



2003 SENATE BILL 232

August 20, 2003 – Introduced by Senators COWLES, SCHULTZ, ERPENBACH, ROBSON and RISSER, cosponsored by Representatives UNDERHEIM, KRAWCZYK, OTT, NASS, SERATTI, HAHN, SHERMAN, GROTHMAN, COGGS, STASKUNAS, J. LEHMAN, GUNDERSON and ALBERS. Referred to Committee on Health, Children, Families, Aging and Long Term Care.

1 **AN ACT to amend** 50.09 (1) (a) (intro.), 50.09 (1) (f) 1., 50.09 (1) (h), 50.09 (1) (k),
2 50.49 (1) (b) (intro.), 70.47 (8) (intro.), 146.82 (3) (a), 252.07 (8) (a) 2., 252.07 (9)
3 (c), 252.11 (1m), 252.11 (2), 252.11 (4), 252.11 (5), 252.11 (7), 252.11 (10), 252.12
4 (2) (a) 3. (intro.), 252.15 (2) (a) 7. ak., 252.15 (5) (a) 11., 252.15 (5) (a) 12. b.,
5 252.15 (5) (a) 14., 252.15 (5m) (a), 252.15 (5m) (b), 252.15 (5m) (c), 252.15 (7m)
6 (intro.), 252.15 (7m) (b), 252.16 (3) (c) (intro.), 252.17 (3) (c) (intro.), 252.18,
7 252.23 (5), 252.24 (5), 343.16 (5) (a), 441.06 (title), 448.56 (1), 448.56 (1m) (b),
8 448.67 (2), 450.01 (16) (h), 450.11 (7) (b) and 450.13 (5); and **to create** 50.01 (1)
9 (bm), 252.01 (1c), 441.06 (7), 450.01 (1m) and 450.11 (8) (e) of the statutes;
10 **relating to:** authorizing medically related actions by advanced practice nurse
11 prescribers.

Analysis by the Legislative Reference Bureau

Under current law, the Nursing Board grants certificates to issue prescription orders to advanced practice nurses (advanced practice nurse prescribers) who meet education, training, and examination requirements of the Nursing Board.

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Numerous provisions under current law authorize physicians or other health care professionals to act under specified circumstances and to affect individuals by these authorized actions, including all of the following:

1. Unless medically contraindicated as documented by a nursing home or community-based residential facility resident's physician in the resident's medical record, the resident has the right to private and unrestricted communications with his or her family, physician, attorney, and others; to share a room with his or her spouse if the spouse is also a resident; to participate in activities of social, religious, and community groups; and to be free from chemical and physical restraints.

2. Home health services that are provided to an individual by a home health agency must be those specified under a plan for furnishing the services that is established and periodically reviewed by a physician.

3. For hearings before the local board of review concerning assessments of property taxes, an ill or disabled person who presents to the board a letter from a physician or osteopath confirming the illness or disability may present testimony by telephone.

4. Under laws relating to confidentiality of patient health care records, a physician who treats a patient whose physical or mental condition, in the physician's judgment, affects his or her ability to exercise reasonable and ordinary control over a motor vehicle may, without the patient's informed consent, report the patient's name and other information to the Department of Transportation. Physicians are exempted from civil liability for reporting, or not reporting, this information in good faith.

5. Under laws relating to communicable diseases:

a. The Department of Health and Family Services (DHFS) may order an individual who has a confirmed diagnosis of infectious tuberculosis or symptoms indicative of tuberculosis confined to a facility if several conditions are met, including notifying a court of the confinement and providing to the court a physician's written statement affirming the tuberculosis or symptoms.

b. If a court orders confinement of an individual with infectious tuberculosis or symptoms indicative of tuberculosis, the individual must remain confined until DHFS or a local health officer, with the concurrence of a treating physician, determines that treatment is complete or that the individual is no longer a public health threat.

c. A physician or other health care professional who attends a person infected with a sexually transmitted disease must report the disease to the local health officer and to DHFS; the physician may examine, diagnose, and treat a minor infected with a sexually transmitted disease without obtaining consent of the minor's parents or guardian.

d. If, following a request by an officer of DHFS or a local health officer, a person reasonably suspected of being infected with a sexually transmitted disease refuses or neglects examination by a physician or treatment, the DHFS officer or local health officer may have the person committed to an institution for examination, treatment, or observation.

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e. If a person with a sexually transmitted disease ceases or refuses treatment before reaching what is in a physician's opinion the noncommunicable stage, the physician must notify DHFS and the person may be committed for treatment by DHFS, a local health officer, or a court.

f. If a physician has reported to DHFS a case of sexually transmitted disease, information regarding the disease and its treatment is not privileged before a court.

g. The State Laboratory of Hygiene must examine specimens for the diagnosis of sexually transmitted disease for any physician or local health officer and must report positive results to the local health officer and DHFS.

h. DHFS must promote public awareness of the risk of contracting human immunodeficiency virus (HIV, the virus that causes acquired immunodeficiency syndrome) by developing and distributing information to, among other places, offices of physicians.

i. If certain individuals, including emergency medical technicians, fire fighters, state patrol officers, jailers, emergency care givers, and coroners, receive a significant exposure (sustain a contact that has a potential for transmission of HIV), the person to whom they are significantly exposed may be compelled to be tested for the presence of HIV, and the test results may be provided to the affected individual; one of the conditions that must be met is that a physician determines and certifies in writing that the individual has been significantly exposed.

j. Positive results of a test for the presence of HIV that is administered to a corpse may be provided by the individual's attending physician to persons whom the physician knows have had sexual contact or shared intravenous drug use paraphernalia with the deceased person, to emergency caregivers, and to funeral directors, coroners, and medical examiners who prepare a corpse for burial or perform an autopsy and are significantly exposed, as determined by a physician.

k. If a local health officer or DHFS officer requires it, a person who is employed in the handling of food products or is suspected of having a disease in a form that is communicable by food handling must submit to an examination by the officer or by a physician.

L. Regulations of tattooists and body piercers do not apply to a dentist or physician who tattoos or pierces the bodies of persons in the course of the dentist's or physician's professional practice.

6. Under occupational regulation laws relating to physical therapists, a physical therapist may practice only on the written referral of a physician, chiropractor, dentist, or podiatrist, except under certain conditions, including providing services to an individual for a previously diagnosed medical condition after informing the individual's physician, chiropractor, dentist, or podiatrist.

7. Under occupational regulation laws relating to podiatrists, a podiatrist who renders chargeable services to, among others, a patient or physician, must render a statement of the charge directly to the person served.

8. Under laws relating to the practice of pharmacy, current law does the following:

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a. Defines the term “practice of pharmacy” to include making therapeutic alternate drug selections in accordance with written guidelines or procedures approved by a hospital or by a physician for his or her patients for hospital stay.

b. Prohibits from use as a privileged communication information that is communicated to a physician in an effort unlawfully to procure a prescription drug.

c. Requires the enforcement of these laws that apply to physicians to be the responsibility of the Department of Regulation and Licensing and the Medical Examining Board.

d. Exempts from certain requirements for information that must be provided when dispensing a drug product equivalent the use of drug product equivalents in hospitals in accordance with guidelines approved by, among others, the patient’s physician.

This bill expands current laws that authorize physicians to act under specified circumstances and to affect individuals by these authorized actions, by similarly authorizing advanced practice nurse prescribers.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 50.01 (1) (bm) of the statutes is created to read:

2 50.01 (1) (bm) “Advanced practice nurse prescriber” means an advanced
3 practice nurse who is certified under s. 441.16 (2) to issue prescription orders.

4 **SECTION 2.** 50.09 (1) (a) (intro.) of the statutes is amended to read:

5 50.09 (1) (a) (intro.) Private and unrestricted communications with the
6 resident’s family, physician, advanced practice nurse prescriber, attorney, and any
7 other person, unless medically contraindicated as documented by the resident’s
8 physician or by the resident’s advanced practice nurse prescriber in the resident’s
9 medical record, except that communications with public officials or with the
10 resident’s attorney shall not be restricted in any event. The right to private and
11 unrestricted communications shall include, but is not limited to, the right to:

12 **SECTION 3.** 50.09 (1) (f) 1. of the statutes is amended to read:

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1 50.09 (1) (f) 1. Privacy for visits by spouse. If both spouses are residents of the
2 same facility, they shall be permitted to share a room unless medically
3 contraindicated as documented by the resident's physician or by the resident's
4 advanced practice nurse prescriber in the resident's medical record.

5 **SECTION 4.** 50.09 (1) (h) of the statutes is amended to read:

6 50.09 (1) (h) Meet with, and participate in activities of social, religious, and
7 community groups at the resident's discretion, unless medically contraindicated as
8 documented by the resident's physician or by the resident's advanced practice nurse
9 prescriber in the resident's medical record.

10 **SECTION 5.** 50.09 (1) (k) of the statutes is amended to read:

11 50.09 (1) (k) Be free from mental and physical abuse, and be free from chemical
12 and physical restraints except as authorized in writing by a physician or by an
13 advanced practice nurse prescriber for a specified and limited period of time and
14 documented in the resident's medical record. Physical restraints may be used in an
15 emergency when necessary to protect the resident from injury to himself or herself
16 or others or to property. However, authorization for continuing use of the physical
17 restraints shall be secured from a physician or from an advanced practice nurse
18 prescriber within 12 hours. Any use of physical restraints shall be noted in the
19 resident's medical records. "Physical restraints" includes, but is not limited to, any
20 article, device, or garment ~~which~~ that interferes with the free movement of the
21 resident and ~~which~~ that the resident is unable to remove easily, and confinement in
22 a locked room.

23 **SECTION 6.** 50.49 (1) (b) (intro.) of the statutes is amended to read:

24 50.49 (1) (b) (intro.) "Home health services" means the following items and
25 services that are furnished to an individual, who is under the care of a physician, of

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1 an advanced practice nurse prescriber, by a home health agency, or by others under
2 arrangements made by the home health agency, that are under a plan for furnishing
3 those items and services to the individual that is established and periodically
4 reviewed by a physician or by an advanced practice nurse prescriber and that are,
5 except as provided in subd. 6., provided on a visiting basis in a place of residence used
6 as the individual's home:

7 **SECTION 7.** 70.47 (8) (intro.) of the statutes is amended to read:

8 70.47 (8) HEARING. (intro.) The board shall hear upon oath all persons who
9 appear before it in relation to the assessment. The board shall hear upon oath, by
10 telephone, all ill or disabled persons who present to the board a letter from a
11 physician, ~~surgeon or osteopath~~, or advanced practice nurse prescriber certified
12 under s. 441.16 (2) that confirms their illness or disability. The board at such hearing
13 shall proceed as follows:

14 **SECTION 8.** 146.82 (3) (a) of the statutes is amended to read:

15 146.82 (3) (a) Notwithstanding sub. (1), a physician or an advanced practice
16 nurse prescriber certified under s. 441.16 (2) who treats a patient whose physical or
17 mental condition in the physician's or advanced practice nurse prescriber's judgment
18 affects the patient's ability to exercise reasonable and ordinary control over a motor
19 vehicle may report the patient's name and other information relevant to the
20 condition to the department of transportation without the informed consent of the
21 patient.

22 **SECTION 9.** 252.01 (1c) of the statutes is created to read:

23 252.01 (1c) "Advanced practice nurse prescriber" means an advanced practice
24 nurse who is certified under s. 441.16 (2) to issue prescription orders.

25 **SECTION 10.** 252.07 (8) (a) 2. of the statutes is amended to read:

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1 252.07 (8) (a) 2. The department or local health officer provides to the court a
2 written statement from a physician or an advanced practice nurse prescriber that the
3 individual has infectious tuberculosis or suspect tuberculosis.

4 **SECTION 11.** 252.07 (9) (c) of the statutes is amended to read:

5 252.07 (9) (c) If the court orders confinement of an individual under this
6 subsection, the individual shall remain confined until the department or local health
7 officer, with the concurrence of a treating physician or an advanced practice nurse
8 prescriber, determines that treatment is complete or that the individual is no longer
9 a substantial threat to himself or herself or to the public health. If the individual is
10 to be confined for more than 6 months, the court shall review the confinement every
11 6 months.

12 **SECTION 12.** 252.11 (1m) of the statutes is amended to read:

13 252.11 (1m) A physician, an advanced practice nurse prescriber, or ~~other~~
14 another health care professional called to attend a person infected with any form of
15 sexually transmitted disease, as specified in rules promulgated by the department,
16 shall report the disease to the local health officer and to the department in the
17 manner directed by the department in writing on forms furnished by the
18 department. A physician or advanced practice nurse prescriber may treat a minor
19 infected with a sexually transmitted disease or examine and diagnose a minor for the
20 presence of such a disease without obtaining the consent of the minor's parents or
21 guardian. The physician or advanced practice nurse prescriber shall incur no civil
22 liability solely by reason of the lack of consent of the minor's parents or guardian.

23 **SECTION 13.** 252.11 (2) of the statutes is amended to read:

24 252.11 (2) An officer of the department or a local health officer having
25 knowledge of any reported or reasonably suspected case or contact of a sexually

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1 transmitted disease for which no appropriate treatment is being administered, or of
2 an actual contact of a reported case or potential contact of a reasonably suspected
3 case, shall investigate or cause the case or contact to be investigated as necessary.
4 If, following a request of an officer of the department or a local health officer, a person
5 reasonably suspected of being infected with a sexually transmitted disease refuses
6 or neglects examination by a physician or by an advanced practice nurse prescriber
7 or treatment, an officer of the department or a local health officer may proceed to
8 have the person committed under sub. (5) to an institution or system of care for
9 examination, treatment or observation.

10 **SECTION 14.** 252.11 (4) of the statutes is amended to read:

11 252.11 (4) If a person infected with a sexually transmitted disease ceases or
12 refuses treatment before reaching what in the a physician's or an advanced practice
13 nurse prescriber's opinion is the noncommunicable stage, the physician or advanced
14 practice nurse prescriber shall notify the department. The department shall without
15 delay take the necessary steps to have the person committed for treatment or
16 observation under sub. (5), or shall notify the local health officer to take these steps.

17 **SECTION 15.** 252.11 (5) of the statutes is amended to read:

18 252.11 (5) Any court of record may commit a person infected with a sexually
19 transmitted disease to any institution or may require the person to undergo a system
20 of care for examination, treatment, or observation if the person ceases or refuses
21 examination, treatment, or observation under the supervision of a physician or an
22 advanced practice nurse prescriber. The court shall summon the person to appear
23 on a date at least 48 hours, but not more than 96 hours, after service if an officer of
24 the department or a local health officer petitions the court and states the facts
25 authorizing commitment. If the person fails to appear or fails to accept commitment

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1 without reasonable cause, the court may cite the person for contempt. The court may
2 issue a warrant and may direct the sheriff, any constable, or any police officer of the
3 county immediately to arrest the person and bring the person to court if the court
4 finds that a summons will be ineffectual. The court shall hear the matter of
5 commitment summarily. Commitment under this subsection continues until the
6 disease is no longer communicable or until other provisions are made for treatment
7 that satisfy the department. The certificate of the petitioning officer is prima facie
8 evidence that the disease is no longer communicable or that satisfactory provisions
9 for treatment have been made.

10 **SECTION 16.** 252.11 (7) of the statutes is amended to read:

11 252.11 (7) Reports, examinations and inspections and all records concerning
12 sexually transmitted diseases are confidential and not open to public inspection, and
13 shall not be divulged except as may be necessary for the preservation of the public
14 health, in the course of commitment proceedings under sub. (5), or as provided under
15 s. 938.296 (4) or (5) or 968.38 (4) or (5). If a physician or an advanced practice nurse
16 prescriber has reported a case of sexually transmitted disease to the department
17 under sub. (4), information regarding the presence of the disease and treatment is
18 not privileged when the patient or, physician, or advanced practice nurse prescriber
19 is called upon to testify to the facts before any court of record.

20 **SECTION 17.** 252.11 (10) of the statutes is amended to read:

21 252.11 (10) The state laboratory of hygiene shall examine specimens for the
22 diagnosis of sexually transmitted diseases for any physician, advanced practice
23 nurse prescriber, or local health officer in the state, and shall report the positive
24 results of the examinations to the local health officer and to the department. All
25 laboratories performing tests for sexually transmitted diseases shall report all

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1 positive results to the local health officer and to the department, with the name of
2 the physician or advanced practice nurse prescriber to whom reported.

3 **SECTION 18.** 252.12 (2) (a) 3. (intro.) of the statutes is amended to read:

4 252.12 (2) (a) 3. 'Statewide public education campaign.' (intro.) The
5 department shall promote public awareness of the risk of contracting HIV and
6 related infections and measures for HIV and related infections protection by
7 development and distribution of information through clinics providing family
8 planning services, as defined in s. 253.07 (1) (b), offices of physicians and advanced
9 practice nurse prescribers and clinics for sexually transmitted diseases and by
10 newsletters, public presentations or other releases of information to newspapers,
11 periodicals, radio and television stations and other public information resources.
12 The information shall be targeted at individuals whose behavior puts them at risk
13 of contracting HIV and related infections and shall encompass the following topics:

14 **SECTION 19.** 252.15 (2) (a) 7. ak. of the statutes is amended to read:

15 252.15 (2) (a) 7. ak. A physician or an advanced practice nurse prescriber, based
16 on information provided to the physician or advanced practice nurse prescriber,
17 determines and certifies in writing that the affected person has been significantly
18 exposed. The certification shall accompany the request for testing and disclosure.
19 If the affected person who is significantly exposed is a physician or an advanced
20 practice nurse prescriber, he or she may not make this determination or certification.
21 The information that is provided to a physician or an advanced practice nurse
22 prescriber to document the occurrence of a significant exposure and the physician's
23 or advanced practice nurse prescriber's certification that an affected person has been
24 significantly exposed, under this subd. 7. ak., shall be provided on a report form that
25 is developed by the department of commerce under s. 101.02 (19) (a) or on a report

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1 form that the department of commerce determines, under s. 101.02 (19) (b), is
2 substantially equivalent to the report form that is developed under s. 101.02 (19) (a).

3 **SECTION 20.** 252.15 (5) (a) 11. of the statutes is amended to read:

4 252.15 (5) (a) 11. To a person, including a person exempted from civil liability
5 under the conditions specified under s. 895.48, who renders to the victim of an
6 emergency or accident emergency care during the course of which the emergency
7 caregiver is significantly exposed to the emergency or accident victim, if a physician
8 or an advanced practice nurse prescriber, based on information provided to the
9 physician or advanced practice nurse prescriber, determines and certifies in writing
10 that the emergency caregiver has been significantly exposed and if the certification
11 accompanies the request for disclosure.

12 **SECTION 21.** 252.15 (5) (a) 12. b. of the statutes is amended to read:

13 252.15 (5) (a) 12. b. The coroner, medical examiner, or appointed assistant is
14 significantly exposed to a person whose death is under direct investigation by the
15 coroner, medical examiner, or appointed assistant, if a physician or an advanced
16 practice nurse prescriber, based on information provided to the physician or
17 advanced practice nurse prescriber, determines and certifies in writing that the
18 coroner, medical examiner, or appointed assistant has been significantly exposed
19 and if the certification accompanies the request for disclosure.

20 **SECTION 22.** 252.15 (5) (a) 14. of the statutes is amended to read:

21 252.15 (5) (a) 14. If the test results of a test administered to an individual are
22 positive and the individual is deceased, by the individual's attending physician or
23 advanced practice nurse prescriber, to persons, if known to the physician or advanced
24 practice nurse prescriber, with whom the individual has had sexual contact or has
25 shared intravenous drug use paraphernalia.

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1 **SECTION 23.** 252.15 (5m) (a) of the statutes is amended to read:

2 252.15 **(5m)** (a) If a person, including a person exempted from civil liability
3 under the conditions specified under s. 895.48, who renders to the victim of an
4 emergency or accident emergency care during the course of which the emergency
5 caregiver is significantly exposed to the emergency or accident victim and the
6 emergency or accident victim subsequently dies prior to testing for the presence of
7 HIV, antigen or nonantigenic products of HIV or an antibody to HIV, ~~and~~; if a
8 physician or an advanced practice nurse prescriber, based on information provided
9 to the physician or advanced practice nurse prescriber, determines and certifies in
10 writing that the emergency caregiver has been significantly exposed; and if the
11 certification accompanies the request for testing and disclosure. Testing of a corpse
12 under this paragraph shall be ordered by the coroner, medical examiner, or physician
13 who certifies the victim's cause of death under s. 69.18 (2) (b), (c) or (d).

14 **SECTION 24.** 252.15 (5m) (b) of the statutes is amended to read:

15 252.15 **(5m)** (b) If a funeral director, coroner, medical examiner, or appointed
16 assistant to a coroner or medical examiner who prepares the corpse of a decedent for
17 burial or other disposition or a person who performs an autopsy or assists in
18 performing an autopsy is significantly exposed to the corpse, and if a physician or an
19 advanced practice nurse prescriber, based on information provided to the physician
20 or advanced practice nurse prescriber, determines and certifies in writing that the
21 funeral director, coroner, medical examiner, or appointed assistant has been
22 significantly exposed and if the certification accompanies the request for testing and
23 disclosure. Testing of a corpse under this paragraph shall be ordered by the
24 attending physician or the attending advanced practice nurse prescriber of the
25 funeral director, coroner, medical examiner, or appointed assistant who is so exposed.

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1 **SECTION 25.** 252.15 (5m) (c) of the statutes is amended to read:

2 252.15 **(5m)** (c) If a health care provider or an agent or employee of a health
3 care provider is significantly exposed to the corpse or to a patient who dies
4 subsequent to the exposure and prior to testing for the presence of HIV, antigen or
5 nonantigenic products of HIV or an antibody to HIV, and if a physician or an
6 advanced practice nurse prescriber who is not the health care provider, based on
7 information provided to the physician or advanced practice nurse prescriber,
8 determines and certifies in writing that the health care provider, agent or employee
9 has been significantly exposed and if the certification accompanies the request for
10 testing and disclosure. Testing of a corpse under this paragraph shall be ordered by
11 the physician or advanced practice nurse prescriber who certifies that the significant
12 exposure has occurred.

13 **SECTION 26.** 252.15 (7m) (intro.) of the statutes is amended to read:

14 252.15 **(7m)** REPORTING OF PERSONS SIGNIFICANTLY EXPOSED. (intro.) If a positive,
15 validated test result is obtained from a test subject, the test subject's physician or
16 advanced practice nurse prescriber who maintains a record of the test result under
17 sub. (4) (c) may report to the state epidemiologist the name of any person known to
18 the physician or advanced practice nurse prescriber to have been significantly
19 exposed to the test subject, only after the physician or advanced practice nurse
20 prescriber has done all of the following:

21 **SECTION 27.** 252.15 (7m) (b) of the statutes is amended to read:

22 252.15 **(7m)** (b) Notified the test subject that the name of any person known
23 to the physician or advanced practice nurse prescriber to have been significantly
24 exposed to the test subject will be reported to the state epidemiologist.

25 **SECTION 28.** 252.16 (3) (c) (intro.) of the statutes is amended to read:

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1 252.16 (3) (c) (intro.) Has submitted to the department a certification from a
2 physician, as defined in s. 448.01 (5), or from an advanced practice nurse prescriber
3 of all of the following:

4 **SECTION 29.** 252.17 (3) (c) (intro.) of the statutes is amended to read:

5 252.17 (3) (c) (intro.) Has submitted to the department a certification from a
6 physician, as defined in s. 448.01 (5), or from an advanced practice nurse prescriber
7 of all of the following:

8 **SECTION 30.** 252.18 of the statutes is amended to read:

9 **252.18 Handling foods.** No person in charge of any public eating place or
10 other establishment where food products to be consumed by others are handled may
11 knowingly employ any person handling food products who has a disease in a form
12 that is communicable by food handling. If required by the local health officer or any
13 officer of the department for the purposes of an investigation, any person who is
14 employed in the handling of foods or is suspected of having a disease in a form that
15 is communicable by food handling shall submit to an examination by the officer or
16 by a physician or advanced practice nurse prescriber designated by the officer. The
17 expense of the examination, if any, shall be paid by the person examined. Any person
18 knowingly infected with a disease in a form that is communicable by food handling
19 who handles food products to be consumed by others and any persons knowingly
20 employing or permitting such a person to handle food products to be consumed by
21 others shall be punished as provided by s. 252.25.

22 **SECTION 31.** 252.23 (5) of the statutes is amended to read:

23 252.23 (5) EXCEPTION. This section does not apply to a dentist who is licensed
24 under s. 447.03 (1) ~~or~~, to a physician, or to an advanced practice nurse prescriber who

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1 tattoos or offers to tattoo a person in the course of the ~~dentist's or physician's~~
2 professional practice of the dentist, physician, or advanced practice nurse prescriber.

3 **SECTION 32.** 252.24 (5) of the statutes is amended to read:

4 252.24 (5) EXCEPTION. This section does not apply to a dentist who is licensed
5 under s. 447.03 (1) ~~or~~ to a physician, or to an advanced practice nurse prescriber who
6 pierces the body of or offers to pierce the body of a person in the course of the ~~dentist's~~
7 ~~or physician's~~ professional practice of the dentist, physician, or advanced practice
8 nurse prescriber.

9 **SECTION 33.** 343.16 (5) (a) of the statutes is amended to read:

10 343.16 (5) (a) The secretary may require any applicant for a license or any
11 licensed operator to submit to a special examination by such persons or agencies as
12 the secretary may direct to determine incompetency, physical or mental disability,
13 disease or any other condition which might prevent such applicant or licensed person
14 from exercising reasonable and ordinary control over a motor vehicle. When the
15 department requires the applicant to submit to an examination, the applicant shall
16 pay the cost thereof. If the department receives an application for a renewal or
17 duplicate license after voluntary surrender under s. 343.265 or receives a report from
18 a physician, advanced practice nurse prescriber certified under s. 441.16 (2), or
19 optometrist under s. 146.82 (3), or if the department has a report of 2 or more arrests
20 within a one-year period for any combination of violations of s. 346.63 (1) or (5) or
21 a local ordinance in conformity therewith or a law of a federally recognized American
22 Indian tribe or band in this state in conformity with s. 346.63 (1) or (5), or s. 346.63
23 (1m), 1985 stats., or s. 346.63 (2) or (6) or 940.25, or s. 940.09 where the offense
24 involved the use of a vehicle, the department shall determine, by interview or
25 otherwise, whether the operator should submit to an examination under this section.

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1 The examination may consist of an assessment. If the examination indicates that
2 education or treatment for a disability, disease or condition concerning the use of
3 alcohol, a controlled substance or a controlled substance analog is appropriate, the
4 department may order a driver safety plan in accordance with s. 343.30 (1q). If there
5 is noncompliance with assessment or the driver safety plan, the department shall
6 revoke the person's operating privilege in the manner specified in s. 343.30 (1q) (d).

7 **SECTION 34.** 441.06 (title) of the statutes is amended to read:

8 **441.06 (title) Licensure; civil liability exemption exemptions.**

9 **SECTION 35.** 441.06 (7) of the statutes is created to read:

10 441.06 (7) No person certified as an advanced practice nurse prescriber under
11 s. 441.16 (2) is liable for civil damages for any of the following:

12 (a) Reporting in good faith to the department of transportation under s. 146.82
13 (3) a patient's name and other information relevant to a physical or mental condition
14 of the patient that in the advanced practice nurse prescriber's judgment impairs the
15 patient's ability to exercise reasonable and ordinary control over a motor vehicle.

16 (b) In good faith, not reporting to the department of transportation under s.
17 146.82 (3) a patient's name and other information relevant to a physical or mental
18 condition of the patient that in the advanced practice nurse prescriber's judgment
19 does not impair the patient's ability to exercise reasonable and ordinary control over
20 a motor vehicle.

21 **SECTION 36.** 448.56 (1) of the statutes is amended to read:

22 448.56 (1) WRITTEN REFERRAL. Except as provided in this subsection and s.
23 448.52, a person may practice physical therapy only upon the written referral of a
24 physician, chiropractor, dentist or, podiatrist, or advanced practice nurse prescriber
25 certified under s. 441.16 (2). Written referral is not required if a physical therapist

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1 provides services in schools to children with disabilities, as defined in s. 115.76 (5),
2 pursuant to rules promulgated by the department of public instruction; provides
3 services as part of a home health care agency; provides services to a patient in a
4 nursing home pursuant to the patient's plan of care; provides services related to
5 athletic activities, conditioning or injury prevention; or provides services to an
6 individual for a previously diagnosed medical condition after informing the
7 individual's physician, chiropractor, dentist ~~or~~, podiatrist, or advanced practice
8 nurse prescriber certified under s. 441.16 (2) who made the diagnosis. The affiliated
9 credentialing board may promulgate rules establishing additional services that are
10 excepted from the written referral requirements of this subsection.

11 **SECTION 37.** 448.56 (1m) (b) of the statutes, as created by 2001 Wisconsin Act
12 70, is amended to read:

13 448.56 **(1m)** (b) The affiliated credentialing board shall promulgate rules
14 establishing the requirements that a physical therapist must satisfy if a physician,
15 chiropractor, dentist, ~~or~~ podiatrist, or advanced practice nurse prescriber makes a
16 written referral under sub. (1). The purpose of the rules shall be to ensure continuity
17 of care between the physical therapist and the health care practitioner.

18 **SECTION 38.** 448.67 (2) of the statutes is amended to read:

19 448.67 **(2)** SEPARATE BILLING REQUIRED. Except as provided in sub. (4), a licensee
20 who renders any podiatric service or assistance whatever, or gives any podiatric
21 advice or any similar advice or assistance whatever, to any patient, podiatrist,
22 physician, advanced practice nurse prescriber certified under s. 441.16 (2),
23 partnership or corporation, or to any other institution or organization of any kind,
24 including a hospital, for which a charge is made to a patient, shall, except as
25 authorized by Title 18 or Title 19 of the federal Social Security Act, render an

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1 individual statement or account of the charge directly to the patient, distinct and
2 separate from any statement or account by any other podiatrist, physician, advanced
3 practice nurse prescriber, or other person.

4 **SECTION 39.** 450.01 (1m) of the statutes is created to read:

5 450.01 (1m) “Advanced practice nurse prescriber” means an advanced practice
6 nurse who is certified under s. 441.16 (2) to issue prescription orders.

7 **SECTION 40.** 450.01 (16) (h) of the statutes is amended to read:

8 450.01 (16) (h) Making therapeutic alternate drug selections in accordance
9 with written guidelines or procedures previously established by a pharmacy and
10 therapeutics committee of a hospital and approved by the hospital’s medical staff and
11 by an individual physician or advanced practice nurse prescriber for his or her
12 patients for the period of each patient’s stay within the hospital.

13 **SECTION 41.** 450.11 (7) (b) of the statutes is amended to read:

14 450.11 (7) (b) Information communicated to a physician or an advanced
15 practice nurse prescriber in an effort to procure unlawfully a prescription drug or the
16 administration of a prescription drug is not a privileged communication.

17 **SECTION 42.** 450.11 (8) (e) of the statutes is created to read:

18 450.11 (8) (e) The board of nursing, insofar as this section applies to advanced
19 practice nurse prescribers.

20 **SECTION 43.** 450.13 (5) of the statutes is amended to read:

21 450.13 (5) USE OF DRUG PRODUCT EQUIVALENT IN HOSPITALS. Subsections (1) to (4)
22 do not apply to a pharmacist who dispenses a drug product equivalent that is
23 prescribed for a patient in a hospital if the pharmacist dispenses the drug product
24 equivalent in accordance with written guidelines or procedures previously
25 established by a pharmacy and therapeutics committee of the hospital and approved

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1 by the hospital's medical staff and by the patient's individual physician or advanced
2 practice nurse prescriber for the period of the patient's stay within the hospital.

3 **SECTION 44. Effective dates.** This act takes effect on the day after publication,
4 except as follows:

5 (1) The treatment of section 448.56 (1m) (b) of the statutes takes effect on April
6 1, 2004.

7 (END)