(13)~~ and (14) of the act of <--
13 May 22, 1951 (P.L.317, No.69), known as The Professional Nursing
14 Law, amended or added June 29, 2002 (P.L.651, No.99) and
15 December 9, 2002 (P.L.1567, No.206), are amended and the section
16 is amended by adding paragraphs to read:

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

1 (1) The "Practice of Professional Nursing" means diagnosing
2 and treating human responses to actual or potential health
3 problems through such services as casefinding, health teaching,
4 health counseling, and provision of care supportive to or
5 restorative of life and well-being, and executing medical
6 regimens as prescribed by a licensed physician or dentist. The
7 foregoing shall not be deemed to include acts of medical
8 diagnosis or prescription of medical therapeutic or corrective
9 measures, except as performed by a certified [registered] nurse
10 practitioner acting in accordance with rules and regulations
11 promulgated by the Board.

12 * * *

13 (10) "Medical nutrition therapy" means the component of
14 nutrition therapy that concerns determining and recommending
15 nutrient needs based on nutritional assessment and medical
16 problems relative to diets prescribed by a licensed physician or
17 certified nurse practitioner, including:

- 18 (i) tube feedings;
- 19 (ii) specialized intravenous solutions;
- 20 (iii) specialized oral solutions; and
- 21 (iv) interactions of prescription drugs with food or
22 nutrients.

23 * * *

24 ~~{(13) "Collaboration" means a process in which a certified <--~~
25 ~~registered nurse practitioner works with one or more physicians~~
26 ~~to deliver health care services within the scope of the~~
27 ~~certified registered nurse practitioner's expertise. The process~~
28 ~~includes all of the following:~~

- 29 ~~(i) Immediate availability of a licensed physician to a~~
30 ~~certified registered nurse practitioner through direct~~

1 ~~communications or by radio, telephone or telecommunications.~~

2 ~~(ii) A predetermined plan for emergency services.~~

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

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

15 * * *

16 (16) "Certified nurse practitioner" or "advanced practice
17 registered nurse-certified nurse practitioner" means a
18 registered nurse licensed in this Commonwealth to practice
19 independently in a particular clinical specialty area or
20 population focus in which the registered nurse is certified.

21 (17) "Population focus" means a category of the population
22 within which a certified nurse practitioner practices, including
23 family/individual across the lifespan, adult-gerontology,
24 neonatal, pediatrics, women's health/gender-related,
25 psychiatric/mental health and any other such categories as
26 designated by board regulations.

27 (18) "Controlled substance" means any drug designated as
28 such under the provisions of the act of April 14, 1972 (P.L.233,
29 No.64), known as the "Controlled Substance, Drug, Device and
30 Cosmetic Act."

1 (19) "Non-proprietary drug" means a drug containing any
2 quantity of any controlled substance or any drug which is
3 required by any applicable Federal or State law to be dispensed
4 only by prescription.

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

10 (21) "Licensed independent practitioner" means any
11 practitioner licensed under this act to provide care and
12 services, without direction or supervision, within the scope of
13 the practitioner's license.

14 Section 2. Section 2.1(1) of the act, added December 9, 2002
15 (P.L.1567, No.206), is amended to read:

16 Section 2.1. State Board of Nursing.--* * *

17 (1) Any powers and duties imposed on the State Board of
18 Medicine or jointly imposed on the State Board of Medicine and
19 the State Board of Nursing, with respect to certified
20 [registered] nurse practitioners, by or pursuant to law or
21 regulation shall, after the effective date of this subsection,
22 be exercised solely by the State Board of Nursing. This
23 subsection shall not apply to 49 Pa. Code §§ 21.283(4) (relating
24 to prescribing and dispensing drugs) and 21.321 (relating to
25 performance of tasks without direction; performance of tasks
26 without training; other) unless the State Board of Nursing
27 promulgates a regulation to exercise the duties imposed on the
28 State Board of Medicine by those sections.

29 ~~Section 3. Sections 3.1(b) and 7(b) of the act, amended or <--~~
30 ~~added June 29, 2002 (P.L.651, No.99), are amended to read:~~

1 SECTION 3. SECTION 3.1(B) OF THE ACT, AMENDED OR ADDED JUNE <--
2 29, 2002 (P.L.651, NO.99), IS AMENDED TO READ:

3 Section 3.1. Dietitian-Nutritionist License Required.--* * *

4 (b) Nothing in this section shall be construed to require or
5 preclude third-party insurance reimbursement. Nothing herein
6 shall preclude an insurer or other third-party payor from
7 requiring that a licensed dietitian-nutritionist obtain a
8 referral from a licensed physician, certified nurse
9 practitioner, dentist or podiatrist or that a licensed
10 dietitian-nutritionist file an evaluation and treatment plan
11 with the insurer or third-party payor as a precondition of
12 reimbursement.

13 SECTION 4. SECTION 4.1 OF THE ACT, ADDED DECEMBER 20, 1985 <--
14 (P.L.409, NO.109), IS AMENDED TO READ:

15 SECTION 4.1. TEMPORARY PRACTICE PERMIT.--(A) IN ORDER FOR A
16 PERSON TO PRACTICE PROFESSIONAL NURSING DURING THE ONE (1) YEAR
17 PERIOD FROM COMPLETION OF HIS OR HER EDUCATION PROGRAM OR THE
18 ONE (1) YEAR PERIOD FROM THE APPLICATION FOR LICENSURE BY A
19 PERSON WHO HOLDS A CURRENT LICENSE ISSUED BY ANY OTHER STATE,
20 TERRITORY OR POSSESSION OF THE UNITED STATES OR THE DOMINION OF
21 CANADA, THE BOARD MAY ISSUE A TEMPORARY PRACTICE PERMIT WHICH IS
22 NONRENEWABLE AND VALID FOR A PERIOD OF ONE (1) YEAR AND DURING
23 SUCH ADDITIONAL PERIOD AS THE BOARD MAY IN EACH CASE ESPECIALLY
24 PERMIT, EXCEPT THAT THE TEMPORARY PRACTICE PERMIT SHALL EXPIRE
25 IF SUCH PERSON FAILS THE LICENSING EXAMINATION.

26 (B) WITHIN 90 DAYS OF THE DATE A TEMPORARY PRACTICE PERMIT
27 TO PRACTICE AS A CERTIFIED NURSE PRACTITIONER IS ISSUED BY THE
28 BOARD TO AN INDIVIDUAL WHO WAS LICENSED OR CERTIFIED BY ANOTHER
29 STATE, TERRITORY OR POSSESSION OF THE UNITED STATES OR A FOREIGN
30 COUNTRY, THE INDIVIDUAL SHALL COMPLY WITH THE REQUIREMENTS UNDER

1 SECTIONS 8.2 AND 8.3 WITH REGARD TO ACTING IN COLLABORATION WITH
2 A PHYSICIAN AND IN ACCORDANCE WITH A COLLABORATIVE OR WRITTEN
3 AGREEMENT WITH A PHYSICIAN, UNLESS SUCH INDIVIDUAL QUALIFIES FOR
4 THE EXCEPTION FROM THE COLLABORATION REQUIREMENT ACCORDING TO
5 THE BOARD PURSUANT TO SECTION 8.9(C).

6 SECTION 5. SECTION 7(B) OF THE ACT, AMENDED JUNE 29, 2002
7 (P.L.651, NO.99), IS AMENDED TO READ:

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

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

20 * * *

21 Section ~~4~~ 6. Section 8.1 of the act is amended by adding a <--
22 subsection to read:

23 Section 8.1. Certified Registered Nurse Practitioners;
24 Qualifications.--* * *

25 (d) The authority of the board to certify a licensed
26 registered nurse as a certified registered nurse practitioner
27 shall expire on the effective date of section 8.8.

28 Section ~~5~~ 7. Section 8.2 of the act, amended July 20, 2007 <--
29 (P.L.318, No.48), is amended to read:

30 Section 8.2. Scope of Practice for Certified [Registered]

1 Nurse Practitioners.--(a) A certified [registered] nurse
2 practitioner [while functioning in the expanded role as a
3 professional nurse] shall practice within the scope of practice
4 of the particular clinical specialty area or population focus
5 in which the nurse is [certified] licensed by the board.

6 Notwithstanding any other provision of law, a certified nurse
7 practitioner is entitled to all of the following:

8 (1) To practice as a licensed independent practitioner
9 within the scope of practice of the particular clinical
10 specialty area or population focus in which the nurse is
11 licensed by the board.

12 (2) To be recognized as a primary care provider under
13 managed care and other health care plans.

14 (b) **[A] EXCEPT AS PROVIDED UNDER SECTION 8.9,** A certified <--
15 [registered] nurse practitioner may perform acts of medical
16 diagnosis ~~†in collaboration with a physician and†~~ in accordance <--
17 with regulations promulgated by the board.

18 (c) ~~†Except as provided in subsection (c.1), a†~~~~A~~ certified <--
19 [registered] nurse practitioner may prescribe medical
20 therapeutic or corrective measures if the nurse is acting in
21 accordance with the provisions of section 8.3.

22 (c.1) [Except as limited by subsection (c.2), and in] In
23 addition to existing authority, a certified [registered] nurse
24 practitioner shall have authority to do all of the following,
25 provided that the certified nurse practitioner is acting within
26 the scope of ~~†the certified registered nurse practitioner's~~ <--
27 collaborative or written agreement with a physician, EXCEPT AS <--
28 PROVIDED UNDER SECTION 8.9, and~~†~~ the certified [registered] <--
29 nurse practitioner's [specialty] certification:

30 (1) Order home health and hospice care.

1 (2) Order durable medical equipment.

2 (3) Issue oral orders [to the extent permitted by the health
3 care facilities' by-laws, rules, regulations or administrative
4 policies and guidelines].

5 (4) Make physical therapy and dietitian referrals.

6 (5) Make respiratory, speech and occupational therapy
7 referrals.

8 (6) Perform disability assessments for the program providing
9 Temporary Assistance to Needy Families (TANF).

10 (7) Issue homebound schooling certifications.

11 (8) Perform and sign the initial assessment of methadone
12 treatment evaluations[, provided that any] and order [for]
13 methadone treatment [shall be made only by a physician].

14 (c.2) [Nothing in this section shall be construed to:

15 (1) Supersede the authority of the Department of Health and
16 the Department of Public Welfare to regulate the types of health
17 care professionals who are eligible for medical staff membership
18 or clinical privileges.

19 (2) Restrict the authority of a health care facility to
20 determine the scope of practice and supervision or other
21 oversight requirements for health care professionals practicing
22 within the facility.] Notwithstanding any provision of the act
23 of July 19, 1979 (P.L.130, No.48), known as the Health Care
24 Facilities Act, that may be to the contrary, no regulation or
25 order of the Department of Health, the Department of Human
26 Services or the Insurance Department shall supersede the
27 decision of the governing body of a health care facility that
28 the types of health care professionals who are eligible for
29 medical staff membership or clinical privileges at the facility
30 include certified nurse practitioners when practicing as

1 licensed independent practitioners.

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

6 Section ~~6~~ 8. Sections 8.3 and 8.4 of the act, added December <--
7 9, 2002 (P.L.1567, No.206), are amended to read:

8 Section 8.3. Prescriptive Authority for Certified
9 [Registered] Nurse Practitioners.--(a) A certified [registered]
10 nurse practitioner may prescribe medical therapeutic or
11 corrective measures if the nurse:

12 (1) has successfully completed at least forty-five (45)
13 hours of coursework specific to advanced pharmacology at a level
14 above that required by a professional nursing education program;

15 (2) (I) EXCEPT AS PROVIDED UNDER SUBPARAGRAPH (II), is <--
16 facting in collaboration with a physician as set forth in a <--
17 written agreement which shall, at a minimum, identify the
18 following:

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

21 [(ii)] (B) the categories of drugs from which the nurse may <--
22 prescribe or dispense; and

23 [(iii)] (C) the circumstances and how often the <--
24 collaborating physician will personally see the patient; OR <--

25 (II) IF THE CERTIFIED NURSE PRACTITIONER QUALIFIES FOR THE
26 EXCEPTION FROM THE COLLABORATION REQUIREMENT AS PROVIDED UNDER
27 SECTION 8.9, IS practicing within a clinical specialty area or
28 population focus in which the nurse is certified; and

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

1 (b) A certified [registered] nurse practitioner who
2 satisfies the requirements of subsection (a) may ~~independently~~ <--
3 prescribe and dispense [those categories of drugs that certified
4 registered nurse practitioners were authorized to prescribe and
5 dispense by board regulations in effect on the effective date of
6 this section, subject to the restrictions on certain drug
7 categories imposed by those regulations. The board shall add to
8 or delete from the categories of authorized drugs in accordance
9 with the provisions of section 8.4] proprietary and non-
10 proprietary drugs, subject to any restrictions imposed by board
11 regulations or by Federal law.

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

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

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

21 (3) Two licensed physicians who are actively engaged in
22 clinical practice, appointed to three-year terms by the
23 Secretary of Health, at least one of whom shall, at the time of
24 appointment, be collaborating with one or more certified
25 registered nurse practitioners in accordance with section 8.3(a)
26 (2).

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

30 (b) (1) The board shall submit to the Drug Review Committee

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

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

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

15 Section 7 9. Section 8.7 of the act, added July 20, 2007 <--
16 (P.L.318, No.48), is amended to read:

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

25 (B) A CERTIFIED NURSE PRACTITIONER WHO QUALIFIES FOR THE <--
26 EXCEPTION FROM THE COLLABORATION REQUIREMENT PURSUANT TO SECTION
27 8.9 AND OPERATES WITHOUT COLLABORATION SHALL SATISFY THE
28 LIABILITY COVERAGE REQUIREMENT UNDER SUBSECTION (A) BY
29 MAINTAINING AN INDIVIDUAL POLICY IN THE CERTIFIED NURSE
30 PRACTITIONER'S OWN NAME.

1 Section 8 10. The act is amended by adding a ~~section~~ <--

2 SECTIONS to read: <--

3 Section 8.8. Licensure as a Certified Nurse Practitioner.--

4 (a) A registered nurse who holds current certification by the
5 board, pursuant to section 8.1, as a certified registered nurse
6 practitioner in a particular clinical specialty area on the
7 effective date of this section shall automatically be deemed to
8 be licensed by the board as a certified nurse practitioner,
9 either in that specialty area or in the population focus for
10 which that registered nurse is otherwise qualified. The board
11 shall issue appropriate written notice of such license as a
12 certified nurse practitioner, provided that the issuance of that
13 notice shall not be a condition precedent to practice in
14 accordance with that license.

15 (b) Except as provided in subsection (a), a person shall not
16 qualify for an initial license as a certified nurse practitioner
17 on or after the effective date of this section unless the person
18 meets the following criteria:

19 (1) Holds a current license in this Commonwealth as a
20 registered nurse.

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

23 (3) Holds current certification as a certified nurse
24 practitioner from a board-recognized national certification
25 program which required passing a national certifying examination
26 in the particular clinical specialty area or population focus in
27 which the nurse is seeking licensure by the board.

28 (c) (1) An initial license pursuant to subsection (a) as a
29 certified nurse practitioner shall expire on the same date as
30 the nurse's then current license as a registered nurse is

1 scheduled to expire. Such license as a certified nurse
2 practitioner shall thereafter be renewed biennially on the same
3 date as the nurse's license as a registered nurse.

4 (2) An initial license pursuant to subsection (b) or section
5 7(b) as a certified nurse practitioner shall expire on the same
6 date as the nurse's then current license as a registered nurse
7 is scheduled to expire. Such license as a certified nurse
8 practitioner shall thereafter be renewed biennially on the same
9 date as the nurse's license as a registered nurse.

10 (3) As a condition for biennial renewal by the board of a
11 license as a certified nurse practitioner, the nurse must do all
12 of the following:

13 (i) Maintain a current license in this Commonwealth as a
14 registered nurse.

15 (ii) Maintain current certification through a board-
16 recognized national certification program in the particular
17 clinical specialty area or population focus in which the nurse
18 is licensed as a certified nurse practitioner by the board.

19 (iii) In the two years prior to renewal, complete at least
20 thirty (30) hours of continuing education approved by the board.
21 In the case of a certified nurse practitioner who is prescribing
22 medical therapeutic or corrective measures pursuant to section
23 8.3, that continuing education must include at least sixteen
24 (16) hours in pharmacology in that two-year period.

25 (d) The board shall establish a procedure by which a license
26 as a certified nurse practitioner may be amended prior to the
27 biennial renewal date in order to authorize a nurse to practice
28 in a particular clinical specialty area or population focus in
29 which the nurse was not certified on the effective date of this
30 section or on the date on which the nurse's current license as a

1 certified nurse practitioner was issued or renewed. The board
2 shall authorize a certified nurse practitioner to practice in an
3 additional clinical specialty area or population focus only if
4 the nurse holds current certification from a board-recognized
5 national certification program which required the passing of a
6 national certifying examination in the additional clinical
7 specialty area or population focus.

8 (e) (1) The use of the terms "certified registered nurse
9 practitioner," "registered nurse practitioner," "certified nurse
10 practitioner" and "nurse practitioner" in any other act shall be
11 deemed to include a person licensed as a certified nurse
12 practitioner pursuant to this section or to section 7(b).

13 (2) A registered nurse who is licensed by the board as a
14 certified nurse practitioner in a particular clinical specialty
15 area or population focus is entitled to use the title "advanced
16 practice registered nurse-certified nurse practitioner" and the
17 letters "A.P.R.N.-C.N.P." It shall be unlawful for any other
18 person to use the title "advanced practice registered nurse-
19 certified nurse practitioner" or the letters "A.P.R.N.-C.N.P."

20 (f) (1) A certified nurse practitioner may form a
21 professional corporation with one or more of the following:

22 (i) Other registered nurses.

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

27 (2) This subsection shall be construed to abrogate the
28 requirement that the State Board of Medicine and the State Board
29 of Osteopathic Medicine expressly authorize the combined
30 practice of certified nurse practitioners with doctors of

1 medicine or doctors of osteopathic medicine, respectively, found
2 in section 2903(d)(1)(ii) of Title 15 of the Pennsylvania
3 Consolidated Statutes.

4 SECTION 8.9. ADDITIONAL QUALIFICATIONS.--(A) A CERTIFIED <--
5 NURSE PRACTITIONER WHO HAS ENGAGED IN THE PRACTICE OF
6 PROFESSIONAL NURSING AS A CERTIFIED NURSE PRACTITIONER OR
7 CERTIFIED REGISTERED NURSE PRACTITIONER IN COLLABORATION WITH A
8 PHYSICIAN FOR A PERIOD OF NOT LESS THAN THREE (3) YEARS AND NOT
9 LESS THAN THREE THOUSAND SIX HUNDRED (3,600) HOURS IN ACCORDANCE
10 WITH A COLLABORATIVE OR WRITTEN AGREEMENT WITH A PHYSICIAN AS
11 REQUIRED UNDER SECTIONS 8.2 AND 8.3 SHALL NOT BE SUBJECT TO THE
12 REQUIREMENT THAT THE CERTIFIED NURSE PRACTITIONER ACT IN
13 COLLABORATION WITH A PHYSICIAN OR IN ACCORDANCE WITH A
14 COLLABORATIVE OR WRITTEN AGREEMENT WITH A PHYSICIAN AS REQUIRED
15 UNDER SECTIONS 8.2 AND 8.3.

16 (B) A CERTIFIED NURSE PRACTITIONER WHO QUALIFIES FOR THE
17 EXCEPTION FROM THE COLLABORATION REQUIREMENT AS PROVIDED UNDER
18 THIS SECTION SHALL FILE A FORM WITH THE BOARD ATTESTING TO
19 HAVING ENGAGED IN THE PRACTICE OF PROFESSIONAL NURSING IN
20 COLLABORATION WITH A PHYSICIAN FOR A PERIOD OF NOT LESS THAN
21 THREE (3) YEARS AND NOT LESS THAN THREE THOUSAND SIX HUNDRED
22 (3,600) HOURS PURSUANT TO SUBSECTION (A). SUCH FORM SHALL BE
23 DEVELOPED BY THE BOARD BY REGULATION.

24 (C) A REGISTERED NURSE WHO WAS LICENSED OR CERTIFIED BY
25 ANOTHER STATE, TERRITORY OR POSSESSION OF THE UNITED STATES OR A
26 FOREIGN COUNTRY AND RECEIVED A LICENSE AS A CERTIFIED NURSE
27 PRACTITIONER ISSUED BY THE BOARD OR A TEMPORARY PRACTICE PERMIT
28 TO PRACTICE AS A CERTIFIED NURSE PRACTITIONER UNDER SECTION 4.1
29 MAY QUALIFY FOR THE EXCEPTION FROM THE COLLABORATION REQUIREMENT
30 AS PROVIDED UNDER THIS SECTION IF THE CERTIFIED NURSE

1 PRACTITIONER SATISFACTORILY DEMONSTRATES TO THE BOARD THE
2 COMPLETION OF NO LESS THAN THREE (3) YEARS AND NO LESS THAN
3 THREE THOUSAND SIX HUNDRED (3,600) HOURS OF PRACTICE IN
4 COLLABORATION WITH A PHYSICIAN DEEMED EQUIVALENT TO THE
5 REQUIREMENTS UNDER SUBSECTION (A), WHICH OCCURRED IN
6 PENNSYLVANIA OR IN ONE OR MORE OTHER STATES, TERRITORIES OR
7 POSSESSIONS OF THE UNITED STATES OR FOREIGN COUNTRIES WHERE THE
8 CERTIFIED NURSE PRACTITIONER WAS PREVIOUSLY, OR IS CURRENTLY,
9 LICENSED.

10 Section 9 11. Within 90 days after the effective date of <--
11 this act, the State Board of Nursing, the Department of Health,
12 the Department of Human Services and other affected agencies
13 shall initiate the promulgation of any regulations necessary
14 because of the amendments made by this act to the act of May 22,
15 1951 (P.L.317, No.69), known as the Professional Nursing Law,
16 provided that the promulgation of those regulations shall not be
17 a condition precedent to the applicability of any such
18 amendments.

19 Section ~~10~~ 12. This act shall take effect in 60 days. <--