#### **Duchek, Michael**

From:

Duchek, Michael

Sent:

Friday, March 01, 2019 11:06 AM

To:

'WIANA President'

Cc:

Pulda, Matt

Subject:

RE: APRN LRB-0429/P5 from WIANA

My apologies for the delayed response – I like your revised language except that some professions' credentials may be called something other than a license (though AAs, nurses, and MDs are all called licenses), so I would just say "credential" the word "licensure." Anyway, I will put this through now as I can't imagine that would be an issue.

-Mike

From: WIANA President com>

Sent: Tuesday, February 26, 2019 9:20 PM

To: Duchek, Michael < Michael . Duchek@legis.wisconsin.gov>

Subject: Re: APRN LRB-0429/P5 from WIANA

Im truly appreciating your attention to detail here. You are correct that it does seem redundant to say"administers anesthetics and uses the term anesthetist". Our intent is to require the anesthesia provider to indicate licensure credentials only when <u>also</u> identifying as an anesthetist. I would not see the necessity to draw distinction between "administering anesthetics" & "providing anesthesia".

The method of identification would best be served through name badge as there can be incidences where verbal introductions may not be feasible such as an emergency or change in anesthesia personnel during an anesthesia case.

As far as moving this language into the Medical Board Chapter 448, as this is thoroughly a Nursing focused bill, I am inclined to keep it in Nursing Board Chapter 441. Our workgroup has upcoming meetings with the Board of Nursing in March and I can bring that point up for discussion.

"Anyone who uses the term "anesthetist" shall specify his or her credential for administering anesthetics, either verbally or by wearing a badge that identifies his or her licensure credential."

This language allows for transparency when identifying as an "anesthetist". Any additional thoughts on this wording?

Thank you.

On Tue, Feb 26, 2019 at 10:15 AM Duchek, Michael <Michael.Duchek@legis.wisconsin.gov> wrote:

Thank you Timothy for indulging me, and I'm sorry to get hung up on something that may be relatively minor, but just to be clear:

1. Could an AA say "Hi, I'm Tim Johnson and I'll be your anesthetist" as long as he has a badge on that says "anesthesiologist assistant"? Or would he have to also somehow verbally indicate his or her credential as well? To put it another way, it would be awkward for someone to be able to say "I'll be the anesthetist for your procedure" while having to then qualify that by then saying "... but just to be clear, I'm actually a licensed anesthesiologist assistant." So

my question is whether you would consider the badge to be sufficient in that case or not. If yes, then my suggested language would be as follows:

"Anyone who [administers anesthetics and] uses the term "anesthetist" shall specify his or her credential for administering anesthetics, either verbally or by wearing a badge that identifies his or her credential."

- 2. Is the bracketed language necessary? I'm not sure what it adds. To me it suggests that someone who does not administer anesthetics is free to call himself an anesthetist. I don't think that was your intent but I'm trying to figure out what it adds.
- 3. Again, just to be clear were you, in your language, drawing a distinction between "administering anesthetics" and "providing anesthesia" or were you just using different words to say the same thing? (our practice is to try to use the same phrasing consistently so that courts don't think the statute is drawing a distinction that wasn't intended)
- 4. Is there anyone this would implicate besides physicians, AAs, and CRNAs? (Since this language implicates more than just nurses, I am inclined to maybe put this language in ch. 448 instead of ch. 441)

-Mike

From: WIANA President <a href="mailto:president@wiana.com">president@wiana.com</a>>

Sent: Monday, February 25, 2019 9:37 PM

To: Duchek, Michael < Michael. Duchek@legis.wisconsin.gov >

Cc: Pulda, Matt < Matt.Pulda@legis.wisconsin.gov >; Jeremey Shepherd < jeremey@sgrwi.com >; Debra Dahlke

<<u>debradahlke@tds.net</u>>; <u>forbes@wis-gps.com</u> **Subject:** APRN LRB-0429/P5 from WIANA

#### Mr. Duchek....

Thank you for your patience in writing this important language. Having the title "anesthetist" be specific for CRNAs would certainly remove any possibility for confusion, however by definition anyone licensed to practice anesthesia can use the term anesthetist. Ex) Physician, AAs, CRNAs. In fact anesthesia providers in other countries routinely use "anesthetist" as the general term. Ultimately our legal team felt our attempt at title protection of "anesthetist" would be to restrictive and it is without precedent in other states. Still transparency in license title should attempt to be clarified.

Our proposed language of anyone administering		
required to clearly indicate his or her licensed of	<u>credential."</u> is intended to direct the anesth	esia
provider to clarify his/her license credentials.		
The way many CRNAs introduce themselves is	s: Tim Johnson. "Im a Nurse Anesthetist."	
We are looking for language that requires exac	ot verbal or written clarification of license.	
Perhaps language of : " anyone administering a required to specify his or her license in providir		<u>t" is</u>
credential identification.	ig an outlier and outlier and outlier	
Please contact me for further clarification if needed	l <b>.</b>	
Much Appreciated!		
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# State of Misconsin 2019 - 2020 LEGISLATURE

LRB-0429/25 MED&TJD:emw&kjf

## PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

AN ACT to repeal 50.01 (1b), 77.54 (14) (f) 3., 118.2925 (1) (b), 146.89 (1) (r) 3., 1 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, 441.19, 448.035 (1) (a) and 450.01 (1m); to renumber and 4 amend 253.13 (1), 255.06 (1) (d), 441.06 (7) and 441.11 (2); to amend 14.87 (title), 29.193 (1m) (a) 2. (intro.), 29.193 (2) (b) 2., 29.193 (2) (c) 3., 29.193 (2) (cd) 5 2. b., 29.193 (2) (cd) 2. c., 29.193 (2) (e), 29.193 (3) (a), 45.40 (1g) (a), 46.03 (44), 6 7 50.08 (2), 50.09 (1) (a) (intro.), 50.09 (1) (f) 1., 50.09 (1) (h), 50.09 (1) (k), 50.49 8 (1) (b) (intro.), 51.41 (1d) (b) 4., 70.47 (8) (intro.), 77.54 (14) (f) 4., 97.59, 102.13 9 (1) (a), 102.13 (1) (b) (intro.), 1., 3. and 4., 102.13 (1) (d) 1., 2., 3. and 4., 102.13 10 (2) (a), 102.13 (2) (b), 102.17 (1) (d) 1, and 2, 102.29 (3), 102.42 (2) (a), 106.30 11 (1), 118.15 (3) (a), 118.25 (1) (a), 118.29 (1) (e), 118.2925 (3), 118.2925 (4) (c), 12 118.2925 (5), 146.343 (1) (c), 146.82 (3) (a), 146.89 (1) (r) 1., 146.89 (1) (r) 8., 13 146.89 (6), 252.07 (8) (a) 2., 252.07 (9) (c), 252.10 (7), 252.11 (2), (4), (5), (7) and 14 (10), 252.15 (3m) (d) 11. b. and 13., (5g) (c), (5m) (d) 2. and (e) 2. and 3. and (7m) 15 (intro.) and (b), 252.16 (3) (c) (intro.), 252.17 (3) (c) (intro.), 253.07 (4) (d),

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

## Analysis by the Legislative Reference Bureau 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

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

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and requires anyone using the term "aresthetist"

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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. The bill requires an APRN to adhere to professional standards when managing situations that are beyond the advanced practice nurse's expertise.

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.

The bill repeals a provision concerning the ability of advanced practice nurses who are certified to issue prescription orders and who are required to work in collaboration with or under the supervision of a physician to obtain and practice under a federal waiver to dispense narcotic drugs to individuals for addiction treatment.

#### 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.

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:

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

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14.87 (title) Enhanced nurse Nurse licensure compact.

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

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

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

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

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

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

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

29.193 (2) (cd) 2. b. The person has a permanent substantial loss of function in one or both arms and fails to meet the minimum standards of the standard upper extremity pinch test, the standard grip test, or the standard nine-hole peg test, administered under the direction of a licensed physician, a licensed physician

assistant, a licensed chiropractor, or a certified <u>licensed</u> advanced practice <u>registere</u>
nurse <del>prescriber</del> .

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

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

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

29.193 (2) (e) Review of decisions. An applicant denied a permit under this subsection, except a permit under par. (c) 3., may obtain a review of that decision by a licensed physician, a licensed physician assistant, a licensed chiropractor, a licensed podiatrist, or a certified licensed advanced practice registered nurse prescriber designated by the department and with an office located in the department district in which the applicant resides. The department shall pay for the cost of a review under this paragraph unless the denied application on its face fails to meet the standards set forth in par. (c) 1. or 2. A review under this paragraph is the only method of review of a decision to deny a permit under this subsection and is not subject to further review under ch. 227.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

50.09 (1) (k) Be free from mental and physical abuse, and be free from chemical and physical restraints except as authorized in writing by a physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u> for a specified and limited period of time and documented in the resident's medical record. Physical restraints may be used in an emergency when necessary to protect the resident from

injury to himself or herself or others or to property. However, authorization for continuing use of the physical restraints shall be secured from a physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u> within 12 hours. Any use of physical restraints shall be noted in the resident's medical records. "Physical restraints" includes, but is not limited to, any article, device, or garment that interferes with the free movement of the resident and that the resident is unable to remove easily, and confinement in a locked room.

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

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

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

51.41 (1d) (b) 4. A psychiatric mental health advanced practice <u>registered</u> nurse who is suggested by the Milwaukee County board of supervisors. The Milwaukee County board of supervisors shall solicit suggestions from organizations including the Wisconsin Nurses Association for individuals who specialize in a full continuum of behavioral health and medical services including emergency detention, inpatient, residential, transitional, partial hospitalization, intensive outpatient, and wraparound community-based services. The Milwaukee County

board of supervisors shall suggest to the Milwaukee County executive 4 psychiatric
mental health advanced practice registered nurses for this board membership
position.

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

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

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

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

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

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

**97.59 Handling foods.** No person in charge of any public eating place or other establishment where food products to be consumed by others are handled may knowingly employ any person handling food products who has a disease in a form

that is communicable by food handling. If required by the local health officer or any officer of the department for the purposes of an investigation, any person who is employed in the handling of foods or is suspected of having a disease in a form that is communicable by food handling shall submit to an examination by the officer or by a physician, physician assistant, or advanced practice registered nurse prescriber designated by the officer. The expense of the examination, if any, shall be paid by the person examined. Any person knowingly infected with a disease in a form that is communicable by food handling who handles food products to be consumed by others and any persons knowingly employing or permitting such a person to handle food products to be consumed by others shall be punished as provided by s. 97.72.

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

102.13 (1) (a) Except as provided in sub. (4), whenever compensation is claimed by an employee, the employee shall, upon the written request of the employee's employer or worker's compensation insurer, submit to reasonable examinations by physicians, chiropractors, psychologists, dentists, physician assistants, advanced practice nurse prescribers registered nurses, or podiatrists provided and paid for by the employer or insurer. No employee who submits to an examination under this paragraph is a patient of the examining physician, chiropractor, psychologist, dentist, physician assistant, advanced practice registered nurse prescriber, or podiatrist for any purpose other than for the purpose of bringing an action under ch. 655, unless the employee specifically requests treatment from that physician, chiropractor, psychologist, dentist, physician assistant, advanced practice registered nurse prescriber, or podiatrist.

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

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

- 1. The proposed date, time, and place of the examination and the identity and area of specialization of the examining physician, chiropractor, psychologist, dentist, podiatrist, physician assistant, advanced practice <u>registered</u> nurse <del>prescriber</del>, or vocational expert.
- 3. The employee's right to have his or her physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse <del>prescriber</del>, or podiatrist present at the examination.
- 4. The employee's right to receive a copy of all reports of the examination that are prepared by the examining physician, chiropractor, psychologist, dentist, podiatrist, physician assistant, advanced practice registered nurse prescriber, or

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vocational expert immediately upon receipt of these reports by the employer or worker's compensation insurer.

**SECTION 25.** 102.13 (1) (d) 1., 2., 3. and 4. of the statutes are amended to read: 102.13 (1) (d) 1. Any physician, chiropractor, psychologist, dentist, podiatrist, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or vocational expert who is present at any examination under par. (a) or (am) may be required to testify as to the results of the examination.

- 2. Any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or podiatrist who attended a worker's compensation claimant for any condition or complaint reasonably related to the condition for which the claimant claims compensation may be required to testify before the division when the division so directs.
- 3. Notwithstanding any statutory provisions except par. (e), any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice registered nurse prescriber, or podiatrist attending a worker's compensation claimant for any condition or complaint reasonably related to the condition for which the claimant claims compensation may furnish to the employee, employer, worker's compensation insurer, department, or division information and reports relative to a compensation claim.
- 4. The testimony of any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or podiatrist who is licensed to practice where he or she resides or practices in any state and the testimony of any vocational expert may be received in evidence in compensation proceedings.

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

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

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

102.13 (2) (b) A physician, chiropractor, podiatrist, psychologist, dentist, physician assistant, advanced practice registered nurse prescriber, hospital, or health service provider shall furnish a legible, certified duplicate of the written material requested under par. (a) in paper format upon payment of the actual costs of preparing the certified duplicate, not to exceed the greater of 45 cents per page or \$7.50 per request, plus the actual costs of postage, or shall furnish a legible, certified duplicate of that material in electronic format upon payment of \$26 per request. Any person who refuses to provide certified duplicates of written material in the person's custody that is requested under par. (a) shall be liable for reasonable and necessary costs and, notwithstanding s. 814.04 (1), reasonable attorney fees incurred in enforcing the requester's right to the duplicates under par. (a).

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

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102.17 (1) (d) 1. The contents of certified medical and surgical reports by physicians, podiatrists, surgeons, dentists, psychologists, physician assistants, advanced practice nurse prescribers registered nurses, and chiropractors licensed in and practicing in this state, and of certified reports by experts concerning loss of earning capacity under s. 102.44 (2) and (3), presented by a party for compensation constitute prima facie evidence as to the matter contained in those reports, subject to any rules and limitations the division prescribes. Certified reports of physicians. podiatrists, surgeons, dentists, psychologists, physician assistants, advanced practice nurse prescribers registered nurses, and chiropractors, wherever licensed and practicing, who have examined or treated the claimant, and of experts, if the practitioner or expert consents to being subjected to cross-examination, also constitute prima facie evidence as to the matter contained in those reports. Certified reports of physicians, podiatrists, surgeons, psychologists, and chiropractors are admissible as evidence of the diagnosis, necessity of the treatment, and cause and extent of the disability. Certified reports by doctors of dentistry, physician assistants, and advanced practice nurse prescribers registered nurses are admissible as evidence of the diagnosis and necessity of treatment but not of the cause and extent of disability. Any physician, podiatrist, surgeon, dentist. psychologist, chiropractor, physician assistant, advanced practice registered nurse prescriber, or expert who knowingly makes a false statement of fact or opinion in a certified report may be fined or imprisoned, or both, under s. 943.395.

2. The record of a hospital or sanatorium in this state that is satisfactory to the division, established by certificate, affidavit, or testimony of the supervising officer of the hospital or sanatorium, any other person having charge of the record, or a physician, podiatrist, surgeon, dentist, psychologist, physician assistant, advanced

practice <u>registered</u> nurse <u>prescriber</u>, or chiropractor to be the record of the patient in question, and made in the regular course of examination or treatment of the patient, constitutes prima facie evidence as to the matter contained in the record, to the extent that the record is otherwise competent and relevant.

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

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

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

102.42 (2) (a) When the employer has notice of an injury and its relationship to the employment, the employer shall offer to the injured employee his or her choice of any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice registered nurse prescriber, or podiatrist licensed to practice and practicing in this state for treatment of the injury. By mutual agreement, the employee may have the choice of any qualified practitioner not licensed in this state. In case of emergency, the employer may arrange for treatment without tendering a choice. After the emergency has passed the employee shall be given his or her choice of attending practitioner at the earliest opportunity. The employee has the right to a 2nd choice of attending practitioner on notice to the employer or its insurance carrier. Any further choice shall be by mutual agreement. Partners and clinics are considered to be one practitioner. Treatment by a practitioner on referral from another practitioner is considered to be treatment by one practitioner.

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

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

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

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

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

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

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

	118.29	<b>(1)</b>	(e)	"Practitioner"	means	any	physician,	dentist,	optometrist,
phy	ysician ass	sista	ınt,	advanced practio	e <u>regist</u>	<u>ered</u>	nurse <del>presc</del>	riber <u>wit</u>	h prescribing
<u>aut</u>	thority, or	pod	iatri	ist licensed in ar	ny state.				

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

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

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

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

118.2925 (4) (c) Administer an epinephrine auto-injector to a pupil or other person who the school nurse or designated school personnel in good faith believes is experiencing anaphylaxis in accordance with a standing protocol from a physician, an advanced practice registered nurse prescriber who holds a permit to issue prescription orders under s. 441.09 (2), or a physician assistant, regardless of whether the pupil or other person has a prescription for an epinephrine auto-injector. If the pupil or other person does not have a prescription for an epinephrine auto-injector, or the person who administers the epinephrine auto-injector does not know whether the pupil or other person has a prescription for an epinephrine auto-injector, the person who administers the epinephrine auto-injector shall, as soon as practicable, report the administration by dialing the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.

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

118.2925 (5) Immunity from civil liability; exemption from practice of medicine. A school and its designated school personnel, and a physician, an advanced practice registered nurse prescriber who holds a permit to issue prescription orders under s. 441.09 (2), or a physician assistant who provides a prescription or standing protocol for school epinephrine auto-injectors, are not liable for any injury that results from the administration or self-administration of an epinephrine auto-injector under this section, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's physician, physician assistant, or advanced practice registered nurse prescriber, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. The immunity from liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48.

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

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

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

146.82 (3) (a) Notwithstanding sub. (1), a physician, physician assistant, as defined in s. 448.01 (6), or advanced practice registered nurse prescriber certified under s. 441.16 (2) licensed under s. 441.09 who treats a patient whose physical or mental condition in the physician's, physician assistant's, or advanced practice nurse prescriber's registered nurse's judgment affects the patient's ability to exercise reasonable and ordinary control over a motor vehicle may report the patient's name

1	and other information relevant to the condition to the department of transportation
2	without the informed consent of the patient.
3	Section 41. 146.89 (1) (r) 1. of the statutes is amended to read:
4	146.89 (1) (r) 1. Licensed as a physician under ch. 448, a dentist or dental
5	hygienist under ch. 447, a registered nurse, practical nurse, or nurse-midwife
6	advanced practice registered nurse under ch. 441, an optometrist under ch. 449, a
7	physician assistant under ch. 448, a pharmacist under ch. 450, a chiropractor under
8	ch. 446, a podiatrist under subch. IV of ch. 448, or a physical therapist under subch.
9	III of ch. 448.
10	<b>Section 42.</b> 146.89 (1) (r) 3. of the statutes is repealed.
11	SECTION 43. 146.89 (1) (r) 8. of the statutes is amended to read:
12	146.89 (1) (r) 8. An advanced practice registered nurse who has holds a
13	certificate permit to issue prescription orders under s. 441.16 441.09 (2).
14	SECTION 44. 146.89 (6) of the statutes is amended to read:
15	146.89 (6) (a) While serving as a volunteer health care provider under this
16	section, an advanced practice <u>registered</u> nurse who <u>has holds</u> a <u>certificate permit</u> to
17	issue prescription orders under s. 441.16 441.09 (2) is considered to meet the
18	requirements of s. 655.23, if required to comply with s. 655.23.
19	(b) While serving as a volunteer health care provider under this section, an
20	advanced practice registered nurse who has holds a certificate permit to issue
21	prescription orders under s. 441.16 441.09 (2) is not required to maintain in effect
22	malpractice insurance.
23	SECTION 45. 252.01 (1c) of the statutes is repealed.
24	SECTION 46. 252.07 (8) (a) 2. of the statutes is amended to read:

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

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

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

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

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

**SECTION 49.** 252.11 (2), (4), (5), (7) and (10) of the statutes are amended to read:

252.11 (2) An officer of the department or a local health officer having knowledge of any reported or reasonably suspected case or contact of a sexually transmitted disease for which no appropriate treatment is being administered, or of an actual contact of a reported case or potential contact of a reasonably suspected case, shall investigate or cause the case or contact to be investigated as necessary. If, following a request of an officer of the department or a local health officer, a person

reasonably suspected of being infected with a sexually transmitted disease refuses or neglects examination by a physician, physician assistant, or advanced practice registered nurse prescriber or treatment, an officer of the department or a local health officer may proceed to have the person committed under sub. (5) to an institution or system of care for examination, treatment, or observation.

- (4) If a person infected with a sexually transmitted disease ceases or refuses treatment before reaching what in a physician's, physician assistant's, or advanced practice nurse prescriber's registered nurse's opinion is the noncommunicable stage, the physician, physician assistant, or advanced practice registered nurse prescriber shall notify the department. The department shall without delay take the necessary steps to have the person committed for treatment or observation under sub. (5), or shall notify the local health officer to take these steps.
- (5) Any court of record may commit a person infected with a sexually transmitted disease to any institution or may require the person to undergo a system of care for examination, treatment, or observation if the person ceases or refuses examination, treatment, or observation under the supervision of a physician, physician assistant, or advanced practice registered nurse prescriber. The court shall summon the person to appear on a date at least 48 hours, but not more than 96 hours, after service if an officer of the department or a local health officer petitions the court and states the facts authorizing commitment. If the person fails to appear or fails to accept commitment without reasonable cause, the court may cite the person for contempt. The court may issue a warrant and may direct the sheriff, any constable, or any police officer of the county immediately to arrest the person and bring the person to court if the court finds that a summons will be ineffectual. The court shall hear the matter of commitment summarily. Commitment under this

subsection continues until the disease is no longer communicable or until other provisions are made for treatment that satisfy the department. The certificate of the petitioning officer is prima facie evidence that the disease is no longer communicable or that satisfactory provisions for treatment have been made.

- (7) Reports, examinations and inspections, and all records concerning sexually transmitted diseases are confidential and not open to public inspection, and may not be divulged except as may be necessary for the preservation of the public health, in the course of commitment proceedings under sub. (5), or as provided under s. 938.296 (4) or 968.38 (4). If a physician, physician assistant, or advanced practice registered nurse prescriber has reported a case of sexually transmitted disease to the department under sub. (4), information regarding the presence of the disease and treatment is not privileged when the patient, physician, physician assistant, or advanced practice registered nurse prescriber is called upon to testify to the facts before any court of record.
- (10) The state laboratory of hygiene shall examine specimens for the diagnosis of sexually transmitted diseases for any physician, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or local health officer in the state, and shall report the positive results of the examinations to the local health officer and to the department. All laboratories performing tests for sexually transmitted diseases shall report all positive results to the local health officer and to the department, with the name of the physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u> to whom reported.

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

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

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

(5g) (c) Aphysician, physician assistant, or advanced practice registered nurse prescriber, based on information provided to the physician, physician assistant, or advanced practice registered nurse prescriber, determines and certifies in writing that the person has had contact that constitutes a significant exposure. The certification shall accompany the request for HIV testing and disclosure. If the person is a physician, physician assistant, or advanced practice registered nurse prescriber, he or she may not make this determination or certification. The information that is provided to a physician, physician assistant, or advanced practice registered nurse prescriber to document the occurrence of the contact that constitutes a significant exposure and the physician's, physician assistant's, or advanced practice nurse prescriber's registered nurse's certification that the person has had contact that constitutes a significant exposure, shall be provided on a report

- form that is developed by the department of safety and professional services under s. 101.02 (19) (a) or on a report form that the department of safety and professional services determines, under s. 101.02 (19) (b), is substantially equivalent to the report form that is developed under s. 101.02 (19) (a).
- (5m) (d) 2. A physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, based on information provided to the physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, determines and certifies in writing that the contact under subd. 1. constitutes a significant exposure. Ahealth care provider who has a contact under subd. 1. c. may not make the certification under this subdivision for himself or herself.
- (e) 2. If the contact occurs as provided under par. (d) 1. b., the attending physician, physician assistant, or advanced practice <u>registered</u> nurse <del>prescriber</del> of the funeral director, coroner, medical examiner, or appointed assistant.
- 3. If the contact occurs as provided under par. (d) 1. c., the physician, physician assistant, or advanced practice <u>registered</u> nurse <del>prescriber</del> who makes the certification under par. (d) 2.
- (7m) Reporting of Persons significantly exposed. (intro.) If a positive, validated HIV test result is obtained from a test subject, the test subject's physician, physician assistant, or advanced practice registered nurse prescriber who maintains a record of the HIV test result under sub. (4) (c) may report to the state epidemiologist the name of any person known to the physician, physician assistant, or advanced practice registered nurse prescriber to have had contact with body fluid of the test subject that constitutes a significant exposure, only after the physician, physician assistant, or advanced practice registered nurse prescriber has done all of the following:

1	(b) Notified the HIV test subject that the name of any person known to the
2	physician, physician assistant, or advanced practice registered nurse prescriber to
3	have had contact with body fluid of the test subject that constitutes a significant
4	exposure will be reported to the state epidemiologist.
5	Section 51. 252.16 (3) (c) (intro.) of the statutes is amended to read:
6	252.16 (3) (c) (intro.) Has submitted to the department a certification from a
7.	physician, as defined in s. 448.01 (5), physician assistant, or advanced practice
8.	registered nurse prescriber of all of the following:
9	Section 52. 252.17 (3) (c) (intro.) of the statutes is amended to read:
10	252.17 (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 53. 253.07 (4) (d) of the statutes is amended to read:
14	253.07 (4) (d) In each fiscal year, \$31,500 as grants for employment in
15	communities of licensed registered nurses, licensed practical nurses, certified
16	$\underline{\text{nurse-midwives}}\underline{\text{licensed advanced practice}}\underline{\text{registered nurses}}, \text{or licensed physician}$
17	assistants who are members of a racial minority.
18	Section 54. 253.115 (1) (f) of the statutes is created to read:
19	253.115 (1) (f) "Nurse-midwife" means an individual who is licensed as an
20	advanced practice registered nurse and possesses a certified nurse-midwife
21	specialty designation under s. 441.09.
22	SECTION 55. 253.115 (4) of the statutes is amended to read:
23	253.115 (4) Screening required. Except as provided in sub. (6), the physician,
24	nurse-midwife licensed under s. 441.15, or certified professional midwife licensed
25	under s. 440.982 who attended the birth shall ensure that the infant is screened for

1	hearing loss before being discharged from a hospital, or within 30 days of birth if the
2	infant was not born in a hospital.
3	Section 56. 253.115 (7) (a) (intro.) of the statutes is amended to read:
. 4	253.115 (7) (a) (intro.) The physician, nurse-midwife licensed under s. 441.15,
5	or certified professional midwife licensed under s. 440.982 who is required to ensure
6	that the infant is screened for hearing loss under sub. (4) shall do all of the following:
7	SECTION 57. 253.13 (1) of the statutes is renumbered 253.13 (1) (b) and
8	amended to read:
9	253.13 (1) (b) The attending physician or nurse licensed under s. 441.15
10	nurse-midwife shall cause every infant born in each hospital or maternity home,
11	prior to its discharge therefrom, to be subjected to tests for congenital and metabolic
12	disorders, as specified in rules promulgated by the department. If the infant is born
13	elsewhere than in a hospital or maternity home, the attending physician, nurse
14	licensed under s. 441.15 nurse-midwife, or birth attendant who attended the birth
15	shall cause the infant, within one week of birth, to be subjected to these tests.
16	Section 58. 253.13 (1) (a) of the statutes is created to read:
17	253.13 (1) (a) In this subsection, "nurse-midwife" means an individual who is
18	licensed as an advanced practice registered nurse and possesses a certified
19	nurse-midwife specialty designation under s. 441.09.
20	Section 59. 253.15 (1) (em) of the statutes is created to read:
21	253.15 (1) (em) "Nurse-midwife" means an individual who is licensed as an
22	advanced practice registered nurse and possesses a certified nurse-midwife
23	specialty designation under s. 441.09.

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

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253.15 (2) Informational materials. The board shall purchase or prepare or
arrange with a nonprofit organization to prepare printed and audiovisual materials
relating to shaken baby syndrome and impacted babies. The materials shall include
information regarding the identification and prevention of shaken baby syndrome
and impacted babies, the grave effects of shaking or throwing on an infant or young
child, appropriate ways to manage crying, fussing, or other causes that can lead a
person to shake or throw an infant or young child, and a discussion of ways to reduce
the risks that can lead a person to shake or throw an infant or young child. The
materials shall be prepared in English, Spanish, and other languages spoken by a
significant number of state residents, as determined by the board. The board shall
make those written and audiovisual materials available to all hospitals, maternity
homes, and nurse-midwives licensed under s. 441.15 that are required to provide or
make available materials to parents under sub. (3) (a) 1., to the department and to
all county departments and nonprofit organizations that are required to provide the
materials to child care providers under sub. (4) (d), and to all school boards and
nonprofit organizations that are permitted to provide the materials to pupils in one
of grades $5$ to $8$ and in one of grades $10$ to $12$ under sub. $(5)$ . The board shall also make
those written materials available to all county departments and Indian tribes that
are providing home visitation services under s. 48.983 (4) (b) 1. and to all providers
of prenatal, postpartum, and young child care coordination services under s. 49.45
(44). The board may make available the materials required under this subsection
to be made available by making those materials available at no charge on the board's
Internet site.

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

1	255.06 (1) (f) (intro.) "Nurse practitioner" (Women's health nurse clinician'
2	means a any of the following:
3	1. A registered nurse who is licensed under ch. 441 or who holds a multistate
4	license, as defined in s. $441.51(2)(h)$ , issued in a party state, as defined in s. $441.51$
5	(2) (k), and whose practice of professional nursing under s. 441.001 (4) includes
6	performance of delegated medical services under the supervision of a physician,
7	dentist, or podiatrist, or advanced practice registered nurse.
8	Section 62. 255.06 (1) (f) 2. of the statutes is created to read:
9	255.06 (1) (f) 2. An advanced practice registered nurse.
10	Section 63. 255.06 (2) (d) of the statutes is amended to read:
11	255.06 (2) (d) Specialized training for rural colposcopic examinations and
12	activities. Provide not more than \$25,000 in each fiscal year as reimbursement for
13	the provision of specialized training of nurse practitioners women's health nurse
14	clinicians to perform, in rural areas, colposcopic examinations and follow-up
15	activities for the treatment of cervical cancer.
16	Section 64. 255.07 (1) (d) of the statutes is amended to read:
17	255.07 (1) (d) "Health care practitioner" means a physician, a physician
18	assistant licensed under s. 448.04 (1) (f), or an advanced practice registered nurse
19	who is certified <u>holds a permit</u> to issue prescription orders under s. $441.16 \pm 441.09$ (2).
20	Section 65. 257.01 (5) (a) and (b) of the statutes are amended to read:
21	257.01 (5) (a) An individual who is licensed as a physician, a physician
22	assistant, or a podiatrist under ch. 448, licensed as a registered nurse, licensed
23	practical nurse, or nurse-midwife advanced practice registered nurse under ch. 441,
24	licensed as a dentist under ch. 447, licensed as a pharmacist under ch. 450, licensed

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as a veterinarian or certified as a veterinary technician under ch. 89, or certified as a respiratory care practitioner under ch. 448.

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

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

341.14 (1a) If any resident of this state, who is registering or has registered an automobile, or a motor truck, dual purpose motor home or dual purpose farm truck which has a gross weight of not more than 8,000 pounds, a farm truck which has a gross weight of not more than 12,000 pounds or a motor home, submits a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal certifying to the department that the resident is a person with a disability that limits or impairs the ability to walk, the department shall procure, issue and deliver to the disabled

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person plates of a special design in lieu of plates which ordinarily would be issued for the vehicle, and shall renew the plates. The plates shall be so designed as to readily apprise law enforcement officers of the fact that the vehicle is owned by a nonveteran disabled person and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee shall be made for the issuance or renewal of such plates.

(1e) (a) If any resident of this state, who is registering or has registered a motorcycle, submits a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, from a Christian Science practitioner residing in this state and listed in the Christian Science journal, or from the U.S. department of veterans affairs certifying to the department that the resident is a person with a disability that limits or impairs the ability to walk, the department shall procure, issue and deliver to the disabled person a plate of a special design in lieu of the plate which ordinarily would be issued for the motorcycle, and shall renew the plate. The statement shall state whether the disability is permanent or temporary and, if temporary, the opinion of the physician. advanced practice registered nurse, public health nurse, physician assistant. podiatrist, chiropractor, practitioner, or U.S. department of veterans affairs as to the duration of the disability. The plate shall be so designed as to readily apprise law enforcement officers of the fact that the motorcycle is owned by a disabled person and

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is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee may be made for the issuance or renewal of the plate.

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

(1q) If any employer who provides an automobile, or a motor truck, dual purpose motor home or dual purpose farm truck which has a gross weight of not more than 8,000 pounds, a farm truck which has a gross weight of not more than 12,000

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pounds or a motor home, for an employee's use submits to the department a statement once every 4 years, as determined by the department, from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal certifying that the employee is a person with a disability that limits or impairs the ability to walk, the department shall issue and deliver to such employer plates of a special design in lieu of the plates which ordinarily would be issued for the vehicle. and shall renew the plates. The plates shall be so designed as to readily apprise law enforcement officers of the fact that the vehicle is operated by a disabled person and is entitled to the parking privileges specified in s. 346.50 (2a). No charge in addition to the registration fee may be made for the issuance or renewal of the plates. The plates shall conform to the plates required in sub. (1a).

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

343.16 (5) (a) The secretary may require any applicant for a license or any licensed operator to submit to a special examination by such persons or agencies as the secretary may direct to determine incompetency, physical or mental disability, disease, or any other condition that might prevent such applicant or licensed person from exercising reasonable and ordinary control over a motor vehicle. If the department requires the applicant to submit to an examination, the applicant shall pay for the examination. If the department receives an application for a renewal or duplicate license after voluntary surrender under s. 343.265 or receives a report from

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

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

343.51 (1) Any person who qualifies for registration plates of a special design under s. 341.14 (1), (1a), (1m), or (1q) or any other person with a disability that limits or impairs the ability to walk may request from the department a special identification card that will entitle any motor vehicle parked by, or under the direction of, the person, or a motor vehicle operated by or on behalf of the organization when used to transport such a person, to parking privileges under s. 346.50 (2), (2a), and (3). The department shall issue the card at a fee to be determined by the department, upon submission by the applicant, if the applicant is an

individual rather than an organization, of a statement from a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a public health nurse certified or licensed to practice in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, or from a Christian Science practitioner residing in this state and listed in the Christian Science journal that the person is a person with a disability that limits or impairs the ability to walk. The statement shall state whether the disability is permanent or temporary and, if temporary, the opinion of the physician, advanced practice registered nurse, public health nurse, physician assistant, podiatrist, chiropractor, or practitioner as to the duration of the disability. The department shall issue the card upon application by an organization on a form prescribed by the department if the department believes that the organization meets the requirements under this subsection.

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

343.62 (4) (a) 4. The applicant submits with the application a statement completed within the immediately preceding 24 months, except as provided by rule, by a physician licensed to practice medicine in any state, from an advanced practice registered nurse licensed to practice nursing in any state, from a physician assistant licensed or certified to practice in any state, from a podiatrist licensed to practice in any state, from a chiropractor licensed to practice chiropractic in any state, or from a Christian Science practitioner residing in this state, and listed in the Christian Science journal certifying that, in the medical care provider's judgment, the applicant is physically fit to teach driving.

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

1	440.03 (13) (b) 3. Advanced practice registered nurse prescriber permitted to
2	issue prescription orders.
3	SECTION 71. 440.03 (13) (b) 39m. of the statutes is created to read:
4	440.03 (13) (b) 39m. Nurse, advanced practice registered.
5	<b>SECTION 72.</b> 440.03 (13) (b) 42. of the statutes is repealed.
6	SECTION 73. 440.08 (2) (a) 4m. of the statutes is amended to read:
7	440.08 (2) (a) 4m. Advanced practice registered nurse prescriber: October
8	permitted to issue prescription orders: March 1 of each even-numbered year.
9	SECTION 74. 440.08 (2) (a) 47. of the statutes is created to read:
10	440.08 (2) (a) 47. Nurse, advanced practice registered: March 1 of each
11	even-numbered year.
12	<b>SECTION 75.</b> 440.08 (2) (a) 50. of the statutes is repealed.
13	SECTION 76. 440.981 (1) of the statutes is amended to read:
14	440.981 (1) No person may use the title "licensed midwife," describe or imply
15	that he or she is a licensed midwife, or represent himself or herself as a licensed
16	midwife unless the person is granted a license under this subchapter or is licensed
17	as a nurse-midwife under s. 441.15 an advanced practice registered nurse and
18	possesses a certified nurse-midwife specialty designation under s. 441.09.
19	SECTION 77. 440.982 (1) of the statutes is amended to read:
20	440.982 (1) No person may engage in the practice of midwifery unless the
21	person is granted a license under this subchapter, is granted a temporary permit
22	pursuant to a rule promulgated under s. $440.984$ (2m), or is licensed as $-a$
23	nurse-midwife under s. 441.15 an advanced practice registered nurse and possesses
24	a certified nurse-midwife specialty designation under s. 441.09.
25	SECTION 78. 440.987 (2) of the statutes is amended to read:

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

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

441.001 (1c) Advanced practice registered nursing" means the advanced practice of nursing in one of the 4 recognized roles based on advanced clinical knowledge and skills focusing on direct care of individuals, greater responsibility, autonomy, and accountability for the provision of care, health promotion and maintenance, including prescribing pharmacological agents and therapeutics, and management of patient conditions.

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

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

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

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

- (a) Certified nurse-midwife.
- (b) Certified registered nurse anesthetist.

(c) Clinical nurse specialist.
(d) Nurse practitioner.
SECTION 82. 441.01 (3) of the statutes is amended to read:
441.01 (3) The board may promulgate rules to establish minimum standards
for schools for professional nurses and, schools for licensed practical nurses, and
schools for advanced practice registered nurses, including all related clinical units
and facilities, and make and provide periodic surveys and consultations to such
schools. It The board may also establish promulgate rules to prevent unauthorized
persons from practicing professional nursing. It shall approve all rules for the
administration of this chapter in accordance with ch. 227.
<b>Section 83.</b> 441.01 (4) of the statutes is amended to read:
441.01 (4) The board shall direct that those schools that qualify be placed on
a list of schools the board has approved for professional nurses or, of schools the board
has approved for licensed practical nurses, or of schools the board has approved for
advanced practice registered nurses on application and proof of qualifications;, and
the board shall make a study of nursing education and initiate promulgate rules and
policies to improve it.
SECTION 84. 441.01 (7) (a) (intro.) of the statutes is amended to read:
441.01 (7) (a) (intro.) The board shall require each applicant for the renewal
of a registered nurse or, licensed practical nurse, or advanced practice registered
license issued under this chapter to do all of the following as a condition for renewing
the license:
<b>Section 85.</b> 441.01 (7) (b) of the statutes is amended to read:
441.01 (7) (b) The board may not renew a registered nurse or, licensed practical

nurse, or advanced practice registered license under this chapter unless the renewal

applicant has completed the nursing workforce survey to the satisfaction of the
board. The board shall establish standards to determine whether the survey has
been completed. The board shall, by no later than June 30 of each odd-numbered
year, submit all completed nursing workforce survey forms to the department of
workforce development.

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

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

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

441.06 (title) Registered nurses; civil liability exemption.

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

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

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

441.06 (4) Except as provided in s. 257.03, no person may practice or attempt to practice professional nursing, nor use the title, letters, or anything else to indicate that he or she is a registered or professional nurse unless he or she is licensed under this section. Except as provided in s. 257.03, no person not so licensed may use in connection with his or her nursing employment or vocation any title or anything else to indicate that he or she is a trained, certified or graduate nurse. This subsection

1	does not apply to any registered nurse who holds a multistate license, as defined in
2	s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the
3	enhanced nurse licensure compact under s. 441.51.
4 ,	SECTION 90. 441.06 (7) of the statutes is renumbered 441.09 (7) and amended
5	to read:
6	441.09 (7) CIVIL LIABILITY. No person certified licensed as an advanced practice
7	registered nurse prescriber under s. 441.16 (2) this section is liable for civil damages
8	for any of the following:
9	(a) Reporting in good faith to the department of transportation under s. $146.82$
10	(3) a patient's name and other information relevant to a physical or mental condition
11	of the patient that in the advanced practice nurse prescriber's registered nurse's
12	judgment impairs the patient's ability to exercise reasonable and ordinary control
13	over a motor vehicle.
14	(b) In good faith, not reporting to the department of transportation under s
15	146.82 (3) a patient's name and other information relevant to a physical or mental
<b>16</b>	condition of the patient that in the advanced practice nurse prescriber's registered
17	nurse's judgment does not impair the patient's ability to exercise reasonable and
18	ordinary control over a motor vehicle.
19	Section 91. 441.07 (1g) (intro.), (a), (c) and (e) of the statutes are amended to
20	read:
21	441.07 (1g) (intro.) Subject to the rules promulgated under s. 440.03 (1), the
22	board may deny an initial license or revoke, limit, suspend, or deny the renewal of
23	a license of a registered nurse, nurse-midwife advanced practice registered nurse,
24	or licensed practical nurse; deny an initial certificate permit to issue prescription

orders under s. 441.09 (2) or revoke, limit, suspend, or deny the renewal of a

	certificate permit to prescribe drugs or devices granted under s. 441.16 issue
	prescription orders; or reprimand a registered nurse, nurse-midwife advanced
•	practice registered nurse, or licensed practical nurse, if the board finds that the
	applicant or licensee committed any of the following:
	(a) Fraud in the procuring or renewal of the certificate permit or license.
	(c) Acts which that show the registered nurse, nurse-midwife advanced
	practice registered nurse, or licensed practical nurse to be unfit or incompetent by
	reason of negligence, abuse of alcohol or other drugs, or mental incompetency.
	(e) A violation of any state or federal law that regulates prescribing or
	dispensing drugs or devices, if the person has holds a certificate permit to prescribe
	drugs or devices under s. 441.16 issue prescription orders under s. 441.09 (2).
	SECTION 92. 441.09 of the statutes is created to read:
	441.09 Advanced practice registered nurses; civil liability exemption
	(1) LICENSE. (a) An applicant who satisfies all of the following requirements may
	apply to the board for initial licensure by the board as an advanced practice
	registered nurse:
	1. The applicant satisfies one of the following criteria:
	a. The applicant holds a valid license to practice as a registered nurse issued
	under s. 441.06 (1), (1c), or (1m).
	b. The applicant applies concurrently for a license under s. 441.06 (1), (1c), or
	(1m) with the application for a license under this nevernent
	(1m) with the application for a license under this paragraph.
	c. The applicant is a registered nurse who holds a multistate license, as defined

	2.	The applicant provides evidence satisfactory to the board that he or she
sa	tisfies	one of the following criteria:
	a.	The applicant has completed a graduate-level or postgraduate-level

- education program that is approved by the board and that prepares the applicant for the practice of advanced practice registered nursing in one of the 4 recognized roles, and the applicant holds a current certification by a national certifying body approved by the board.
- b. On January 1, 2017, the applicant was licensed as a registered nurse in this state and was practicing in a recognized role, and the applicant satisfies additional criteria established by the board by rule under this subd. 2. b. relating to practice, education, or certification.
  - 3. The applicant pays the fee specified under s. 440.05 (1).
- 4. The applicant provides evidence of any malpractice liability insurance coverage required under sub. (5).
- 5. If the applicant is applying to receive a certified nurse-midwife specialty designation under par. (c) 1. a., the applicant provides evidence satisfactory to the board that the applicant is currently certified by a national certifying body approved by the board.
- 6. The applicant does not have an arrest or conviction record, subject to ss. 111.321, 111.322, and 111.335.
- 7. The applicant meets any other criteria established by the board by rule relating to the education, training, or experience required for each recognized role.
- (b) An applicant who satisfies the requirements established by the board under sub. (6) (c) may, concurrently with his or her application for an advanced practice registered nurse under par. (a) and upon payment of the additional fee required for

- the permit under sub. (2) (b) 3., apply for a permit to issue prescription orders under sub. (2).
  - (c) 1. Subject to subd. 3. and s. 441.07 (1g), the board shall grant an advanced practice registered nurse license to an applicant the board determines meets the requirements under par. (a). The board shall also grant a person who is granted a license all of the following:
  - a. One or more specialty designations corresponding to the recognized roles for which the board determines that the person qualifies based on the person's qualifications under par. (a).
  - b. A permit to issue prescription orders under sub. (2), if the applicant applies for a permit under par. (b) and the board determines the applicant satisfies the requirements under sub. (6) (c).
  - 2. Each specialty designation granted under subd. 1. a. shall appear on the person's advanced practice registered nurse license.
  - 3. The board may not grant an advanced practice registered nurse license to a person applying concurrently for a license under s. 441.06 (1), (1c), or (1m), unless the board also grants the person the license under s. 441.06 (1), (1c), or (1m).
  - 4. The board may place specific limitations on a person licensed as an advanced practice registered nurse as a condition of licensure.
  - (d) On or before the applicable renewal date specified under s. 440.08 (2) (a), an advanced practice registered nurse shall submit to the board on a form furnished by the board a statement giving his or her name and residence, the nursing workforce survey and fee required under s. 441.01 (7), evidence of having satisfied the continuing education requirements under sub. (4), evidence of any malpractice liability insurance coverage required under sub. (5), current evidence that the person

satisfies each of the requirements under par. (a) 1., 2., 5., and 7. that apply with
respect to the  person, and  any  other  information  that  the  board  requires  by  rule,  with
the applicable renewal fee determined by the department under s. $440.03(9)(a)$ . The
board shall grant to a person who satisfies the requirements under this paragraph
the renewal of his or her advanced practice registered nurse license and specialty
designations granted under par. (c) 1. a. and shall, if the person holds a license under
s. 441.06 (1), (1c), or (1m), also grant the renewal of that license.

- (2) PERMIT TO ISSUE PRESCRIPTION ORDERS. (a) In this subsection, "prescription order" has the meaning given in s. 450.01 (21).
- (b) Subject to s. 441.07 (1g), the board shall grant a permit to issue prescription orders to an applicant who satisfies all of the following:
- 1. The applicant is licensed as an advanced practice registered nurse under sub. (1) or the applicant applies for the permit under sub. (1) (b) concurrently with his or her application for a license under sub. (1) (a) and is granted the license under sub. (1) (c).
- 2. The applicant meets the additional requirements for granting the permit established by the board under sub. (6) (c).
  - 3. The applicant pays the fee specified under s. 440.05 (1).
- (c) On or before the applicable renewal date specified under s. 440.08 (2) (a), a person issued a permit under par. (b) shall submit to the board on a form furnished by the board a statement giving his or her name and residence and any other information that the board requires by rule with the applicable renewal fee determined by the department under s. 440.03 (9) (a). The board shall grant to a person who satisfies the requirements under this paragraph the renewal of his or her permit to issue prescription orders.

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(d) An advanced practice registered nurse who holds a permit under the	nis
subsection may issue prescription orders, subject to the rules promulgated und	.er
sub. (6) (a) and (d), and may provide expedited partner therapy in the mann	.er
described in s. 448.035.	

- (3) PRACTICE; TITLES. (a) 1. The holder of a license issued under this section is an "advanced practice registered nurse," may append to his or her name the title "A.P.R.N.," and is authorized to practice advanced practice registered nursing.
- 2. The holder of a specialty designation for a recognized role granted under sub.

  (1) (c) 1. a. may append to his or her name the title and an abbreviation corresponding to that recognized role.
- (b) 1. Except as provided in par. (d) and s. 257.03, no person may practice or attempt to practice advanced practice registered nursing, nor use the title "advanced practice registered nurse," the title "A.P.R.N.," or anything else to indicate that he or she is an advanced practice registered nurse unless he or she is licensed under this section.
  - 2. Except as provided in s. 257.03, no person may do any of the following:
- a. Use the title "certified nurse-midwife," the title "C.N.M.," or anything else to indicate that he or she is a certified nurse-midwife unless he or she has been granted a certified nurse-midwife specialty designation under sub. (1) (c) 1. a.
- b. Use the title "certified registered nurse anesthetist," the title "anesthetist," the title "C.R.N.A.," or anything else to indicate that he or she is a certified registered nurse anesthetist unless he or she has been granted a certified registered nurse anesthetist specialty designation under sub. (1) (c) 1. a.

Any person who uses the term "anesthetist" shall specify his or her credential for administering anesthetics, either verbally or by meaning a badge that identifies his or her credential,

- c. Use the title "clinical nurse specialist," the title "C.N.S.," or anything else to indicate that he or she is a clinical nurse specialist unless he or she has been granted a clinical nurse specialist specialty designation under sub. (1) (c) 1. a.
- d. Use the title "nurse practitioner," the title "N.P.," or anything else to indicate that he or she is a nurse practitioner unless he or she has been granted a nurse practitioner specialty designation under sub. (1) (c) 1. a.
- (c) An advanced practice registered nurse shall adhere to professional standards when managing situations that are beyond the advanced practice nurse's expertise.
- (d) An advanced practice registered nurse licensed under this section may delegate a task or order to another clinically trained health care worker if the task or order is within the scope of the advanced practice registered nurse's practice, the advanced practice registered nurse is competent to perform the task or issue the order, and the advanced practice registered nurse has reasonable evidence that the health care worker is minimally competent to perform the task or issue the order under the circumstances.
- (4) CONTINUING EDUCATION. Every advanced practice registered nurse shall submit to the board evidence of having completed at least 16 contact hours per biennium in clinical pharmacology or therapeutics relevant to the advanced practice registered nurse's area of practice. The board may promulgate rules regarding the continuing education requirements under this subsection.
- (5) Malpractice liability insurance. Except for a person whose employer has in effect malpractice liability insurance that provides coverage for the person in the amounts specified under s. 655.23 (4), no person may practice advanced practice registered nursing unless he or she at all times has in effect malpractice liability

- insurance coverage in the minimum amounts required by the rules of the board. An advanced practice registered nurse shall submit evidence of that coverage to the board when applying for an initial license under this section or a renewal of a license under this section. An advanced practice registered nurse shall also submit such evidence to the board upon request of the board.
- (6) Rules. The board shall promulgate rules necessary to administer this section, including rules for all of the following:
- (a) Further defining the scope of practice of an advanced practice registered nurse, defining the scope of practice for each recognized role, and defining the scope of practice within which an advanced practice registered nurse who holds a permit issued under sub. (2) may issue prescription orders.
- (b) Determining acceptable national certification for purposes of sub. (1) (a) 2. a.
- (c) Establishing the appropriate education, training, or experience requirements that a registered nurse must satisfy to be an advanced practice registered nurse and to qualify to be granted a permit to issue prescription orders under sub. (2).
- (d) Specifying the classes of drugs, individual drugs, or devices that may not be prescribed by an advanced practice registered nurse who holds a permit to issue prescription orders under sub. (2).
  - (e) Specifying the conditions to be met for registered nurses to do the following:
  - 1. Administer a drug prescribed by an advanced practice registered nurse.
  - 2. Administer a drug at the direction of an advanced practice registered nurse.
- (f) Establishing the minimum amount of malpractice liability insurance coverage that an advanced practice registered nurse must at all times have in effect

for purposes of sub. (5). The board shall promulgate rules under this paragraph in
consultation with the commissioner of insurance.
<b>Section 93.</b> 441.10 (7) of the statutes is amended to read:
441.10 (7) No license is required for practical nursing, but, except as provided
in s. 257.03, no person without a license may hold himself or herself out as a licensed
practical nurse or licensed attendant, use the title or letters "Trained Practical
Nurse" or "T.P.N.", "Licensed Practical Nurse" or "L.P.N.", "Licensed Attendant" or
"L.A.", "Trained Attendant" or "T.A.", or otherwise seek to indicate that he or she is
a licensed practical nurse or licensed attendant. No licensed practical nurse or
licensed attendant may use the title, or otherwise seek to act as a registered, licensed,
graduate or professional nurse. Anyone violating this subsection shall be subject to
the penalties prescribed by s. 441.13. The board shall grant without examination a
license as a licensed practical nurse to any person who was on July 1, 1949, a licensed
attendant. This subsection does not apply to any licensed practical nurse who holds
a multistate license, as defined in s. $441.51(2)(h)$ , issued by a jurisdiction, other than
this state, that has adopted the enhanced nurse licensure compact under s. 441.51.
SECTION 94. 441.11 (title) of the statutes is repealed.
SECTION 05 441 11 (1) of the statutes is repealed

18 Section 95. 441.11 (1) of the statutes is repealed.

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

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

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

**Section 98.** 441.15 of the statutes is repealed.

1	SECTION 99. 441.16 of the statutes is repealed.
2	Section 100. 441.18 (2) (a) (intro.) of the statutes is amended to read:
3	441.18 (2) (a) (intro.) An advanced practice registered nurse certified who holds
4	a permit to issue prescription orders under s. 441.16 441.09 (2) may do any of the
5	following:
6	SECTION 101. 441.18 (2) (b) of the statutes is amended to read:
7	441.18 (2) (b) An advanced practice registered nurse who prescribes or delivers
8	an opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid
9	antagonist is prescribed has or has the capacity to provide the knowledge and
10	training necessary to safely administer the opioid antagonist to an individua
11	undergoing an opioid-related overdose and that the person demonstrates the
12	capacity to ensure that any individual to whom the person further delivers the opioic
13	antagonist has or receives that knowledge and training.
14	SECTION 102. 441.18 (3) of the statutes is amended to read:
15	441.18 (3) An advanced practice registered nurse who, acting in good faith
16	prescribes or delivers an opioid antagonist in accordance with sub. (2), or who, acting
17	in good faith, otherwise lawfully prescribes or dispenses an opioid antagonist, shall
18	be immune from criminal or civil liability and may not be subject to professional
19	discipline under s. 441.07 for any outcomes resulting from prescribing, delivering
20	or dispensing the opioid antagonist.
21	SECTION 103. 441.19 of the statutes is repealed.
22	SECTION 104. Subchapter II (title) of chapter 441 [precedes 441.51] of the
23	statutes is amended to read:
24	CHAPTER 441
25	SUBCHAPTER II

## ENHANCED NURSE LICENSURE COMPACT

**Section 105.** 441.51 (title) of the statutes is amended to read:

441.51 (title) Enhanced nurse Nurse licensure compact.

**Section 106.** 448.03 (2) (a) of the statutes is amended to read:

448.03 (2) (a) Any person lawfully practicing within the scope of a license, permit, registration, certificate or certification granted to practice midwifery under subch. XIII of ch. 440, to practice professional or, practical, or advanced practice registered nursing or nurse-midwifery under ch. 441, to practice chiropractic under ch. 446, to practice dentistry or dental hygiene under ch. 447, to practice optometry under ch. 449, to practice acupuncture under ch. 451 or under any other statutory provision, or as otherwise provided by statute.

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

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

448.035 (2) Notwithstanding the requirements of s. 448.30, a physician, a physician assistant, or certified an advanced practice registered nurse prescriber who holds a permit to issue prescription orders under s. 441.09 (2) may provide expedited partner therapy if the patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The physician, physician assistant, or certified advanced practice registered nurse prescriber shall attempt to obtain the name of the patient's sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient's sexual partner, if known. If the physician, physician assistant, or certified advanced practice registered nurse

- prescriber is unable to obtain the name of the patient's sexual partner, the prescription order shall include, in ordinary bold-faced capital letters, the words, "expedited partner therapy" or the letters "EPT."
- (3) The physician, physician assistant, or eertified advanced practice registered nurse prescriber shall provide the patient with a copy of the information sheet prepared by the department of health services under s. 46.03 (44) and shall request that the patient give the information sheet to the person with whom the patient had sexual contact.
- (4) (a) Except as provided in par. (b), a physician, physician assistant, or certified advanced practice registered nurse prescriber is immune from civil liability for injury to or the death of a person who takes any antimicrobial drug if the antimicrobial drug is prescribed, dispensed, or furnished under this section and if expedited partner therapy is provided as specified under this section.
- (b) The immunity under par. (a) does not extend to the donation, distribution, furnishing, or dispensing of an antimicrobial drug by a physician, physician assistant, or certified advanced practice registered nurse prescriber whose act or omission involves reckless, wanton, or intentional misconduct.

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

448.56 (1) Written referral. Except as provided in this subsection and s. 448.52, a person may practice physical therapy only upon the written referral of a physician, physician assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse prescriber certified under s. 441.16 (2). Written referral is not required if a physical therapist provides services in schools to children with disabilities, as defined in s. 115.76 (5), pursuant to rules promulgated by the department of public instruction; provides services as part of a home health care

agency; provides services to a patient in a nursing home pursuant to the patient's plan of care; provides services related to athletic activities, conditioning, or injury prevention; or provides services to an individual for a previously diagnosed medical condition after informing the individual's physician, physician assistant, chiropractor, dentist, podiatrist, or advanced practice registered nurse prescriber certified under s. 441.16 (2) who made the diagnosis. The examining board may promulgate rules establishing additional services that are excepted from the written referral requirements of this subsection.

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

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

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

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

448.67 (2) Separate billing required. Except as provided in sub. (4), a licensee who renders any podiatric service or assistance, or gives any podiatric advice or any similar advice or assistance, to any patient, podiatrist, physician, physician assistant, advanced practice registered nurse prescriber certified under s. 441.16 (2), partnership, or corporation, or to any other institution or organization, including a

hospital, for which a charge is made to a patient, shall, except as authorized by
Title 18 or Title 19 of the federal Social Security Act, render an individual statement
or account of the charge directly to the patient, distinct and separate from any
statement or account by any other podiatrist, physician, physician assistant,
advanced practice registered nurse prescriber, or other person.
SECTION 112. 448.956 (1m) of the statutes is amended to read:
448.956 (1m) Subject to sub. (1) (a), a licensee may provide athletic training
to an individual without a referral, except that a licensee may not provide athletic
training as described under s. 448.95 (5) (d) or (e) in an outpatient rehabilitation
setting unless the licensee has obtained a written referral for the individual from a
practitioner licensed or certified under subch. II, III, IV, V, or VII of this chapter;
under ch. 446; or under s. 441.16 (2) 441.09.
Section 113. 450.01 (1m) of the statutes is repealed.
Section 114. 450.01 (16) (h) 2. of the statutes is amended to read:
450.01 (16) (h) 2. The patient's advanced practice registered nurse prescriber,
if the advanced practice registered nurse prescriber has entered into a written
agreement to collaborate with a physician holds a permit to issue prescription orders
<u>under s. 441.09 (2)</u> .
Section 115. 450.01 (16) (hr) 2. of the statutes is amended to read:
450.01 (16) (hr) 2. An advanced practice <u>registered</u> nurse <u>prescriber who holds</u>
a permit to issue prescription orders under s. 441.09 (2).
SECTION 116. 450.03 (1) (e) of the statutes is amended to read:
450.03 (1) (e) Any person lawfully practicing within the scope of a license,
permit, registration, certificate, or certification granted to provide home medical
oxygen under s. 450.076, to practice professional er, practical, or advanced practice

registered nursing or nurse-midwifery under ch. 441, to practice dentistry or dental
hygiene under ch. 447, to practice medicine and surgery under ch. 448, to practice
optometry under ch. 449 or to practice veterinary medicine under ch. 89, or as
otherwise provided by statute.

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

450.11 (1i) (a) 1. A pharmacist may, upon and in accordance with the prescription order of an advanced practice registered nurse prescriber under s. 441.18 (2) (a) 1., or of a physician or physician assistant under s. 448.037 (2) (a) 1., that complies with the requirements of sub. (1), deliver an opioid antagonist to a person specified in the prescription order and may, upon and in accordance with the standing order of an advanced practice registered nurse prescriber under s. 441.18 (2) (a) 2., or of a physician or physician assistant under s. 448.037 (2) (a) 2., that complies with the requirements of sub. (1), deliver an opioid antagonist to an individual in accordance with the order. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the delivery of a prescription to the person to whom the opioid antagonist is delivered.

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

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

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

450.11 (7) (b) Information communicated to a physician, physician assistant, or advanced practice <u>registered</u> nurse <del>prescriber</del> in an effort to procure unlawfully a prescription drug or the administration of a prescription drug is not a privileged communication.

1 **Section 120.** 450.11 (8) (e) of the statutes is amended to read: 2 450.11 (8) (e) The board of nursing, insofar as this section applies to advanced 3 practice nurse prescribers registered nurses. 4 **Section 121.** 450.13 (5) (b) of the statutes is amended to read: 450.13 (5) (b) The patient's advanced practice registered nurse prescriber, if the 5 6 advanced practice registered nurse prescriber has entered into a written agreement 7 to collaborate with a physician holds a permit to issue prescription orders under s. 8 441.09(2). 9 **Section 122.** 450.135 (7) (b) of the statutes is amended to read: 10 450.135 (7) (b) The patient's advanced practice registered nurse prescriber, if 11 the advanced practice registered nurse prescriber has entered into a written 12 agreement to collaborate with a physician holds a permit to issue prescription orders 13 under s. 441.09 (2). 14 **Section 123.** 462.04 of the statutes is amended to read: 15 462.04 Prescription or order required. A person who holds a license or 16 limited X-ray machine operator permit under this chapter may not use diagnostic 17 X-ray equipment on humans for diagnostic purposes unless authorized to do so by 18 prescription or order of a physician licensed under s. 448.04 (1) (a), a dentist licensed 19 under s. 447.04 (1), a podiatrist licensed under s. 448.63, a chiropractor licensed 20 under s. 446.02, an advanced practice registered nurse certified licensed under s. 441.16(2) 441.09, a physician assistant licensed under s. 448.04(1)(f), or, subject to 21 22 s. 448.56 (7) (a), a physical therapist licensed under s. 448.53. 23 **Section 124.** 655.001 (7t) of the statutes is amended to read: 655.001 (7t) "Health care practitioner" means a health care professional, as 24 defined in s. 180.1901 (1m), who is an employee of a health care provider described 25

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1	in s. $655.002(1)(d)$ , (e), (em), or (f) and who has the authority to provide health care
2	services that are not in collaboration with a physician under s. 441.15 (2) (b) or under
3	the direction and supervision of a physician or nurse anesthetist.
4	SECTION 125. 655.001 (9) of the statutes is amended to read:
5	655.001 (9) "Nurse anesthetist" means <u>a nurse an individual</u> who is licensed
6	under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued
7	in a party state, as defined in s. 441.51 (2) (k), and who is certified as a nurse
8	anesthetist by the American association of nurse anesthetists as an advanced
9	practice registered nurse and possesses a certified registered nurse anesthetist
10	specialty designation under s. 441.09.
11	<b>Section 126.</b> 655.005 (2) (a) of the statutes is amended to read:
12	655.005 (2) (a) An employee of a health care provider if the employee is a
13	physician or a nurse anesthetist or is a health care practitioner who is providing
14	health care services that are not in collaboration with a physician under s. 441.15 (2)
15	(b) or under the direction and supervision of a physician or nurse anesthetist.
16	Section 127. 961.01 (19) (a) of the statutes is amended to read:
17	961.01 (19) (a) A physician, advanced practice registered nurse, dentist,
18	veterinarian, podiatrist, optometrist, scientific investigator or, subject to s. 448.21
19	(3), a physician assistant, or other person licensed, registered, certified or otherwise
20	permitted to distribute, dispense, conduct research with respect to, administer or use
21	in teaching or chemical analysis a controlled substance in the course of professional
22	practice or research in this state.
23	Section 128. 961.395 of the statutes is amended to read:

961.395 Limitation on advanced practice <u>registered</u> nurses. (1) An advanced practice <u>registered</u> nurse who is <u>certified</u> holds a <u>permit to issue</u>

- prescription orders under s. 441.16 441.09 (2) may prescribe controlled substances only as permitted by the rules promulgated under s. 441.16 (3) 441.09 (6) (d).
  - (2) An advanced practice <u>registered</u> nurse <u>certified under s. 441.16</u> who holds a permit to issue prescription orders under s. 441.09 (2) shall include with each prescription order the <u>advanced practice nurse prescriber certification permit</u> number issued to him or her by the board of nursing.
  - (3) An advanced practice <u>registered</u> nurse <u>certified under s. 441.16 who holds</u> a <u>permit to issue prescription orders under s. 441.09 (2)</u> may dispense a controlled substance only by prescribing or administering the controlled substance or as otherwise permitted by the rules promulgated under s. 441.16 (3) 441.09 (6) (d).

## Section 129. Nonstatutory provisions.

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

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

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