



State of Wisconsin
2019 - 2020 LEGISLATURE

LRB-0429/P2
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In 1-8-19
out 1-10-19 if poss

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

1 **AN ACT** *to repeal* 50.01 (1b), 77.54 (14) (f) 3., 118.2925 (1) (b), 146.89 (1) (r) 3.,
2 252.01 (1c), 440.03 (13) (b) 42., 440.08 (2) (a) 50., 441.11 (title), 441.11 (1), 441.11
3 (3), 441.15, 441.16, 448.035 (1) (a) and 450.01 (1m); **to renumber and amend**
4 253.13 (1), 255.06 (1) (d), 441.06 (7) and 441.11 (2); **to amend** 14.87 (title),
5 29.193 (1m) (a) 2. (intro.), 29.193 (2) (b) 2., 29.193 (2) (c) 3., 29.193 (2) (cd) 2. b.,
6 29.193 (2) (cd) 2. c., 29.193 (2) (e), 29.193 (3) (a), 45.40 (1g) (a), 46.03 (44), 50.08
7 (2), 50.09 (1) (a) (intro.), 50.09 (1) (f) 1., 50.09 (1) (h), 50.09 (1) (k), 50.49 (1) (b)
8 (intro.), 51.41 (1d) (b) 4., 70.47 (8) (intro.), 77.54 (14) (f) 4., 97.59, 102.13 (1) (a),
9 102.13 (1) (b) (intro.), 1., 3. and 4., 102.13 (1) (d) 1., 2., 3. and 4., 102.13 (2) (a),
10 102.13 (2) (b), 102.17 (1) (d) 1. and 2., 102.29 (3), 102.42 (2) (a), 106.30 (1), 118.15
11 (3) (a), 118.25 (1) (a), 118.29 (1) (e), 118.2925 (3), 118.2925 (4) (c), 118.2925 (5),
12 146.343 (1) (c), 146.82 (3) (a), 146.89 (1) (r) 1., 146.89 (1) (r) 8., 146.89 (6), 252.07
13 (8) (a) 2., 252.07 (9) (c), 252.10 (7), 252.11 (2), (4), (5), (7) and (10), 252.15 (3m)
14 (d) 11. b. and 13., (5g) (c), (5m) (d) 2. and (e) 2. and 3. and (7m) (intro.) and (b),
15 252.16 (3) (c) (intro.), 252.17 (3) (c) (intro.), 253.07 (4) (d), 253.115 (4), 253.115

1 (7) (a) (intro.), 253.15 (2), 255.06 (2) (d), 255.07 (1) (d), 257.01 (5) (a) and (b),
2 341.14 (1a), (1e) (a), (1m) and (1q), 343.16 (5) (a), 343.51 (1), 343.62 (4) (a) 4.,
3 440.03 (13) (b) 3., 440.08 (2) (a) 4m., 440.981 (1), 440.982 (1), 440.987 (2), 441.01
4 (3), 441.01 (4), 441.01 (7) (a) (intro.), 441.01 (7) (b), 441.06 (3), 441.06 (4), 441.07
5 (1g) (intro.), (a), (c) and (e), 441.10 (7), 441.18 (2) (a) (intro.), 441.18 (2) (b),
6 441.18 (3), 441.19 (2), subchapter II (title) of chapter 441 [precedes 441.51],
7 441.51 (title), 448.03 (2) (a), 448.035 (2), (3) and (4), 448.56 (1) and (1m) (b),
8 448.62 (2m), 448.67 (2), 448.956 (1m), 450.01 (16) (h) 2., 450.01 (16) (hr) 2.,
9 450.03 (1) (e), 450.11 (1i) (a) 1., 450.11 (1i) (b) 2. b., 450.11 (7) (b), 450.11 (8) (e),
10 450.13 (5) (b), 450.135 (7) (b), 462.04, 655.001 (7t), 655.001 (9), 655.005 (2) (a),
11 961.01 (19) (a) and 961.395; **to repeal and recreate** 441.06 (title); and **to**
12 **create** 253.115 (1) (f), 253.13 (1) (a), 253.15 (1) (em), 255.06 (1) (f) 2., 440.03 (13)
13 (b) 39m., 440.08 (2) (a) 47., 441.001 (1c), 441.001 (1m), 441.001 (5), 441.01 (7)
14 (c) and 441.09 of the statutes; **relating to:** advanced practice registered nurses,
15 extending the time limit for emergency rule procedures, providing an
16 exemption from emergency rule procedures, and granting rule-making
17 authority.

Analysis by the Legislative Reference Bureau *Insert Analysis*

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

For further information see the **state** 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:

18 **SECTION 1.** 14.87 (title) of the statutes is amended to read:

1 **14.87 (title) ~~Enhanced nurse~~ Nurse licensure compact.**

2 **SECTION 2.** 29.193 (1m) (a) 2. (intro.) of the statutes is amended to read:

3 29.193 (**1m**) (a) 2. (intro.) Has a permanent substantial loss of function in one
4 or both arms or one or both hands and fails to meet the minimum standards of any
5 one of the following standard tests, administered under the direction of a licensed
6 physician, a licensed physician assistant, a licensed chiropractor, or a ~~certified~~
7 licensed advanced practice ~~registered~~ nurse prescriber:

8 **SECTION 3.** 29.193 (2) (b) 2. of the statutes is amended to read:

9 29.193 (**2**) (b) 2. An applicant shall submit an application on a form prepared
10 and furnished by the department, which shall include a written statement or report
11 prepared and signed by a licensed physician, a licensed physician assistant, a
12 licensed chiropractor, a licensed podiatrist, or a ~~certified~~ licensed advanced practice
13 registered nurse ~~prescriber~~ prepared no more than 6 months preceding the
14 application and verifying that the applicant is physically disabled.

15 **SECTION 4.** 29.193 (2) (c) 3. of the statutes is amended to read:

16 29.193 (**2**) (c) 3. The department may issue a Class B permit to an applicant
17 who is ineligible for a permit under subd. 1., 2. or 2m. or who is denied a permit under
18 subd. 1., 2. or 2m. if, upon review and after considering the physical condition of the
19 applicant and the recommendation of a licensed physician, a licensed physician
20 assistant, a licensed chiropractor, a licensed podiatrist, or a ~~certified~~ licensed
21 advanced practice ~~registered~~ nurse prescriber selected by the applicant from a list
22 of licensed physicians, licensed physician assistants, licensed chiropractors, licensed
23 podiatrists, and ~~certified~~ licensed advanced practice nurse prescribers ~~registered~~
24 nurses compiled by the department, the department finds that issuance of a permit
25 complies with the intent of this subsection. The use of this review procedure is

1 discretionary with the department and all costs of the review procedure shall be paid
2 by the applicant.

3 **SECTION 5.** 29.193 (2) (cd) 2. b. of the statutes is amended to read:

4 29.193 (2) (cd) 2. b. The person has a permanent substantial loss of function
5 in one or both arms and fails to meet the minimum standards of the standard upper
6 extremity pinch test, the standard grip test, or the standard nine-hole peg test,
7 administered under the direction of a licensed physician, a licensed physician
8 assistant, a licensed chiropractor, or a ~~certified~~ licensed advanced practice registered
9 nurse ~~prescriber~~.

10 **SECTION 6.** 29.193 (2) (cd) 2. c. of the statutes is amended to read:

11 29.193 (2) (cd) 2. c. The person has a permanent substantial loss of function in
12 one or both shoulders and fails to meet the minimum standards of the standard
13 shoulder strength test, administered under the direction of a licensed physician, a
14 licensed physician assistant, a licensed chiropractor, or a ~~certified~~ licensed advanced
15 practice registered nurse ~~prescriber~~.

16 **SECTION 7.** 29.193 (2) (e) of the statutes is amended to read:

17 29.193 (2) (e) *Review of decisions.* An applicant denied a permit under this
18 subsection, except a permit under par. (c) 3., may obtain a review of that decision by
19 a licensed physician, a licensed physician assistant, a licensed chiropractor, a
20 licensed podiatrist, or a ~~certified~~ licensed advanced practice registered nurse
21 ~~prescriber~~ designated by the department and with an office located in the
22 department district in which the applicant resides. The department shall pay for the
23 cost of a review under this paragraph unless the denied application on its face fails
24 to meet the standards set forth in par. (c) 1. or 2. A review under this paragraph is

1 the only method of review of a decision to deny a permit under this subsection and
2 is not subject to further review under ch. 227.

3 **SECTION 8.** 29.193 (3) (a) of the statutes is amended to read:

4 29.193 (3) (a) Produces a certificate from a licensed physician, a licensed
5 physician assistant, a licensed optometrist, or a ~~certified~~ licensed advanced practice
6 registered nurse ~~prescriber~~ stating that his or her sight is impaired to the degree that
7 he or she cannot read ordinary newspaper print with or without corrective glasses.

8 **SECTION 9.** 45.40 (1g) (a) of the statutes is amended to read:

9 45.40 (1g) (a) "Health care provider" means an advanced practice registered
10 nurse ~~prescriber~~ certified who holds a permit to issue prescription orders under s.
11 ~~441.16~~ 441.09 (2), an audiologist licensed under ch. 459, a dentist licensed under ch.
12 447, an optometrist licensed under ch. 449, a physician licensed under s. 448.02, or
13 a podiatrist licensed under s. 448.63.

14 **SECTION 10.** 46.03 (44) of the statutes is amended to read:

15 46.03 (44) **SEXUALLY TRANSMITTED DISEASE TREATMENT INFORMATION.** Prepare and
16 keep current an information sheet to be distributed to a patient by a physician, a
17 physician assistant, or ~~certified~~ an advanced practice registered nurse ~~prescriber~~
18 who holds a permit to issue prescription orders under s. 441.09 (2) providing
19 expedited partner therapy to that patient under s. 448.035. The information sheet
20 shall include information about sexually transmitted diseases and their treatment
21 and about the risk of drug allergies. The information sheet shall also include a
22 statement advising a person with questions about the information to contact his or
23 her physician, pharmacist, or local health department, as defined in s. 250.01 (4).

24 **SECTION 11.** 50.01 (1b) of the statutes is repealed.

25 **SECTION 12.** 50.08 (2) of the statutes is amended to read:

1 50.08 (2) A physician, an advanced practice registered nurse ~~prescriber~~
2 ~~certified who holds a permit to issue prescription orders~~ under s. 441.16 441.09 (2),
3 or a physician assistant licensed under ch. 448, who prescribes a psychotropic
4 medication to a nursing home resident who has degenerative brain disorder shall
5 notify the nursing home if the prescribed medication has a boxed warning under 21
6 CFR 201.57.

7 **SECTION 13.** 50.09 (1) (a) (intro.) of the statutes is amended to read:

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

16 **SECTION 14.** 50.09 (1) (f) 1. of the statutes is amended to read:

17 50.09 (1) (f) 1. Privacy for visits by spouse or domestic partner. If both spouses
18 or both domestic partners under ch. 770 are residents of the same facility, the spouses
19 or domestic partners shall be permitted to share a room unless medically
20 contraindicated as documented by the resident's physician, physician assistant, or
21 advanced practice registered nurse ~~prescriber~~ in the resident's medical record.

22 **SECTION 15.** 50.09 (1) (h) of the statutes is amended to read:

23 50.09 (1) (h) Meet with, and participate in activities of social, religious, and
24 community groups at the resident's discretion, unless medically contraindicated as

1 documented by the resident's physician, physician assistant, or advanced practice
2 registered nurse ~~prescriber~~ in the resident's medical record.

3 **SECTION 16.** 50.09 (1) (k) of the statutes is amended to read:

4 50.09 (1) (k) Be free from mental and physical abuse, and be free from chemical
5 and physical restraints except as authorized in writing by a physician, physician
6 assistant, or advanced practice registered nurse ~~prescriber~~ for a specified and
7 limited period of time and documented in the resident's medical record. Physical
8 restraints may be used in an emergency when necessary to protect the resident from
9 injury to himself or herself or others or to property. However, authorization for
10 continuing use of the physical restraints shall be secured from a physician, physician
11 assistant, or advanced practice registered nurse ~~prescriber~~ within 12 hours. Any use
12 of physical restraints shall be noted in the resident's medical records. "Physical
13 restraints" includes, but is not limited to, any article, device, or garment that
14 interferes with the free movement of the resident and that the resident is unable to
15 remove easily, and confinement in a locked room.

16 **SECTION 17.** 50.49 (1) (b) (intro.) of the statutes is amended to read:

17 50.49 (1) (b) (intro.) "Home health services" means the following items and
18 services that are furnished to an individual, who is under the care of a physician,
19 physician assistant, or advanced practice registered nurse ~~prescriber~~, by a home
20 health agency, or by others under arrangements made by the home health agency,
21 that are under a plan for furnishing those items and services to the individual that
22 is established and periodically reviewed by a physician, physician assistant, or
23 advanced practice registered nurse ~~prescriber~~ and that are, except as provided in
24 subd. 6., provided on a visiting basis in a place of residence used as the individual's
25 home:

SECTION 18

1 **SECTION 18.** 51.41 (1d) (b) 4. of the statutes is amended to read:

2 51.41 (1d) (b) 4. A psychiatric mental health advanced practice registered
3 nurse who is suggested by the Milwaukee County board of supervisors. The
4 Milwaukee County board of supervisors shall solicit suggestions from organizations
5 including the Wisconsin Nurses Association for individuals who specialize in a full
6 continuum of behavioral health and medical services including emergency
7 detention, inpatient, residential, transitional, partial hospitalization, intensive
8 outpatient, and wraparound community-based services. The Milwaukee County
9 board of supervisors shall suggest to the Milwaukee County executive 4 psychiatric
10 mental health advanced practice registered nurses for this board membership
11 position.

12 **SECTION 19.** 70.47 (8) (intro.) of the statutes is amended to read:

13 70.47 (8) HEARING. (intro.) The board shall hear upon oath all persons who
14 appear before it in relation to the assessment. Instead of appearing in person at the
15 hearing, the board may allow the property owner, or the property owner's
16 representative, at the request of either person, to appear before the board, under
17 oath, by telephone or to submit written statements, under oath, to the board. The
18 board shall hear upon oath, by telephone, all ill or disabled persons who present to
19 the board a letter from a physician, osteopath, physician assistant, as defined in s.
20 448.01 (6), or advanced practice registered nurse ~~prescriber certified under s. 441.16~~
21 ~~(2)~~ licensed under ch. 441 that confirms their illness or disability. At the request of
22 the property owner or the property owner's representative, the board may postpone
23 and reschedule a hearing under this subsection, but may not postpone and
24 reschedule a hearing more than once during the same session for the same property.
25 The board at such hearing shall proceed as follows:

1 **SECTION 20.** 77.54 (14) (f) 3. of the statutes is repealed.

2 **SECTION 21.** 77.54 (14) (f) 4. of the statutes is amended to read:

3 77.54 (14) (f) 4. An advanced practice registered nurse who holds a permit to
4 issue prescription orders under s. 441.09 (2).

5 **SECTION 22.** 97.59 of the statutes is amended to read:

6 **97.59 Handling foods.** No person in charge of any public eating place or other
7 establishment where food products to be consumed by others are handled may
8 knowingly employ any person handling food products who has a disease in a form
9 that is communicable by food handling. If required by the local health officer or any
10 officer of the department for the purposes of an investigation, any person who is
11 employed in the handling of foods or is suspected of having a disease in a form that
12 is communicable by food handling shall submit to an examination by the officer or
13 by a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~
14 designated by the officer. The expense of the examination, if any, shall be paid by the
15 person examined. Any person knowingly infected with a disease in a form that is
16 communicable by food handling who handles food products to be consumed by others
17 and any persons knowingly employing or permitting such a person to handle food
18 products to be consumed by others shall be punished as provided by s. 97.72.

19 **SECTION 23.** 102.13 (1) (a) of the statutes is amended to read:

20 102.13 (1) (a) Except as provided in sub. (4), whenever compensation is claimed
21 by an employee, the employee shall, upon the written request of the employee's
22 employer or worker's compensation insurer, submit to reasonable examinations by
23 physicians, chiropractors, psychologists, dentists, physician assistants, advanced
24 practice nurse ~~prescribers~~ registered nurses, or podiatrists provided and paid for by
25 the employer or insurer. No employee who submits to an examination under this

1 paragraph is a patient of the examining physician, chiropractor, psychologist,
2 dentist, physician assistant, advanced practice registered nurse ~~prescriber~~, or
3 podiatrist for any purpose other than for the purpose of bringing an action under ch.
4 655, unless the employee specifically requests treatment from that physician,
5 chiropractor, psychologist, dentist, physician assistant, advanced practice registered
6 nurse ~~prescriber~~, or podiatrist.

7 **SECTION 24.** 102.13 (1) (b) (intro.), 1., 3. and 4. of the statutes are amended to
8 read:

9 102.13 (1) (b) (intro.) An employer or insurer who requests that an employee
10 submit to reasonable examination under par. (a) or (am) shall tender to the employee,
11 before the examination, all necessary expenses including transportation expenses.
12 The employee is entitled to have a physician, chiropractor, psychologist, dentist,
13 physician assistant, advanced practice registered nurse ~~prescriber~~, or podiatrist
14 provided by himself or herself present at the examination and to receive a copy of all
15 reports of the examination that are prepared by the examining physician,
16 chiropractor, psychologist, podiatrist, dentist, physician assistant, advanced
17 practice registered nurse ~~prescriber~~, or vocational expert immediately upon receipt
18 of those reports by the employer or worker's compensation insurer. The employee is
19 also entitled to have a translator provided by himself or herself present at the
20 examination if the employee has difficulty speaking or understanding the English
21 language. The employer's or insurer's written request for examination shall notify
22 the employee of all of the following:

23 1. The proposed date, time, and place of the examination and the identity and
24 area of specialization of the examining physician, chiropractor, psychologist, dentist,

1 podiatrist, physician assistant, advanced practice registered nurse ~~prescriber~~, or
2 vocational expert.

3 3. The employee's right to have his or her physician, chiropractor, psychologist,
4 dentist, physician assistant, advanced practice registered nurse ~~prescriber~~, or
5 podiatrist present at the examination.

6 4. The employee's right to receive a copy of all reports of the examination that
7 are prepared by the examining physician, chiropractor, psychologist, dentist,
8 podiatrist, physician assistant, advanced practice registered nurse ~~prescriber~~, or
9 vocational expert immediately upon receipt of these reports by the employer or
10 worker's compensation insurer.

11 **SECTION 25.** 102.13 (1) (d) 1., 2., 3. and 4. of the statutes are amended to read:

12 102.13 (1) (d) 1. Any physician, chiropractor, psychologist, dentist, podiatrist,
13 physician assistant, advanced practice registered nurse ~~prescriber~~, or vocational
14 expert who is present at any examination under par. (a) or (am) may be required to
15 testify as to the results of the examination.

16 2. Any physician, chiropractor, psychologist, dentist, physician assistant,
17 advanced practice registered nurse ~~prescriber~~, or podiatrist who attended a worker's
18 compensation claimant for any condition or complaint reasonably related to the
19 condition for which the claimant claims compensation may be required to testify
20 before the division when the division so directs.

21 3. Notwithstanding any statutory provisions except par. (e), any physician,
22 chiropractor, psychologist, dentist, physician assistant, advanced practice registered
23 nurse ~~prescriber~~, or podiatrist attending a worker's compensation claimant for any
24 condition or complaint reasonably related to the condition for which the claimant
25 claims compensation may furnish to the employee, employer, worker's compensation

1 insurer, department, or division information and reports relative to a compensation
2 claim.

3 4. The testimony of any physician, chiropractor, psychologist, dentist,
4 physician assistant, advanced practice registered nurse ~~prescriber~~, or podiatrist who
5 is licensed to practice where he or she resides or practices in any state and the
6 testimony of any vocational expert may be received in evidence in compensation
7 proceedings.

8 **SECTION 26.** 102.13 (2) (a) of the statutes is amended to read:

9 102.13 (2) (a) An employee who reports an injury alleged to be work-related
10 or files an application for hearing waives any physician-patient,
11 psychologist-patient, or chiropractor-patient privilege with respect to any condition
12 or complaint reasonably related to the condition for which the employee claims
13 compensation. Notwithstanding ss. 51.30 and 146.82 and any other law, any
14 physician, chiropractor, psychologist, dentist, podiatrist, physician assistant,
15 advanced practice registered nurse ~~prescriber~~, hospital, or health care provider
16 shall, within a reasonable time after written request by the employee, employer,
17 worker's compensation insurer, department, or division, or its representative,
18 provide that person with any information or written material reasonably related to
19 any injury for which the employee claims compensation.

20 **SECTION 27.** 102.13 (2) (b) of the statutes is amended to read:

21 102.13 (2) (b) A physician, chiropractor, podiatrist, psychologist, dentist,
22 physician assistant, advanced practice registered nurse ~~prescriber~~, hospital, or
23 health service provider shall furnish a legible, certified duplicate of the written
24 material requested under par. (a) in paper format upon payment of the actual costs
25 of preparing the certified duplicate, not to exceed the greater of 45 cents per page or

1 \$7.50 per request, plus the actual costs of postage, or shall furnish a legible, certified
2 duplicate of that material in electronic format upon payment of \$26 per request. Any
3 person who refuses to provide certified duplicates of written material in the person's
4 custody that is requested under par. (a) shall be liable for reasonable and necessary
5 costs and, notwithstanding s. 814.04 (1), reasonable attorney fees incurred in
6 enforcing the requester's right to the duplicates under par. (a).

7 **SECTION 28.** 102.17 (1) (d) 1. and 2. of the statutes are amended to read:

8 102.17 (1) (d) 1. The contents of certified medical and surgical reports by
9 physicians, podiatrists, surgeons, dentists, psychologists, physician assistants,
10 advanced practice nurse-prescribers registered nurses, and chiropractors licensed in
11 and practicing in this state, and of certified reports by experts concerning loss of
12 earning capacity under s. 102.44 (2) and (3), presented by a party for compensation
13 constitute prima facie evidence as to the matter contained in those reports, subject
14 to any rules and limitations the division prescribes. Certified reports of physicians,
15 podiatrists, surgeons, dentists, psychologists, physician assistants, advanced
16 practice nurse-prescribers registered nurses, and chiropractors, wherever licensed
17 and practicing, who have examined or treated the claimant, and of experts, if the
18 practitioner or expert consents to being subjected to cross-examination, also
19 constitute prima facie evidence as to the matter contained in those reports. Certified
20 reports of physicians, podiatrists, surgeons, psychologists, and chiropractors are
21 admissible as evidence of the diagnosis, necessity of the treatment, and cause and
22 extent of the disability. Certified reports by doctors of dentistry, physician
23 assistants, and advanced practice nurse-prescribers registered nurses are
24 admissible as evidence of the diagnosis and necessity of treatment but not of the
25 cause and extent of disability. Any physician, podiatrist, surgeon, dentist,

SECTION 28

1 psychologist, chiropractor, physician assistant, advanced practice registered nurse
2 ~~prescriber~~, or expert who knowingly makes a false statement of fact or opinion in a
3 certified report may be fined or imprisoned, or both, under s. 943.395.

4 2. The record of a hospital or sanatorium in this state that is satisfactory to the
5 division, established by certificate, affidavit, or testimony of the supervising officer
6 of the hospital or sanatorium, any other person having charge of the record, or a
7 physician, podiatrist, surgeon, dentist, psychologist, physician assistant, advanced
8 practice registered nurse ~~prescriber~~, or chiropractor to be the record of the patient
9 in question, and made in the regular course of examination or treatment of the
10 patient, constitutes prima facie evidence as to the matter contained in the record, to
11 the extent that the record is otherwise competent and relevant.

12 **SECTION 29.** 102.29 (3) of the statutes is amended to read:

13 102.29 (3) Nothing in this chapter shall prevent an employee from taking the
14 compensation that the employee may be entitled to under this chapter and also
15 maintaining a civil action against any physician, chiropractor, psychologist, dentist,
16 physician assistant, advanced practice registered nurse ~~prescriber~~, or podiatrist for
17 malpractice.

18 **SECTION 30.** 102.42 (2) (a) of the statutes is amended to read:

19 102.42 (2) (a) When the employer has notice of an injury and its relationship
20 to the employment, the employer shall offer to the injured employee his or her choice
21 of any physician, chiropractor, psychologist, dentist, physician assistant, advanced
22 practice registered nurse ~~prescriber~~, or podiatrist licensed to practice and practicing
23 in this state for treatment of the injury. By mutual agreement, the employee may
24 have the choice of any qualified practitioner not licensed in this state. In case of
25 emergency, the employer may arrange for treatment without tendering a choice.

1 After the emergency has passed the employee shall be given his or her choice of
2 attending practitioner at the earliest opportunity. The employee has the right to a
3 2nd choice of attending practitioner on notice to the employer or its insurance carrier.
4 Any further choice shall be by mutual agreement. Partners and clinics are
5 considered to be one practitioner. Treatment by a practitioner on referral from
6 another practitioner is considered to be treatment by one practitioner.

7 **SECTION 31.** 106.30 (1) of the statutes is amended to read:

8 106.30 (1) DEFINITION. In this section, "nurse" means a registered nurse
9 licensed under s. 441.06 or permitted under s. 441.08, a licensed practical nurse
10 licensed or permitted under s. 441.10, or an advanced practice registered nurse
11 ~~prescriber certified under s. 441.16 (2), or a nurse-midwife licensed under s. 441.15~~
12 441.09.

13 **SECTION 32.** 118.15 (3) (a) of the statutes is amended to read:

14 118.15 (3) (a) Any child who is excused by the school board because the child
15 is temporarily not in proper physical or mental condition to attend a school program
16 but who can be expected to return to a school program upon termination or
17 abatement of the illness or condition. The school attendance officer may request the
18 parent or guardian of the child to obtain a written statement from a licensed
19 physician, dentist, chiropractor, optometrist, psychologist, physician assistant, or
20 ~~nurse practitioner, as defined in s. 255.06 (1) (d), or certified advanced practice~~
21 registered nurse prescriber or Christian Science practitioner living and residing in
22 this state, who is listed in the Christian Science Journal, as sufficient proof of the
23 physical or mental condition of the child. An excuse under this paragraph shall be
24 in writing and shall state the time period for which it is valid, not to exceed 30 days.

25 **SECTION 33.** 118.25 (1) (a) of the statutes is amended to read:

SECTION 33

1 118.25 (1) (a) "Practitioner" means a person licensed as a physician or as a
2 physician assistant in any state or licensed as an advanced practice registered nurse
3 or certified as an advanced practice registered nurse prescriber in any state. In this
4 paragraph, "physician" has the meaning given in s. 448.01 (5).

5 **SECTION 34.** 118.29 (1) (e) of the statutes is amended to read:

6 118.29 (1) (e) "Practitioner" means any physician, dentist, optometrist,
7 physician assistant, advanced practice registered nurse ~~prescriber~~ with prescribing
8 authority, or podiatrist licensed in any state.

9 **SECTION 35.** 118.2925 (1) (b) of the statutes is repealed.

10 **SECTION 36.** 118.2925 (3) of the statutes is amended to read:

11 118.2925 (3) PRESCRIPTIONS FOR SCHOOLS. A physician, an advanced practice
12 registered nurse ~~prescriber~~ who holds a permit to issue prescription orders under s.
13 441.09 (2), or a physician assistant may prescribe epinephrine auto-injectors in the
14 name of a school that has adopted a plan under sub. (2) (a), to be maintained by the
15 school for use under sub. (4).

16 **SECTION 37.** 118.2925 (4) (c) of the statutes is amended to read:

17 118.2925 (4) (c) Administer an epinephrine auto-injector to a pupil or other
18 person who the school nurse or designated school personnel in good faith believes is
19 experiencing anaphylaxis in accordance with a standing protocol from a physician,
20 an advanced practice registered nurse ~~prescriber~~ who holds a permit to issue
21 prescription orders under s. 441.09 (2), or a physician assistant, regardless of
22 whether the pupil or other person has a prescription for an epinephrine
23 auto-injector. If the pupil or other person does not have a prescription for an
24 epinephrine auto-injector, or the person who administers the epinephrine
25 auto-injector does not know whether the pupil or other person has a prescription for

1 an epinephrine auto-injector, the person who administers the epinephrine
2 auto-injector shall, as soon as practicable, report the administration by dialing the
3 telephone number "911" or, in an area in which the telephone number "911" is not
4 available, the telephone number for an emergency medical service provider.

5 **SECTION 38.** 118.2925 (5) of the statutes is amended to read:

6 118.2925 (5) IMMUNITY FROM CIVIL LIABILITY; EXEMPTION FROM PRACTICE OF
7 MEDICINE. A school and its designated school personnel, and a physician, an advanced
8 practice registered nurse prescriber who holds a permit to issue prescription orders
9 under s. 441.09 (2), or a physician assistant who provides a prescription or standing
10 protocol for school epinephrine auto-injectors, are not liable for any injury that
11 results from the administration or self-administration of an epinephrine
12 auto-injector under this section, regardless of whether authorization was given by
13 the pupil's parent or guardian or by the pupil's physician, physician assistant, or
14 advanced practice registered nurse prescriber, unless the injury is the result of an
15 act or omission that constitutes gross negligence or willful or wanton misconduct.
16 The immunity from liability provided under this subsection is in addition to and not
17 in lieu of that provided under s. 895.48.

18 **SECTION 39.** 146.343 (1) (c) of the statutes is amended to read:

19 146.343 (1) (c) "Nurse-midwife" means an individual who is licensed to engage
20 in the practice of nurse-midwifery under s. 441.15 (3) (a) as an advanced practice
21 registered nurse and possesses a certified nurse-midwife specialty designation
22 under s. 441.09.

23 **SECTION 40.** 146.82 (3) (a) of the statutes is amended to read:

24 146.82 (3) (a) Notwithstanding sub. (1), a physician, physician assistant, as
25 defined in s. 448.01 (6), or advanced practice registered nurse prescriber certified

1 ~~under s. 441.16 (2)~~ licensed under s. 441.09 who treats a patient whose physical or
2 mental condition in the physician's, physician assistant's, or advanced practice nurse
3 ~~prescriber's~~ registered nurse's judgment affects the patient's ability to exercise
4 reasonable and ordinary control over a motor vehicle may report the patient's name
5 and other information relevant to the condition to the department of transportation
6 without the informed consent of the patient.

7 **SECTION 41.** 146.89 (1) (r) 1. of the statutes is amended to read:

8 146.89 (1) (r) 1. Licensed as a physician under ch. 448, a dentist or dental
9 hygienist under ch. 447, a registered nurse, practical nurse, or ~~nurse-midwife~~
10 advanced practice registered nurse under ch. 441, an optometrist under ch. 449, a
11 physician assistant under ch. 448, a pharmacist under ch. 450, a chiropractor under
12 ch. 446, a podiatrist under subch. IV of ch. 448, or a physical therapist under subch.
13 III of ch. 448.

14 **SECTION 42.** 146.89 (1) (r) 3. of the statutes is repealed.

15 **SECTION 43.** 146.89 (1) (r) 8. of the statutes is amended to read:

16 146.89 (1) (r) 8. An advanced practice registered nurse who ~~has~~ holds a
17 certificate permit to issue prescription orders under s. ~~441.16~~ 441.09 (2).

18 **SECTION 44.** 146.89 (6) of the statutes is amended to read:

19 146.89 (6) (a) While serving as a volunteer health care provider under this
20 section, an advanced practice registered nurse who ~~has~~ holds a certificate permit to
21 issue prescription orders under s. ~~441.16~~ 441.09 (2) is considered to meet the
22 requirements of s. 655.23, if required to comply with s. 655.23.

23 (b) While serving as a volunteer health care provider under this section, an
24 advanced practice registered nurse who ~~has~~ holds a certificate permit to issue

1 prescription orders under s. ~~441.16~~ 441.09 (2) is not required to maintain in effect
2 malpractice insurance.

3 **SECTION 45.** 252.01 (1c) of the statutes is repealed.

4 **SECTION 46.** 252.07 (8) (a) 2. of the statutes is amended to read:

5 252.07 (8) (a) 2. The department or local health officer provides to the court a
6 written statement from a physician, physician assistant, or advanced practice
7 registered nurse prescriber that the individual has infectious tuberculosis or suspect
8 tuberculosis.

9 **SECTION 47.** 252.07 (9) (c) of the statutes is amended to read:

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

17 **SECTION 48.** 252.10 (7) of the statutes is amended to read:

18 252.10 (7) Drugs necessary for the treatment of mycobacterium tuberculosis
19 shall be purchased by the department from the appropriation account under s.
20 20.435 (1) (e) and dispensed to patients through the public health dispensaries, local
21 health departments, physicians, or advanced practice ~~nurse prescribers~~ registered
22 nurses who hold a permit to issue prescription orders under s. 441.09 (2).

23 **SECTION 49.** 252.11 (2), (4), (5), (7) and (10) of the statutes are 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

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, physician assistant, or advanced practice
7 registered nurse prescriber or treatment, an officer of the department or a local
8 health officer may proceed to have the person committed under sub. (5) to an
9 institution or system of care for examination, treatment, or observation.

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

17 (5) Any court of record may commit a person infected with a sexually
18 transmitted disease to any institution or may require the person to undergo a system
19 of care for examination, treatment, or observation if the person ceases or refuses
20 examination, treatment, or observation under the supervision of a physician,
21 physician assistant, or advanced practice registered nurse prescriber. The court
22 shall summon the person to appear on a date at least 48 hours, but not more than
23 96 hours, after service if an officer of the department or a local health officer petitions
24 the court and states the facts authorizing commitment. If the person fails to appear
25 or fails to accept commitment without reasonable cause, the court may cite the

1 person for contempt. The court may issue a warrant and may direct the sheriff, any
2 constable, or any police officer of the county immediately to arrest the person and
3 bring the person to court if the court finds that a summons will be ineffectual. The
4 court shall hear the matter of commitment summarily. Commitment under this
5 subsection continues until the disease is no longer communicable or until other
6 provisions are made for treatment that satisfy the department. The certificate of the
7 petitioning officer is prima facie evidence that the disease is no longer communicable
8 or that satisfactory provisions for treatment have been made.

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

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

1 the name of the physician, physician assistant, or advanced practice registered nurse
2 ~~prescriber~~ to whom reported.

3 **SECTION 50.** 252.15 (3m) (d) 11. b. and 13., (5g) (c), (5m) (d) 2. and (e) 2. and 3.
4 and (7m) (intro.) and (b) of the statutes are amended to read:

5 252.15 **(3m)** (d) 11. b. The coroner, medical examiner, or appointed assistant
6 is investigating the cause of death of the subject of the HIV test and has contact with
7 the body fluid of the subject of the HIV test that constitutes a significant exposure,
8 if a physician, physician assistant, or advanced practice registered nurse ~~prescriber~~,
9 based on information provided to the physician, physician assistant, or advanced
10 practice registered nurse ~~prescriber~~, determines and certifies in writing that the
11 coroner, medical examiner, or appointed assistant has had a contact that constitutes
12 a significant exposure and if the certification accompanies the request for disclosure.

13 13. If the subject of the HIV test has a positive HIV test result and is deceased,
14 by the subject's attending physician, physician assistant, or advanced practice
15 registered nurse ~~prescriber~~, to persons, if known to the physician, physician
16 assistant, or advanced practice registered nurse ~~prescriber~~, with whom the subject
17 had sexual contact or shared intravenous drug use paraphernalia.

18 **(5g)** (c) A physician, physician assistant, or advanced practice registered nurse
19 ~~prescriber~~, based on information provided to the physician, physician assistant, or
20 advanced practice registered nurse ~~prescriber~~, determines and certifies in writing
21 that the person has had contact that constitutes a significant exposure. The
22 certification shall accompany the request for HIV testing and disclosure. If the
23 person is a physician, physician assistant, or advanced practice registered nurse
24 ~~prescriber~~, he or she may not make this determination or certification. The
25 information that is provided to a physician, physician assistant, or advanced practice

1 ~~registered~~ nurse ~~prescriber~~ to document the occurrence of the contact that
2 constitutes a significant exposure and the physician's, physician assistant's, or
3 advanced practice ~~nurse prescriber's~~ registered nurse's certification that the person
4 has had contact that constitutes a significant exposure, shall be provided on a report
5 form that is developed by the department of safety and professional services under
6 s. 101.02 (19) (a) or on a report form that the department of safety and professional
7 services determines, under s. 101.02 (19) (b), is substantially equivalent to the report
8 form that is developed under s. 101.02 (19) (a).

9 **(5m)** (d) 2. A physician, physician assistant, or advanced practice registered
10 nurse ~~prescriber~~, based on information provided to the physician, physician
11 assistant, or advanced practice registered nurse ~~prescriber~~, determines and certifies
12 in writing that the contact under subd. 1. constitutes a significant exposure. A health
13 care provider who has a contact under subd. 1. c. may not make the certification
14 under this subdivision for himself or herself.

15 (e) 2. If the contact occurs as provided under par. (d) 1. b., the attending
16 physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ of
17 the funeral director, coroner, medical examiner, or appointed assistant.

18 3. If the contact occurs as provided under par. (d) 1. c., the physician, physician
19 assistant, or advanced practice registered nurse ~~prescriber~~ who makes the
20 certification under par. (d) 2.

21 **(7m)** REPORTING OF PERSONS SIGNIFICANTLY EXPOSED. (intro.) If a positive,
22 validated HIV test result is obtained from a test subject, the test subject's physician,
23 physician assistant, or advanced practice registered nurse ~~prescriber~~ who maintains
24 a record of the HIV test result under sub. (4) (c) may report to the state epidemiologist
25 the name of any person known to the physician, physician assistant, or advanced

1 practice registered nurse ~~prescriber~~ to have had contact with body fluid of the test
2 subject that constitutes a significant exposure, only after the physician, physician
3 assistant, or advanced practice registered nurse ~~prescriber~~ has done all of the
4 following:

5 (b) Notified the HIV test subject that the name of any person known to the
6 physician, physician assistant, or advanced practice registered nurse ~~prescriber~~ to
7 have had contact with body fluid of the test subject that constitutes a significant
8 exposure will be reported to the state epidemiologist.

9 **SECTION 51.** 252.16 (3) (c) (intro.) of the statutes is amended to read:

10 252.16 (3) (c) (intro.) Has submitted to the department a certification from a
11 physician, as defined in s. 448.01 (5), physician assistant, or advanced practice
12 registered nurse ~~prescriber~~ of all of the following:

13 **SECTION 52.** 252.17 (3) (c) (intro.) of the statutes is amended to read:

14 252.17 (3) (c) (intro.) Has submitted to the department a certification from a
15 physician, as defined in s. 448.01 (5), physician assistant, or advanced practice
16 registered nurse ~~prescriber~~ of all of the following:

17 **SECTION 53.** 253.07 (4) (d) of the statutes is amended to read:

18 253.07 (4) (d) In each fiscal year, \$31,500 as grants for employment in
19 communities of licensed registered nurses, licensed practical nurses, ~~certified~~
20 ~~nurse-midwives~~ licensed advanced practice registered nurses, or licensed physician
21 assistants who are members of a racial minority.

22 **SECTION 54.** 253.115 (1) (f) of the statutes is created to read:

23 253.115 (1) (f) "Nurse-midwife" means an individual who is licensed as an
24 advanced practice registered nurse and possesses a certified nurse-midwife
25 specialty designation under s. 441.09.

1 **SECTION 55.** 253.115 (4) of the statutes is amended to read:

2 253.115 (4) **SCREENING REQUIRED.** Except as provided in sub. (6), the physician,
3 nurse-midwife ~~licensed under s. 441.15~~, or certified professional midwife licensed
4 under s. 440.982 who attended the birth shall ensure that the infant is screened for
5 hearing loss before being discharged from a hospital, or within 30 days of birth if the
6 infant was not born in a hospital.

7 **SECTION 56.** 253.115 (7) (a) (intro.) of the statutes is amended to read:

8 253.115 (7) (a) (intro.) The physician, nurse-midwife ~~licensed under s. 441.15~~,
9 or certified professional midwife licensed under s. 440.982 who is required to ensure
10 that the infant is screened for hearing loss under sub. (4) shall do all of the following:

11 **SECTION 57.** 253.13 (1) of the statutes is renumbered 253.13 (1) (b) and
12 amended to read:

13 253.13 (1) (b) The attending physician or ~~nurse licensed under s. 441.15~~
14 nurse-midwife shall cause every infant born in each hospital or maternity home,
15 prior to its discharge therefrom, to be subjected to tests for congenital and metabolic
16 disorders, as specified in rules promulgated by the department. If the infant is born
17 elsewhere than in a hospital or maternity home, the attending physician, ~~nurse~~
18 ~~licensed under s. 441.15~~ nurse-midwife, or birth attendant who attended the birth
19 shall cause the infant, within one week of birth, to be subjected to these tests.

20 **SECTION 58.** 253.13 (1) (a) of the statutes is created to read:

21 253.13 (1) (a) In this subsection, “nurse-midwife” means an individual who is
22 licensed as an advanced practice registered nurse and possesses a certified
23 nurse-midwife specialty designation under s. 441.09.

24 **SECTION 59.** 253.15 (1) (em) of the statutes is created to read:

1 253.15 (1) (em) "Nurse-midwife" means an individual who is licensed as an
2 advanced practice registered nurse and possesses a certified nurse-midwife
3 specialty designation under s. 441.09.

4 **SECTION 60.** 253.15 (2) of the statutes is amended to read:

5 253.15 (2) INFORMATIONAL MATERIALS. The board shall purchase or prepare or
6 arrange with a nonprofit organization to prepare printed and audiovisual materials
7 relating to shaken baby syndrome and impacted babies. The materials shall include
8 information regarding the identification and prevention of shaken baby syndrome
9 and impacted babies, the grave effects of shaking or throwing on an infant or young
10 child, appropriate ways to manage crying, fussing, or other causes that can lead a
11 person to shake or throw an infant or young child, and a discussion of ways to reduce
12 the risks that can lead a person to shake or throw an infant or young child. The
13 materials shall be prepared in English, Spanish, and other languages spoken by a
14 significant number of state residents, as determined by the board. The board shall
15 make those written and audiovisual materials available to all hospitals, maternity
16 homes, and nurse-midwives licensed under s. 441.15 that are required to provide or
17 make available materials to parents under sub. (3) (a) 1., to the department and to
18 all county departments and nonprofit organizations that are required to provide the
19 materials to child care providers under sub. (4) (d), and to all school boards and
20 nonprofit organizations that are permitted to provide the materials to pupils in one
21 of grades 5 to 8 and in one of grades 10 to 12 under sub. (5). The board shall also make
22 those written materials available to all county departments and Indian tribes that
23 are providing home visitation services under s. 48.983 (4) (b) 1. and to all providers
24 of prenatal, postpartum, and young child care coordination services under s. 49.45
25 (44). The board may make available the materials required under this subsection

1 to be made available by making those materials available at no charge on the board's
2 Internet site.

3 **SECTION 61.** 255.06 (1) (d) of the statutes is renumbered 255.06 (1) (f) (intro.)
4 and amended to read:

5 255.06 (1) (f) (intro.) "~~Nurse practitioner~~" "Women's health nurse clinician"
6 means ~~a~~ any of the following:

7 1. A registered nurse who is licensed under ch. 441 or who holds a multistate
8 license, as defined in s. 441.51 (2) (h), issued in a party state, as defined in s. 441.51
9 (2) (k), and whose practice of professional nursing under s. 441.001 (4) includes
10 performance of delegated medical services under the supervision of a physician,
11 dentist, or podiatrist, or advanced practice registered nurse.

12 **SECTION 62.** 255.06 (1) (f) 2. of the statutes is created to read:

13 255.06 (1) (f) 2. An advanced practice registered nurse.

14 **SECTION 63.** 255.06 (2) (d) of the statutes is amended to read:

15 255.06 (2) (d) *Specialized training for rural colposcopic examinations and*
16 *activities.* Provide not more than \$25,000 in each fiscal year as reimbursement for
17 the provision of specialized training of ~~nurse practitioners~~ women's health nurse
18 clinicians to perform, in rural areas, colposcopic examinations and follow-up
19 activities for the treatment of cervical cancer.

20 **SECTION 64.** 255.07 (1) (d) of the statutes is amended to read:

21 255.07 (1) (d) "Health care practitioner" means a physician, a physician
22 assistant licensed under s. 448.04 (1) (f), or an advanced practice registered nurse
23 who is certified holds a permit to issue prescription orders under s. 441.16 441.09 (2).

24 **SECTION 65.** 257.01 (5) (a) and (b) of the statutes are amended to read:

1 257.01 (5) (a) An individual who is licensed as a physician, a physician
2 assistant, or a podiatrist under ch. 448, licensed as a registered nurse, licensed
3 practical nurse, or ~~nurse-midwife~~ advanced practice registered nurse under ch. 441,
4 licensed as a dentist under ch. 447, licensed as a pharmacist under ch. 450, licensed
5 as a veterinarian or certified as a veterinary technician under ch. 89, or certified as
6 a respiratory care practitioner under ch. 448.

7 (b) An individual who was at any time within the previous 10 years, but is not
8 currently, licensed as a physician, a physician assistant, or a podiatrist under ch. 448,
9 licensed as a registered nurse, licensed practical nurse, or ~~nurse-midwife~~, advanced
10 practice registered nurse under ch. 441, licensed as a nurse-midwife under ch. 441,
11 2017 stats., licensed as a dentist under ch. 447, licensed as a pharmacist under ch.
12 450, licensed as a veterinarian or certified as a veterinary technician under ch. 89,
13 or certified as a respiratory care practitioner under ch. 448, if the individual's license
14 or certification was never revoked, limited, suspended, or denied renewal.

15 **SECTION 66.** 341.14 (1a), (1e) (a), (1m) and (1q) of the statutes are amended to
16 read:

17 341.14 (1a) If any resident of this state, who is registering or has registered an
18 automobile, or a motor truck, dual purpose motor home or dual purpose farm truck
19 which has a gross weight of not more than 8,000 pounds, a farm truck which has a
20 gross weight of not more than 12,000 pounds or a motor home, submits a statement
21 once every 4 years, as determined by the department, from a physician licensed to
22 practice medicine in any state, from an advanced practice registered nurse licensed
23 to practice nursing in any state, from a public health nurse certified or licensed to
24 practice in any state, from a physician assistant licensed or certified to practice in
25 any state, from a podiatrist licensed to practice in any state, from a chiropractor

1 licensed to practice chiropractic in any state, or from a Christian Science practitioner
2 residing in this state and listed in the Christian Science journal certifying to the
3 department that the resident is a person with a disability that limits or impairs the
4 ability to walk, the department shall procure, issue and deliver to the disabled
5 person plates of a special design in lieu of plates which ordinarily would be issued
6 for the vehicle, and shall renew the plates. The plates shall be so designed as to
7 readily apprise law enforcement officers of the fact that the vehicle is owned by a
8 nonveteran disabled person and is entitled to the parking privileges specified in s.
9 346.50 (2a). No charge in addition to the registration fee shall be made for the
10 issuance or renewal of such plates.

11 (1e) (a) If any resident of this state, who is registering or has registered a
12 motorcycle, submits a statement once every 4 years, as determined by the
13 department, from a physician licensed to practice medicine in any state, from an
14 advanced practice registered nurse licensed to practice nursing in any state, from a
15 public health nurse certified or licensed to practice in any state, from a physician
16 assistant licensed or certified to practice in any state, from a podiatrist licensed to
17 practice in any state, from a chiropractor licensed to practice chiropractic in any
18 state, from a Christian Science practitioner residing in this state and listed in the
19 Christian Science journal, or from the U.S. department of veterans affairs certifying
20 to the department that the resident is a person with a disability that limits or impairs
21 the ability to walk, the department shall procure, issue and deliver to the disabled
22 person a plate of a special design in lieu of the plate which ordinarily would be issued
23 for the motorcycle, and shall renew the plate. The statement shall state whether the
24 disability is permanent or temporary and, if temporary, the opinion of the physician,
25 advanced practice registered nurse, public health nurse, physician assistant,

1 podiatrist, chiropractor, practitioner, or U.S. department of veterans affairs as to the
2 duration of the disability. The plate shall be so designed as to readily apprise law
3 enforcement officers of the fact that the motorcycle is owned by a disabled person and
4 is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition
5 to the registration fee may be made for the issuance or renewal of the plate.

6 (1m) If any licensed driver submits to the department a statement once every
7 4 years, as determined by the department, from a physician licensed to practice
8 medicine in any state, from a public health nurse certified or licensed to practice in
9 any state, from an advanced practice registered nurse licensed to practice nursing
10 in any state, from a physician assistant licensed or certified to practice in any state,
11 from a podiatrist licensed to practice in any state, from a chiropractor licensed to
12 practice chiropractic in any state, or from a Christian Science practitioner residing
13 in this state and listed in the Christian Science journal certifying that another
14 person who is regularly dependent on the licensed driver for transportation is a
15 person with a disability that limits or impairs the ability to walk, the department
16 shall issue and deliver to the licensed driver plates of a special design in lieu of the
17 plates which ordinarily would be issued for the automobile or motor truck, dual
18 purpose motor home or dual purpose farm truck having a gross weight of not more
19 than 8,000 pounds, farm truck having a gross weight of not more than 12,000 pounds
20 or motor home, and shall renew the plates. The plates shall be so designed as to
21 readily apprise law enforcement officers of the fact that the vehicle is operated by a
22 licensed driver on whom a disabled person is regularly dependent and is entitled to
23 the parking privileges specified in s. 346.50 (2a). No charge in addition to the
24 registration fee may be made for the issuance or renewal of the plates. The plates
25 shall conform to the plates required in sub. (1a).

1 **(1q)** If any employer who provides an automobile, or a motor truck, dual
2 purpose motor home or dual purpose farm truck which has a gross weight of not more
3 than 8,000 pounds, a farm truck which has a gross weight of not more than 12,000
4 pounds or a motor home, for an employee's use submits to the department a
5 statement once every 4 years, as determined by the department, from a physician
6 licensed to practice medicine in any state, from an advanced practice registered
7 nurse licensed to practice nursing in any state, from a public health nurse certified
8 or licensed to practice in any state, from a physician assistant licensed or certified
9 to practice in any state, from a podiatrist licensed to practice in any state, from a
10 chiropractor licensed to practice chiropractic in any state, or from a Christian
11 Science practitioner residing in this state and listed in the Christian Science journal
12 certifying that the employee is a person with a disability that limits or impairs the
13 ability to walk, the department shall issue and deliver to such employer plates of a
14 special design in lieu of the plates which ordinarily would be issued for the vehicle,
15 and shall renew the plates. The plates shall be so designed as to readily apprise law
16 enforcement officers of the fact that the vehicle is operated by a disabled person and
17 is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition
18 to the registration fee may be made for the issuance or renewal of the plates. The
19 plates shall conform to the plates required in sub. (1a).

20 **SECTION 67.** 343.16 (5) (a) of the statutes is amended to read:

21 **343.16 (5) (a)** The secretary may require any applicant for a license or any
22 licensed operator to submit to a special examination by such persons or agencies as
23 the secretary may direct to determine incompetency, physical or mental disability,
24 disease, or any other condition that might prevent such applicant or licensed person
25 from exercising reasonable and ordinary control over a motor vehicle. If the

SECTION 67

1 department requires the applicant to submit to an examination, the applicant shall
2 pay for the examination. If the department receives an application for a renewal or
3 duplicate license after voluntary surrender under s. 343.265 or receives a report from
4 a physician, physician assistant, as defined in s. 448.01 (6), advanced practice
5 registered nurse prescriber certified under s. 441.16 (2) licensed under s. 441.09, or
6 optometrist under s. 146.82 (3), or if the department has a report of 2 or more arrests
7 within a one-year period for any combination of violations of s. 346.63 (1) or (5) or
8 a local ordinance in conformity with s. 346.63 (1) or (5) or a law of a federally
9 recognized American Indian tribe or band in this state in conformity with s. 346.63
10 (1) or (5), or s. 346.63 (1m), 1985 stats., or s. 346.63 (2) or (6) or 940.25, or s. 940.09
11 where the offense involved the use of a vehicle, the department shall determine, by
12 interview or otherwise, whether the operator should submit to an examination under
13 this section. The examination may consist of an assessment. If the examination
14 indicates that education or treatment for a disability, disease or condition concerning
15 the use of alcohol, a controlled substance or a controlled substance analog is
16 appropriate, the department may order a driver safety plan in accordance with s.
17 343.30 (1q). If there is noncompliance with assessment or the driver safety plan, the
18 department shall revoke the person's operating privilege in the manner specified in
19 s. 343.30 (1q) (d).

20 **SECTION 68.** 343.51 (1) of the statutes is amended to read:

21 343.51 (1) Any person who qualifies for registration plates of a special design
22 under s. 341.14 (1), (1a), (1m), or (1q) or any other person with a disability that limits
23 or impairs the ability to walk may request from the department a special
24 identification card that will entitle any motor vehicle parked by, or under the
25 direction of, the person, or a motor vehicle operated by or on behalf of the

1 organization when used to transport such a person, to parking privileges under s.
2 346.50 (2), (2a), and (3). The department shall issue the card at a fee to be determined
3 by the department, upon submission by the applicant, if the applicant is an
4 individual rather than an organization, of a statement from a physician licensed to
5 practice medicine in any state, from an advanced practice registered nurse licensed
6 to practice nursing in any state, from a public health nurse certified or licensed to
7 practice in any state, from a physician assistant licensed or certified to practice in
8 any state, from a podiatrist licensed to practice in any state, from a chiropractor
9 licensed to practice chiropractic in any state, or from a Christian Science practitioner
10 residing in this state and listed in the Christian Science journal that the person is
11 a person with a disability that limits or impairs the ability to walk. The statement
12 shall state whether the disability is permanent or temporary and, if temporary, the
13 opinion of the physician, advanced practice registered nurse, public health nurse,
14 physician assistant, podiatrist, chiropractor, or practitioner as to the duration of the
15 disability. The department shall issue the card upon application by an organization
16 on a form prescribed by the department if the department believes that the
17 organization meets the requirements under this subsection.

18 **SECTION 69.** 343.62 (4) (a) 4. of the statutes is amended to read:

19 343.62 (4) (a) 4. The applicant submits with the application a statement
20 completed within the immediately preceding 24 months, except as provided by rule,
21 by a physician licensed to practice medicine in any state, from an advanced practice
22 registered nurse licensed to practice nursing in any state, from a physician assistant
23 licensed or certified to practice in any state, from a podiatrist licensed to practice in
24 any state, from a chiropractor licensed to practice chiropractic in any state, or from
25 a Christian Science practitioner residing in this state, and listed in the Christian

1 Science journal certifying that, in the medical care provider's judgment, the
2 applicant is physically fit to teach driving.

3 **SECTION 70.** 440.03 (13) (b) 3. of the statutes is amended to read:

4 440.03 (13) (b) 3. Advanced practice registered nurse prescriber.

5 **SECTION 71.** 440.03 (13) (b) 39m. of the statutes is created to read:

6 440.03 (13) (b) 39m. Nurse, advanced practice registered.

7 **SECTION 72.** 440.03 (13) (b) 42. of the statutes is repealed.

8 **SECTION 73.** 440.08 (2) (a) 4m. of the statutes is amended to read:

9 440.08 (2) (a) 4m. Advanced practice registered nurse prescriber: ~~October~~
10 March 1 of each even-numbered year.

11 **SECTION 74.** 440.08 (2) (a) 47. of the statutes is created to read:

12 440.08 (2) (a) 47. Nurse, advanced practice registered: March 1 of each
13 even-numbered year.

14 **SECTION 75.** 440.08 (2) (a) 50. of the statutes is repealed.

15 **SECTION 76.** 440.981 (1) of the statutes is amended to read:

16 440.981 (1) No person may use the title "licensed midwife," describe or imply
17 that he or she is a licensed midwife, or represent himself or herself as a licensed
18 midwife unless the person is granted a license under this subchapter or is licensed
19 as ~~a nurse-midwife under s. 441.15~~ an advanced practice registered nurse and
20 possesses a certified nurse-midwife specialty designation under s. 441.09.

21 **SECTION 77.** 440.982 (1) of the statutes is amended to read:

22 440.982 (1) No person may engage in the practice of midwifery unless the
23 person is granted a license under this subchapter, is granted a temporary permit
24 pursuant to a rule promulgated under s. 440.984 (2m), or is licensed as ~~a~~

1 ~~nurse-midwife under s. 441.15~~ an advanced practice registered nurse and possesses
2 a certified nurse-midwife specialty designation under s. 441.09.

3 **SECTION 78.** 440.987 (2) of the statutes is amended to read:

4 440.987 (2) One member who is licensed as ~~a nurse-midwife under s. 441.15~~
5 an advanced practice registered nurse and possesses a certified nurse-midwife
6 specialty designation under s. 441.09 and who practices in an out-of-hospital
7 setting.

8 **SECTION 79.** 441.001 (1c) of the statutes is created to read:

9 441.001 (1c) ADVANCED PRACTICE REGISTERED NURSING. “Advanced practice
10 registered nursing” means the advanced practice of nursing in one of the 4 recognized
11 roles based on advanced clinical knowledge and skills focusing on direct care of
12 individuals, greater responsibility, autonomy, and accountability for the provision of
13 care, health promotion and maintenance, including prescribing pharmacological
14 agents and therapeutics, and management of patient conditions.

15 **SECTION 80.** 441.001 (1m) of the statutes is created to read:

16 441.001 (1m) CLINICAL PHARMACOLOGY OR THERAPEUTICS. “Clinical
17 pharmacology or therapeutics” means the identification of individual and classes of
18 drugs, their indications and contraindications, their efficacy, their side effects, and
19 their interactions, as well as clinical judgment skills and decision-making based on
20 thorough interviewing, history taking, physical assessment, test selection and
21 interpretation, pathophysiology, epidemiology, diagnostic reasoning, differentiation
22 of conditions, treatment decisions, case evaluation, and nonpharmacological
23 interventions.

24 **SECTION 81.** 441.001 (5) of the statutes is created to read:

1 441.001 (5) RECOGNIZED ROLE. "Recognized role" means one of the following
2 roles:

- 3 (a) Certified nurse-midwife.
4 (b) Certified registered nurse anesthetist.
5 (c) Clinical nurse specialist.
6 (d) Nurse practitioner.

7 **SECTION 82.** 441.01 (3) of the statutes is amended to read:

8 441.01 (3) The board may promulgate rules to establish minimum standards
9 for schools for professional nurses ~~and~~, schools for licensed practical nurses, and
10 schools for advanced practice registered nurses, including all related clinical units
11 and facilities, and make and provide periodic surveys and consultations to such
12 schools. ~~It~~ The board may also ~~establish~~ promulgate rules to prevent unauthorized
13 persons from practicing professional nursing. ~~It shall approve all rules for the~~
14 ~~administration of this chapter in accordance with ch. 227.~~

15 **SECTION 83.** 441.01 (4) of the statutes is amended to read:

16 441.01 (4) The board shall direct that those schools that qualify be placed on
17 a list of schools the board has approved for professional nurses ~~or~~, of schools the board
18 has approved for licensed practical nurses, or of schools the board has approved for
19 advanced practice registered nurses on application and proof of qualifications, ~~and~~
20 the board shall make a study of nursing education and ~~initiate~~ promulgate rules and
21 policies to improve it.

22 **SECTION 84.** 441.01 (7) (a) (intro.) of the statutes is amended to read:

23 441.01 (7) (a) (intro.) The board shall require each applicant for the renewal
24 of a registered nurse ~~or~~, licensed practical nurse, or advanced practice registered

1 license issued under this chapter to do all of the following as a condition for renewing
2 the license:

3 **SECTION 85.** 441.01 (7) (b) of the statutes is amended to read:

4 441.01 (7) (b) The board may not renew a registered nurse or, licensed practical
5 nurse, or advanced practice registered license under this chapter unless the renewal
6 applicant has completed the nursing workforce survey to the satisfaction of the
7 board. The board shall establish standards to determine whether the survey has
8 been completed. The board shall, by no later than June 30 of each odd-numbered
9 year, submit all completed nursing workforce survey forms to the department of
10 workforce development.

11 **SECTION 86.** 441.01 (7) (c) of the statutes is created to read:

12 441.01 (7) (c) An applicant who is renewing both a registered nurse and
13 advanced practice registered nurse license under s. 441.09 (1) (d) is only required to
14 pay a single fee under par. (a) 2.

15 **SECTION 87.** 441.06 (title) of the statutes is repealed and recreated to read:

16 **441.06 (title) Registered nurses; civil liability exemption.**

17 **SECTION 88.** 441.06 (3) of the statutes is amended to read:

18 441.06 (3) ~~A~~ Except as provided in s. 441.09 (1) (d), a registered nurse
19 practicing for compensation shall, on or before the applicable renewal date specified
20 under s. 440.08 (2) (a), submit to the board on furnished forms a statement giving
21 name, residence, and other facts that the board requires, with the nursing workforce
22 survey and fee required under s. 441.01 (7) and the applicable renewal fee
23 determined by the department under s. 440.03 (9) (a).

24 **SECTION 89.** 441.06 (4) of the statutes is amended to read:

1 441.06 (4) Except as provided in s. 257.03, no person may practice or attempt
2 to practice professional nursing, nor use the title, letters, or anything else to indicate
3 that he or she is a registered or professional nurse unless he or she is licensed under
4 this section. Except as provided in s. 257.03, no person not so licensed may use in
5 connection with his or her nursing employment or vocation any title or anything else
6 to indicate that he or she is a trained, certified or graduate nurse. This subsection
7 does not apply to any registered nurse who holds a multistate license, as defined in
8 s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the
9 enhanced nurse licensure compact under s. 441.51.

10 **SECTION 90.** 441.06 (7) of the statutes is renumbered 441.09 (7) and amended
11 to read:

12 441.09 (7) CIVIL LIABILITY. No person ~~certified~~ licensed as an advanced practice
13 registered nurse prescriber under s. ~~441.16 (2)~~ this section is liable for civil damages
14 for any of the following:

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

20 (b) In good faith, not reporting to the department of transportation under s.
21 146.82 (3) a patient's name and other information relevant to a physical or mental
22 condition of the patient that in the advanced practice ~~nurse prescriber's~~ registered
23 nurse's judgment does not impair the patient's ability to exercise reasonable and
24 ordinary control over a motor vehicle.

1 **SECTION 91.** 441.07 (1g) (intro.), (a), (c) and (e) of the statutes are amended to
2 read:

3 441.07 (**1g**) (intro.) Subject to the rules promulgated under s. 440.03 (1), the
4 board may deny an initial license or revoke, limit, suspend, or deny the renewal of
5 a license of a registered nurse, ~~nurse-midwife~~ advanced practice registered nurse,
6 or licensed practical nurse; deny an initial ~~certificate~~ permit to issue prescription
7 orders under s. 441.09 (2) or revoke, limit, suspend, or deny the renewal of a
8 ~~certificate~~ permit to prescribe drugs or devices granted under s. 441.16 issue
9 prescription orders; or reprimand a registered nurse, ~~nurse-midwife~~ advanced
10 practice registered nurse, or licensed practical nurse, if the board finds that the
11 applicant or licensee committed any of the following:

12 (a) Fraud in the procuring or renewal of the ~~certificate~~ permit or license.

13 (c) Acts ~~which~~ that show the registered nurse, ~~nurse-midwife~~ advanced
14 practice registered nurse, or licensed practical nurse to be unfit or incompetent by
15 reason of negligence, abuse of alcohol or other drugs, or mental incompetency.

16 (e) A violation of any state or federal law that regulates prescribing or
17 dispensing drugs or devices, if the person has holds a ~~certificate~~ permit to prescribe
18 ~~drugs or devices under s. 441.16~~ issue prescription orders under s. 441.09 (2).

19 **SECTION 92.** 441.09 of the statutes is created to read:

20 **441.09 Advanced practice registered nurses; civil liability exemption.**

21 **(1) LICENSE.** (a) An applicant who satisfies all of the following requirements may
22 apply to the board for initial licensure by the board as an advanced practice
23 registered nurse:

24 1. The applicant satisfies one of the following criteria:

1 a. The applicant holds a valid license to practice as a registered nurse issued
2 under s. 441.06 (1), (1c), or (1m).

3 b. The applicant applies concurrently for a license under s. 441.06 (1), (1c), or
4 (1m) with the application for a license under this paragraph.

5 c. The applicant is a registered nurse who holds a multistate license, as defined
6 in s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted
7 the nurse licensure compact.

8 2. The applicant provides evidence satisfactory to the board that he or she
9 satisfies one of the following criteria:

10 a. The applicant has completed a graduate-level or postgraduate-level
11 education program that is approved by the board and that prepares the applicant for
12 the practice of advanced practice registered nursing in one of the 4 recognized roles,
13 and the applicant holds a current certification by a national certifying body approved
14 by the board.

15 b. On January 1, 2017, the applicant was licensed as a registered nurse in this
16 state and was practicing in a recognized role, and the applicant satisfies additional
17 criteria established by the board by rule under this subd. 2. b. relating to practice,
18 education, or certification.

19 3. The applicant pays the fee specified under s. 440.05 (1).

20 4. The applicant provides evidence of any malpractice liability insurance
21 coverage required under sub. (5).

22 5. If the applicant is applying to receive a certified nurse-midwife specialty
23 designation under par. (c) 1. a., the applicant provides evidence satisfactory to the
24 board that the applicant is currently certified by a national certifying body approved
25 by the board.

1 6. The applicant does not have an arrest or conviction record, subject to ss.
2 111.321, 111.322, and 111.335.

3 7. The applicant meets any other criteria established by the board by rule
4 relating to the education, training, or experience required for each recognized role.

5 (b) An applicant who satisfies the requirements established by the board under
6 sub. (6) (c) may, concurrently with his or her application for an advanced practice
7 registered nurse under par. (a) and upon payment of the additional fee required for
8 the permit under sub. (2) (b) 3., apply for a permit to issue prescription orders under
9 sub. (2).

10 (c) 1. Subject to subd. 3. and s. 441.07 (1g), the board shall grant an advanced
11 practice registered nurse license to an applicant the board determines meets the
12 requirements under par. (a). The board shall also grant a person who is granted a
13 license all of the following:

14 a. One or more specialty designations corresponding to the recognized roles for
15 which the board determines that the person qualifies based on the person's
16 qualifications under par. (a).

17 b. A permit to issue prescription orders under sub. (2), if the applicant applies
18 for a permit under par. (b) and the board determines the applicant satisfies the
19 requirements under sub. (6) (c).

20 2. Each specialty designation granted under subd. 1. a. shall appear on the
21 person's advanced practice registered nurse license.

22 3. The board may not grant an advanced practice registered nurse license to
23 a person applying concurrently for a license under s. 441.06 (1), (1c), or (1m), unless
24 the board also grants the person the license under s. 441.06 (1), (1c), or (1m).

1 4. The board may place specific limitations on a person licensed as an advanced
2 practice registered nurse as a condition of licensure.

3 (d) On or before the applicable renewal date specified under s. 440.08 (2) (a),
4 an advanced practice registered nurse shall submit to the board on a form furnished
5 by the board a statement giving his or her name and residence, the nursing workforce
6 survey and fee required under s. 441.01 (7), evidence of having satisfied the
7 continuing education requirements under sub. (4), evidence of any malpractice
8 liability insurance coverage required under sub. (5), current evidence that the person
9 satisfies each of the requirements under par. (a) 1., 2., 5., and 7. that apply with
10 respect to the person, and any other information that the board requires by rule, with
11 the applicable renewal fee determined by the department under s. 440.03 (9) (a). The
12 board shall grant to a person who satisfies the requirements under this paragraph
13 the renewal of his or her advanced practice registered nurse license and specialty
14 designations granted under par. (c) 1. a. and shall, if the person holds a license under
15 s. 441.06 (1), (1c), or (1m), also grant the renewal of that license.

16 **(2) PERMIT TO ISSUE PRESCRIPTION ORDERS.** (a) In this subsection, “prescription
17 order” has the meaning given in s. 450.01 (21).

18 (b) Subject to s. 441.07 (1g), the board shall grant a permit to issue prescription
19 orders to an applicant who satisfies all of the following:

20 1. The applicant is licensed as an advanced practice registered nurse under
21 sub. (1) or the applicant applies for the permit under sub. (1) (b) concurrently with
22 his or her application for a license under sub. (1) (a) and is granted the license under
23 sub. (1) (c).

24 2. The applicant meets the additional requirements for granting the permit
25 established by the board under sub. (6) (c).

1 3. The applicant pays the fee specified under s. 440.05 (1).

2 (c) On or before the applicable renewal date specified under s. 440.08 (2) (a),
3 a person issued a permit under par. (b) shall submit to the board on a form furnished
4 by the board a statement giving his or her name and residence and any other
5 information that the board requires by rule with the applicable renewal fee
6 determined by the department under s. 440.03 (9) (a). The board shall grant to a
7 person who satisfies the requirements under this paragraph the renewal of his or her
8 permit to issue prescription orders.

9 (d) An advanced practice registered nurse who holds a permit under this
10 subsection may issue prescription orders, subject to the rules promulgated under
11 sub. (6) (a) and (d), and may provide expedited partner therapy in the manner
12 described in s. 448.035.

****NOTE: Per your request, I added a reference to prescribing to the definition of advanced practice registered nursing. However, you may wish to then make clearer somehow that only an APRN with a permit has the authority to prescribe. Note that s. 441.09 (3) (a) 1. allows a licensed individual to practice advanced practice registered nursing, which is now defined to include prescribing. Obviously, it would not make sense to have a permit for something that doesn't give you any additional authority, but I would suggest making it clear that only a permit holder, and not any APRN, can prescribe.

13 **(3) PRACTICE; TITLES.** (a) 1. The holder of a license issued under this section is
14 an "advanced practice registered nurse," may append to his or her name the title
15 "A.P.R.N.," and is authorized to practice advanced practice registered nursing.

16 2. The holder of a specialty designation for a recognized role granted under sub.
17 (1) (c) 1. a. may append to his or her name the title and an abbreviation corresponding
18 to that recognized role.

19 (b) 1. Except as provided in par. (c) and s. 257.03, no person may practice or
20 attempt to practice advanced practice registered nursing, nor use the title "advanced
21 practice registered nurse," the title "A.P.R.N.," or anything else to indicate that he

1 or she is an advanced practice registered nurse unless he or she is licensed under this
2 section.

3 2. Except as provided in s. 257.03, no person may do any of the following:

4 a. Use the title "certified nurse-midwife," the title "C.N.M.," or anything else
5 to indicate that he or she is a certified nurse-midwife unless he or she has been
6 granted a certified nurse-midwife specialty designation under sub. (1) (c) 1. a.

7 b. Use the title "certified registered nurse anesthetist," the title "C.R.N.A.," or
8 anything else to indicate that he or she is a certified registered nurse anesthetist
9 unless he or she has been granted a certified registered nurse anesthetist specialty
10 designation under sub. (1) (c) 1. a.

11 c. Use the title "clinical nurse specialist," the title "C.N.S.," or anything else to
12 indicate that he or she is a clinical nurse specialist unless he or she has been granted
13 a clinical nurse specialist specialty designation under sub. (1) (c) 1. a.

14 d. Use the title "nurse practitioner," the title "N.P.," or anything else to indicate
15 that he or she is a nurse practitioner unless he or she has been granted a nurse
16 practitioner specialty designation under sub. (1) (c) 1. a.

17 (c) An advanced practice registered nurse licensed under this section may
18 delegate a task or order to another clinically trained health care worker if the task
19 or order is within the scope of the advanced practice registered nurse's practice, the
20 advanced practice registered nurse is competent to perform the task or issue the
21 order, and the advanced practice registered nurse has reasonable evidence that the
22 health care worker is minimally competent to perform the task or issue the order
23 under the circumstances.

****NOTE: Please review the above language.

1 (4) CONTINUING EDUCATION. Every advanced practice registered nurse shall
2 submit to the board evidence of having completed at least 16 contact hours per
3 biennium in clinical pharmacology or therapeutics relevant to the advanced practice
4 registered nurse's area of practice. The board may promulgate rules regarding the
5 continuing education requirements under this subsection.

6 (5) MALPRACTICE LIABILITY INSURANCE. Except for a person whose employer has
7 in effect malpractice liability insurance that provides coverage for the person in the
8 amounts specified under s. 655.23 (4), no person may practice advanced practice
9 registered nursing unless he or she at all times has in effect malpractice liability
10 insurance coverage in the minimum amounts required by the rules of the board. An
11 advanced practice registered nurse shall submit evidence of that coverage to the
12 board when applying for an initial license under this section or a renewal of a license
13 under this section. An advanced practice registered nurse shall also submit such
14 evidence to the board upon request of the board.

15 (6) RULES. The board shall promulgate rules necessary to administer this
16 section, including rules for all of the following:

17 (a) Further defining the scope of practice of an advanced practice registered
18 nurse, defining the scope of practice for each recognized role, and defining the scope
19 of practice within which an advanced practice registered nurse who holds a permit
20 issued under sub. (2) may issue prescription orders.

21 (b) Determining acceptable national certification for purposes of sub. (1) (a) 2.

22 a.

23 (c) Establishing the appropriate education, training, or experience
24 requirements that a registered nurse must satisfy to be an advanced practice

1 registered nurse and to qualify to be granted a permit to issue prescription orders
2 under sub. (2).

3 (d) Specifying the classes of drugs, individual drugs, or devices that may not
4 be prescribed by an advanced practice registered nurse who holds a permit to issue
5 prescription orders under sub. (2).

6 (e) Specifying the conditions to be met for registered nurses to do the following:

- 7 1. Administer a drug prescribed by an advanced practice registered nurse.
- 8 2. Administer a drug at the direction of an advanced practice registered nurse.

9 (f) Establishing the minimum amount of malpractice liability insurance
10 coverage that an advanced practice registered nurse must at all times have in effect
11 for purposes of sub. (5). The board shall promulgate rules under this paragraph in
12 consultation with the commissioner of insurance.

13 **SECTION 93.** 441.10 (7) of the statutes is amended to read:

14 441.10 (7) No license is required for practical nursing, but, except as provided
15 in s. 257.03, no person without a license may hold himself or herself out as a licensed
16 practical nurse or licensed attendant, use the title or letters "Trained Practical
17 Nurse" or "T.P.N.", "Licensed Practical Nurse" or "L.P.N.", "Licensed Attendant" or
18 "L.A.", "Trained Attendant" or "T.A.", or otherwise seek to indicate that he or she is
19 a licensed practical nurse or licensed attendant. No licensed practical nurse or
20 licensed attendant may use the title, or otherwise seek to act as a registered, licensed,
21 graduate or professional nurse. Anyone violating this subsection shall be subject to
22 the penalties prescribed by s. 441.13. ~~The board shall grant without examination a~~
23 ~~license as a licensed practical nurse to any person who was on July 1, 1949, a licensed~~
24 ~~attendant.~~ This subsection does not apply to any licensed practical nurse who holds

1 a multistate license, as defined in s. 441.51 (2) (h), issued by a jurisdiction, other than
2 this state, that has adopted the enhanced nurse licensure compact under s. 441.51.

3 **SECTION 94.** 441.11 (title) of the statutes is repealed.

4 **SECTION 95.** 441.11 (1) of the statutes is repealed.

5 **SECTION 96.** 441.11 (2) of the statutes is renumbered 441.09 (5m) and amended
6 to read:

7 441.09 (5m) NURSE ANESTHETISTS. The provisions of s. 448.04 (1) (g) do not apply
8 to ~~a~~ an advanced practice registered nurse licensed under this section who possesses
9 a certified registered nurse anesthetist specialty designation under sub. (1) (c) 1. a.

10 **SECTION 97.** 441.11 (3) of the statutes is repealed.

11 **SECTION 98.** 441.15 of the statutes is repealed.

12 **SECTION 99.** 441.16 of the statutes is repealed.

13 **SECTION 100.** 441.18 (2) (a) (intro.) of the statutes is amended to read:

14 441.18 (2) (a) (intro.) An advanced practice registered nurse certified who holds
15 a permit to issue prescription orders under s. 441.16 441.09 (2) may do any of the
16 following:

17 **SECTION 101.** 441.18 (2) (b) of the statutes is amended to read:

18 441.18 (2) (b) An advanced practice registered nurse who prescribes or delivers
19 an opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid
20 antagonist is prescribed has or has the capacity to provide the knowledge and
21 training necessary to safely administer the opioid antagonist to an individual
22 undergoing an opioid-related overdose and that the person demonstrates the
23 capacity to ensure that any individual to whom the person further delivers the opioid
24 antagonist has or receives that knowledge and training.

25 **SECTION 102.** 441.18 (3) of the statutes is amended to read:

1 ch. 446, to practice dentistry or dental hygiene under ch. 447, to practice optometry
2 under ch. 449, to practice acupuncture under ch. 451 or under any other statutory
3 provision, or as otherwise provided by statute.

4 **SECTION 107.** 448.035 (1) (a) of the statutes is repealed.

5 **SECTION 108.** 448.035 (2), (3) and (4) of the statutes are amended to read:

6 448.035 (2) Notwithstanding the requirements of s. 448.30, a physician, a
7 physician assistant, or ~~certified~~ an advanced practice registered nurse prescriber
8 who holds a permit to issue prescription orders under s. 441.09 (2) may provide
9 expedited partner therapy if the patient is diagnosed as infected with a chlamydial
10 infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with
11 a sexual partner during which the chlamydial infection, gonorrhea, or
12 trichomoniasis may have been transmitted to or from the sexual partner. The
13 physician, physician assistant, or ~~certified~~ advanced practice registered nurse
14 ~~prescriber~~ shall attempt to obtain the name of the patient's sexual partner. A
15 prescription order for an antimicrobial drug prepared under this subsection shall
16 include the name and address of the patient's sexual partner, if known. If the
17 physician, physician assistant, or ~~certified~~ advanced practice registered nurse
18 ~~prescriber~~ is unable to obtain the name of the patient's sexual partner, the
19 prescription order shall include, in ordinary bold-faced capital letters, the words,
20 "expedited partner therapy" or the letters "EPT."

21 (3) The physician, physician assistant, or ~~certified~~ advanced practice
22 registered nurse ~~prescriber~~ shall provide the patient with a copy of the information
23 sheet prepared by the department of health services under s. 46.03 (44) and shall
24 request that the patient give the information sheet to the person with whom the
25 patient had sexual contact.

SECTION 108

1 (4) (a) Except as provided in par. (b), a physician, physician assistant, or
2 certified advanced practice registered nurse ~~prescriber~~ is immune from civil liability
3 for injury to or the death of a person who takes any antimicrobial drug if the
4 antimicrobial drug is prescribed, dispensed, or furnished under this section and if
5 expedited partner therapy is provided as specified under this section.

6 (b) The immunity under par. (a) does not extend to the donation, distribution,
7 furnishing, or dispensing of an antimicrobial drug by a physician, physician
8 assistant, or certified advanced practice registered nurse ~~prescriber~~ whose act or
9 omission involves reckless, wanton, or intentional misconduct.

10 **SECTION 109.** 448.56 (1) and (1m) (b) of the statutes are amended to read:

11 448.56 (1) WRITTEN REFERRAL. Except as provided in this subsection and s.
12 448.52, a person may practice physical therapy only upon the written referral of a
13 physician, physician assistant, chiropractor, dentist, podiatrist, or advanced practice
14 registered nurse ~~prescriber~~ ~~certified under s. 441.16 (2)~~. Written referral is not
15 required if a physical therapist provides services in schools to children with
16 disabilities, as defined in s. 115.76 (5), pursuant to rules promulgated by the
17 department of public instruction; provides services as part of a home health care
18 agency; provides services to a patient in a nursing home pursuant to the patient's
19 plan of care; provides services related to athletic activities, conditioning, or injury
20 prevention; or provides services to an individual for a previously diagnosed medical
21 condition after informing the individual's physician, physician assistant,
22 chiropractor, dentist, podiatrist, or advanced practice registered nurse ~~prescriber~~
23 ~~certified under s. 441.16 (2)~~ who made the diagnosis. The examining board may
24 promulgate rules establishing additional services that are excepted from the written
25 referral requirements of this subsection.

1 **(1m)** (b) The examining board shall promulgate rules establishing the
2 requirements that a physical therapist must satisfy if a physician, physician
3 assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse
4 ~~prescriber~~ makes a written referral under sub. (1). The purpose of the rules shall be
5 to ensure continuity of care between the physical therapist and the health care
6 practitioner.

7 **SECTION 110.** 448.62 (2m) of the statutes is amended to read:

8 448.62 **(2m)** An advanced practice registered nurse ~~who is certified to issue~~
9 ~~prescription orders under s. 441.16 and~~ who is providing nonsurgical patient services
10 as directed, supervised, and inspected by a podiatrist who has the power to direct,
11 decide, and oversee the implementation of the patient services rendered.

12 **SECTION 111.** 448.67 (2) of the statutes is amended to read:

13 448.67 **(2)** SEPARATE BILLING REQUIRED. Except as provided in sub. (4), a licensee
14 who renders any podiatric service or assistance, or gives any podiatric advice or any
15 similar advice or assistance, to any patient, podiatrist, physician, physician
16 assistant, advanced practice registered nurse ~~prescriber~~ ~~certified under s. 441.16(2),~~
17 partnership, or corporation, or to any other institution or organization, including a
18 hospital, for which a charge is made to a patient, shall, except as authorized by
19 Title 18 or Title 19 of the federal Social Security Act, render an individual statement
20 or account of the charge directly to the patient, distinct and separate from any
21 statement or account by any other podiatrist, physician, physician assistant,
22 advanced practice registered nurse ~~prescriber~~, or other person.

23 **SECTION 112.** 448.956 (1m) of the statutes is amended to read:

24 448.956 **(1m)** Subject to sub. (1) (a), a licensee may provide athletic training
25 to an individual without a referral, except that a licensee may not provide athletic

1 training as described under s. 448.95 (5) (d) or (e) in an outpatient rehabilitation
2 setting unless the licensee has obtained a written referral for the individual from a
3 practitioner licensed or certified under subch. II, III, IV, V, or VII of this chapter;
4 under ch. 446; or under s. ~~441.16 (2)~~ 441.09.

5 **SECTION 113.** 450.01 (1m) of the statutes is repealed.

6 **SECTION 114.** 450.01 (16) (h) 2. of the statutes is amended to read:

7 450.01 (16) (h) 2. The patient's advanced practice registered nurse ~~prescriber~~,
8 if the advanced practice registered nurse ~~prescriber~~ ~~has entered into a written~~
9 ~~agreement to collaborate with a physician~~ holds a permit to issue prescription orders
10 under s. 441.09 (2).

11 **SECTION 115.** 450.01 (16) (hr) 2. of the statutes is amended to read:

12 450.01 (16) (hr) 2. An advanced practice registered nurse ~~prescriber~~ who holds
13 a permit to issue prescription orders under s. 441.09 (2).

14 **SECTION 116.** 450.03 (1) (e) of the statutes is amended to read:

15 450.03 (1) (e) Any person lawfully practicing within the scope of a license,
16 permit, registration, certificate, or certification granted to provide home medical
17 oxygen under s. 450.076, to practice professional ~~or~~ practical, or advanced practice
18 registered nursing ~~or nurse-midwifery~~ under ch. 441, to practice dentistry or dental
19 hygiene under ch. 447, to practice medicine and surgery under ch. 448, to practice
20 optometry under ch. 449 or to practice veterinary medicine under ch. 89, or as
21 otherwise provided by statute.

22 **SECTION 117.** 450.11 (1i) (a) 1. of the statutes is amended to read:

23 450.11 (1i) (a) 1. A pharmacist may, upon and in accordance with the
24 prescription order of an advanced practice registered nurse ~~prescriber~~ under s.
25 441.18 (2) (a) 1., or of a physician or physician assistant under s. 448.037 (2) (a) 1.,

1 that complies with the requirements of sub. (1), deliver an opioid antagonist to a
2 person specified in the prescription order and may, upon and in accordance with the
3 standing order of an advanced practice registered nurse ~~prescriber~~ under s. 441.18
4 (2) (a) 2., or of a physician or physician assistant under s. 448.037 (2) (a) 2., that
5 complies with the requirements of sub. (1), deliver an opioid antagonist to an
6 individual in accordance with the order. The pharmacist shall provide a consultation
7 in accordance with rules promulgated by the board for the delivery of a prescription
8 to the person to whom the opioid antagonist is delivered.

9 **SECTION 118.** 450.11 (1i) (b) 2. b. of the statutes is amended to read:

10 450.11 (1i) (b) 2. b. An advanced practice registered nurse ~~prescriber~~ may only
11 deliver or dispense an opioid antagonist in accordance with s. 441.18 (2) or in
12 accordance with his or her other legal authority to dispense prescription drugs.

13 **SECTION 119.** 450.11 (7) (b) of the statutes is amended to read:

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

18 **SECTION 120.** 450.11 (8) (e) of the statutes is amended to read:

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

21 **SECTION 121.** 450.13 (5) (b) of the statutes is amended to read:

22 450.13 (5) (b) The patient's advanced practice registered nurse ~~prescriber~~, if the
23 advanced practice registered nurse ~~prescriber~~ ~~has entered into a written agreement~~
24 ~~to collaborate with a physician~~ holds a permit to issue prescription orders under s.
25 441.09 (2).

1 **SECTION 122.** 450.135 (7) (b) of the statutes is amended to read:

2 450.135 (7) (b) The patient's advanced practice registered nurse ~~prescriber~~, if
3 the advanced practice registered nurse ~~prescriber has entered into a written~~
4 ~~agreement to collaborate with a physician~~ holds a permit to issue prescription orders
5 under s. 441.09 (2).

6 **SECTION 123.** 462.04 of the statutes is amended to read:

7 **462.04 Prescription or order required.** A person who holds a license or
8 limited X-ray machine operator permit under this chapter may not use diagnostic
9 X-ray equipment on humans for diagnostic purposes unless authorized to do so by
10 prescription or order of a physician licensed under s. 448.04 (1) (a), a dentist licensed
11 under s. 447.04 (1), a podiatrist licensed under s. 448.63, a chiropractor licensed
12 under s. 446.02, an advanced practice registered nurse ~~certified~~ licensed under s.
13 ~~441.16 (2)~~ 441.09, a physician assistant licensed under s. 448.04 (1) (f), or, subject to
14 s. 448.56 (7) (a), a physical therapist licensed under s. 448.53.

15 **SECTION 124.** 655.001 (7t) of the statutes is amended to read:

16 655.001 (7t) "Health care practitioner" means a health care professional, as
17 defined in s. 180.1901 (1m), who is an employee of a health care provider described
18 in s. 655.002 (1) (d), (e), (em), or (f) and who has the authority to provide health care
19 services that are not ~~in collaboration with a physician under s. 441.15 (2) (b) or under~~
20 the direction and supervision of a physician or nurse anesthetist.

21 **SECTION 125.** 655.001 (9) of the statutes is amended to read:

22 655.001 (9) "Nurse anesthetist" means ~~a nurse~~ an individual who is licensed
23 ~~under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued~~
24 ~~in a party state, as defined in s. 441.51 (2) (k), and who is certified as a nurse~~
25 ~~anesthetist by the American association of nurse anesthetists~~ as an advanced

1 practice registered nurse and possesses a certified registered nurse anesthetist
2 specialty designation under s. 441.09.

3 **SECTION 126.** 655.005 (2) (a) of the statutes is amended to read:

4 655.005 (2) (a) An employee of a health care provider if the employee is a
5 physician or a nurse anesthetist or is a health care practitioner who is providing
6 health care services that are not ~~in collaboration with a physician under s. 441.15 (2)~~
7 ~~(b) or~~ under the direction and supervision of a physician or nurse anesthetist.

8 **SECTION 127.** 961.01 (19) (a) of the statutes is amended to read:

9 961.01 (19) (a) A physician, advanced practice registered nurse, dentist,
10 veterinarian, podiatrist, optometrist, scientific investigator or, subject to s. 448.21
11 (3), a physician assistant, or other person licensed, registered, certified or otherwise
12 permitted to distribute, dispense, conduct research with respect to, administer or use
13 in teaching or chemical analysis a controlled substance in the course of professional
14 practice or research in this state.

15 **SECTION 128.** 961.395 of the statutes is amended to read:

16 **961.395 Limitation on advanced practice registered nurses.** (1) An
17 advanced practice registered nurse who is ~~certified~~ holds a permit to issue
18 prescription orders under s. 441.16 ~~441.09 (2)~~ may prescribe controlled substances
19 only as permitted by the rules promulgated under s. 441.16 (3) ~~441.09 (6) (d)~~.

20 (2) An advanced practice registered nurse ~~certified under s. 441.16~~ who holds
21 a permit to issue prescription orders under s. 441.09 (2) shall include with each
22 prescription order the advanced ~~practice nurse prescriber certification~~ permit
23 number issued to him or her by the board of nursing.

24 (3) An advanced practice registered nurse ~~certified under s. 441.16~~ who holds
25 a permit to issue prescription orders under s. 441.09 (2) may dispense a controlled

1 substance only by prescribing or administering the controlled substance or as
2 otherwise permitted by the rules promulgated under s. 441.16-~~(3)~~ 441.09 (6) (d).

3 **SECTION 129. Nonstatutory provisions.**

4 (1) Using the procedure under s. 227.24, the board of nursing may promulgate
5 rules under ch. 441 that are necessary to implement the changes in this act.
6 Notwithstanding s. 227.24 (1) (a) and (3), the board is not required to provide
7 evidence that promulgating a rule under this subsection as an emergency rule is
8 necessary for the preservation of the public peace, health, safety, or welfare and is
9 not required to provide a finding of emergency for a rule promulgated under this
10 subsection. Notwithstanding s. 227.24 (1) (c) and (2), the effective period of a rule
11 promulgated under this subsection is for 2 years after its promulgation, or until
12 permanent rules take effect, whichever is sooner, and the effective period may not
13 be further extended under s. 227.24 (2).

14 **SECTION 130. Effective dates.** This act takes effect on March 1, 2022, except
15 as follows:

16 (1) SECTION 129 (1) of this act takes effect on the day after publication.

17 (END)

INSERT ANALYSIS

NURSING PRACTICE AND LICENSURE

This bill makes various changes to practice, licensure, and certification requirements for nurses, which are administered by the Board of Nursing.

Licensure of advanced practice registered nurses

X
+
+
+
+
Under current law, a person who wishes to practice professional nursing must be licensed by the Board of Nursing as a registered nurse (RN). This bill creates an additional system of licensure for advanced practice registered nurses (APRNs), to be administered by the board. Under the bill, in order to apply for an APRN license, a person must 1) hold, or concurrently apply for, an RN license; 2) have completed an accredited graduate-level or postgraduate-level education program preparing the person to practice as an APRN in one of four recognized roles and hold a current national certification approved by the board; 3) possess malpractice liability insurance in an amount determined as provided in the bill; 4) pay a fee determined by the Department of Safety and Professional Services; and 5) satisfy certain other criteria specified in the bill. The bill also allows a person who has not completed an accredited education program described above to receive an APRN license if the person 1) on January 1, 2017, was both licensed as an RN in Wisconsin and practicing in one of the four recognized roles, and 2) satisfies additional practice or education criteria established by the board. The four recognized roles, as defined in the bill, are 1) certified nurse-midwife; 2) certified registered nurse anesthetist; 3) clinical nurse specialist; and 4) nurse practitioner. The bill also requires the board, upon granting a person an APRN license, to also grant the person one or more specialty designations corresponding to the recognized role or roles for which the person qualifies.

The holder of an APRN license may append the title "A.P.R.N." to his or her name, as well as a title corresponding to whichever specialty designations that the person possesses. The bill prohibits any person from using the title "A.P.R.N.," and from otherwise indicating that he or she is an APRN, unless the person is licensed by the board as an APRN. The bill also prohibits the use of titles and abbreviations corresponding to a recognized role unless the person has a specialty designation for that role. However, the bill allows an APRN to delegate a task or order to another clinically trained health care worker if the task or order is within the scope of the APRN's practice, the APRN is competent to perform the task or issue the order, and the APRN has reasonable evidence that the health care worker is minimally competent to perform the task or issue the order under the circumstances.

Under the bill, when an APRN renews his or her APRN license, the board must grant the person the renewal of both the person's RN license and the person's APRN license. The bill requires all APRNs to complete continuing education requirements each biennium in clinical pharmacology or therapeutics relevant to the APRN's area of practice and to satisfy certain other requirements when renewing a license.

Practice of nurse-midwifery

This bill repeals licensure and practice requirements specific to nurse-midwives and the practice of nurse-midwifery, including specific

requirements to practice with an obstetrician. Under the bill, "certified nurse-midwife" is one of the four recognized roles for APRNs, and a person who practices nurse-midwifery under current law who satisfies the APRN licensure requirements may apply for and receive an APRN license and a certified nurse-midwife specialty designation, except that the bill also requires that a person applying for a certified nurse-midwife specialty designation be certified by a national certifying body approved by the board.

Advanced practice registered nurse prescribers

Under current law, a person licensed as an RN may apply to the board for a certificate to issue prescription orders if the person meets certain requirements established by the board. An RN holding a certificate is subject to various practice requirements and limitations established by the board and must possess malpractice liability insurance in an amount determined by the board.

The bill eliminates certificates to issue prescription orders and replaces them with permits to issue prescription orders. The bill allows the holder of an APRN license to apply for a permit or for an applicant for an APRN license to apply for a permit concurrently with his or her APRN license application. The bill requires the board to establish the appropriate education, training, or experience requirements that a registered nurse must satisfy to be granted a permit to issue prescription orders. As under current law, an APRN holding a permit is subject to various practice requirements and limitations established by the board.

X ~~instead provides that the board may grant an APRN who applies for licensure and who meets the education, training, and examination requirements established by the board the authority to issue prescription orders. The bill requires the board to maintain a register of all APRNs who are authorized to issue prescription orders.~~

OTHER CHANGES

The bill makes numerous other changes throughout the statutes relating to APRNs and APRN prescribers, including various terminology changes and technical changes relating to the Nurse Licensure Compact.

Duchek, Michael

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Wednesday, January 23, 2019 1:06 PM
To: Duchek, Michael
Cc: Pulda, Matt; Forbes McIntosh (forbes@wis-gps.com); Burton Wagner
Subject: RE: Additional language to APRN 19-0429/3

Good afternoon Mike, Thank you for your question. This is the language that WHA wanted. We, the APRN Coalition members, did discuss this and thought that each APRN working independently in the community will have a "Transition to care plan" in the form of a policy. I am copying Burt and Forbes to provide their thoughts as well. We will probably need to connect to get more detail for you.

Sincerely,
Gina



Gina Dennik-Champion, MSN, RN, MSHA
Executive Director
Wisconsin Nurses Association
2820 Walton Commons Ln, Suite 136
Madison, WI 53718
Work phone: 608-221-0383 Ext. 202
Mobile: 608-228-3300
gina@wisconsinnurses.org



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From: Duchek, Michael [mailto:Michael.Duchek@legis.wisconsin.gov]
Sent: Wednesday, January 23, 2019 12:59 PM
To: Gina Dennik-Champion
Cc: Pulda, Matt; Forbes McIntosh (forbes@wis-gps.com); Burton Wagner
Subject: RE: Additional language to APRN 19-0429/3

Gina,

I can add some language to this effect but I'd rather have some agreement on the language before I put it through. So I guess my question is whether you have any more specific language in mind? A directive to simply "plan" seems like a fairly informal and nonspecific kind of directive, so for example, do you want the APRN to have this plan down in writing? Any further thoughts on how this would work in practice would be appreciated.

-Mike

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Wednesday, January 23, 2019 9:46 AM
To: Duchek, Michael <Michael.Duchek@legis.wisconsin.gov>
Cc: Pulda, Matt <Matt.Pulda@legis.wisconsin.gov>; Forbes McIntosh (forbes@wis-gps.com) <forbes@wis-gps.com>;

Burton Wagner <bawagner@wisc.edu>

Subject: Additional language to APRN 19-0429/3

Importance: High

Good morning Mike and Matt, We have one more piece of additional language that we would like added in response to WHA recommendation. Could you please add?

Transition of care plan. APRN's working without an affiliation with an organization offering inpatient services must plan for the management of situations beyond the APRN's expertise, including options for consultation and referral for the APRN's patient population. These options may not be limited to consultation or referral to a hospital emergency room.

Thanks

Gina



Gina Dennik-Champion, MSN, RN, MSHA

Executive Director

Wisconsin Nurses Association

2820 Walton Commons Ln, Suite 136

Madison, WI 53718

Work phone: 608-221-0383 Ext. 202

Mobile: 608-228-3300

gina@wisconsinnurses.org



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Duchek, Michael

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Wednesday, January 23, 2019 6:32 PM
To: Duchek, Michael
Cc: Forbes McIntosh; Pulda, Matt
Subject: Fwd: New Language

Hello Mike, does the email from Burt work for you? Should this be a part of the Board of Nursing's authority?

Gina Dennik-Champion

Begin forwarded message:

From: Burt Wagner <bawagner@wisc.edu>
Date: January 23, 2019 at 4:35:51 PM CST
To: Gina Dennik-Champion <gina@wisconsinnurses.org>, Forbes McIntosh <forbes@wis-gps.com>
Subject: New Language

Gina-I think adding the requirement for a written plan would be ok. This is a very small subset of APRN's who are not affiliated with an institution and Mike's concern will quickly be noted.

Duchek, Michael

From: Duchek, Michael
Sent: Thursday, January 24, 2019 1:23 PM
To: 'Gina Dennik-Champion'
Cc: Forbes McIntosh; Pulda, Matt
Subject: RE: New Language

Gina,

I guess the questions are 1) what is the requirement in the statute and 2) what is the board's role? If you want, the board could come up with rules to flush this out further, but if you think having language like what they sent is enough, it would just be a matter of having this requirement and then an APRN who the board determined was not in compliance would be subject to discipline under s. 441.07 (1g) (b). So, here is my attempt to translate the language from WHA into a statute. Let me know what you think, and again, if you think this is something the board should develop more detailed rules on, I could do that instead.

An advanced practice registered nurse who is working without an affiliation with an organization offering inpatient services shall maintain a written plan for the management of situations that are beyond the advanced practice registered nurse's expertise (should this be "scope of practice" instead of "expertise"?), including options for consultation and referral for the advanced practice registered nurse's patient population. Those options may not be limited to consultation or referral to a hospital emergency room.

-Mike

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Wednesday, January 23, 2019 6:32 PM
To: Duchek, Michael <Michael.Duchek@legis.wisconsin.gov>
Cc: Forbes McIntosh <forbes@wis-gps.com>; Pulda, Matt <Matt.Pulda@legis.wisconsin.gov>
Subject: Fwd: New Language

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Gina Dennik-Champion

Begin forwarded message:

From: Burt Wagner <bawagner@wisc.edu>
Date: January 23, 2019 at 4:35:51 PM CST
To: Gina Dennik-Champion <gina@wisconsinnurses.org>, Forbes McIntosh <forbes@wis-gps.com>
Subject: New Language

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Duchek, Michael

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Monday, January 28, 2019 3:28 PM
To: Duchek, Michael
Cc: Pulda, Matt; Forbes McIntosh (forbes@wis-gps.com); Burton Wagner
Subject: FW: From Duchek. Fwd: New Language

Hello Mike, WNA is in favor of Burt's response which is as follows: Gina-I think this should be added as a limitation on APRN practice in the statutes and does not need to be further defined by rule. If there is an incident and the APRN did not have a written transition plan the conduct would be subject to discipline. I don't think it is necessary for the Board to refine the concept. Second, I think we stay with the concept of "beyond the APRN's expertise" because "scope of Practice" is too broad. The scope of an APRN, eg an NP, is broader than an individual's expertise. Say an APRN-NP is confronted with a patient who has a psychiatric need and is not trained in that area, or an infectious disease the APRN has never seen, those are beyond their expertise, but not beyond the scope of an APRN. The transition of care plan should explain what the APRN will do whenever confronted with a problem beyond their individual expertise-need not identify what is beyond or within.

Thank you Mike. Please let me know if you have any other questions or concerns.
Gina



Gina Dennik-Champion, MSN, RN, MSHA
Executive Director
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Work phone: 608-221-0383 Ext. 202
Mobile: 608-228-3300
gina@wisconsinnurses.org



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From: Burt Wagner [mailto:bawagner@wisc.edu]
Sent: Friday, January 25, 2019 2:32 PM
To: Gina Dennik-Champion
Cc: Forbes McIntosh
Subject: Re: From Duchek. Fwd: New Language

Gina-I think this should be added as a limitation on APRN practice in the statutes and does not need to be further defined by rule. If there is an incident and the APRN did not have a written transition plan the conduct would be subject to discipline. I don't think it is necessary for the Board to refine the concept. Second, I think we stay with the concept of "beyond the APRN's expertise" because "scope of Practice" is too broad. The scope of an APRN, eg an NP, is broader than an individual's expertise. Say an APRN-NP is confronted with a patient who has a psychiatric need and is not trained in that area, or an infectious disease the APRN has never seen, those are beyond their expertise, but not beyond the scope of an APRN. The transition of care plan should

explain what the APRN will do whenever confronted with a problem beyond their individual expertise-need not identify what is beyond or within.

Also, you can forward this on to Mike as long as you believe this is the WNA position.

On Jan 24, 2019, at 1:39 PM, Gina Dennik-Champion <gina@wisconsinnurses.org> wrote:

Hi Burt- can you take a look at Mikes email and proposed language and let me know what you think?

Thanks

Gina

Gina Dennik-Champion

Begin forwarded message:

From: "Duchek, Michael" <Michael.Duchek@legis.wisconsin.gov>
Date: January 24, 2019 at 1:23:28 PM CST
To: Gina Dennik-Champion <gina@wisconsinnurses.org>
Cc: Forbes McIntosh <forbes@wis-gps.com>, "Pulda, Matt" <Matt.Pulda@legis.wisconsin.gov>
Subject: RE: New Language

Gina,

I guess the questions are 1) what is the requirement in the statute and 2) what is the board's role? If you want, the board could come up with rules to flush this out further, but if you think having language like what they sent is enough, it would just be a matter of having this requirement and then an APRN who the board determined was not in compliance would be subject to discipline under s. 441.07 (1g) (b). So, here is my attempt to translate the language from WHA into a statute. Let me know what you think, and again, if you think this is something the board should develop more detailed rules on, I could do that instead.

An advanced practice registered nurse who is working without an affiliation with an organization offering inpatient services shall maintain a written plan for the management of situations that are beyond the advanced practice registered nurse's expertise (should this be "scope of practice" instead of "expertise"?), including options for consultation and referral for the advanced practice registered nurse's patient population. Those options may not be limited to consultation or referral to a hospital emergency room.

-Mike

From: Gina Dennik-Champion <gina@wisconsinnurses.org>
Sent: Wednesday, January 23, 2019 6:32 PM
To: Duchek, Michael <Michael.Duchek@legis.wisconsin.gov>
Cc: Forbes McIntosh <forbes@wis-gps.com>; Pulda, Matt <Matt.Pulda@legis.wisconsin.gov>
Subject: Fwd: New Language

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Gina Dennik-Champion

Begin forwarded message:

From: Burt Wagner <bawagner@wisc.edu>

Date: January 23, 2019 at 4:35:51 PM CST

To: Gina Dennik-Champion <gina@wisconsinurses.org>, Forbes McIntosh <forbes@wis-gps.com>

Subject: New Language

Gina-I think adding the requirement for a written plan would be ok. This is a very small subset of APRN's who are not affiliated with an institution and Mike's concern will quickly be noted.