AN ACT to repeal 50.01 (1b), 77.54 (14) (f) 3., 118.2925 (1) (b), 146.89 (1) (r) 3.,

252.01 (1c), 440.03 (13) (b) 3., 440.03 (13) (b) 42., 440.08 (2) (a) 4m., 440.08 (2)

(a) 50., 441.11 (title), 441.11 (1), 441.11 (3), 441.15, 441.16, 441.19, 448.035 (1)

(a) and 450.01 (1m); to renumber and 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) 2. b., 29.193 (2) (cd) 2. c., 29.193 (2) (e),

29.193 (3) (a), 45.40 (1g) (a), 46.03 (44), 50.08 (2), 50.09 (1) (a) (intro.), 50.09 (1)

(f) 1., 50.09 (1) (h), 50.09 (1) (k), 50.49 (1) (b) (intro.), 51.41 (1d) (b) 4., 70.47 (8)

(intro.), 77.54 (14) (f) 4., 97.95, 102.13 (1) (a), 102.13 (1) (b) (intro.), 1., 3. and 4.,

102.13 (1) (d) 1., 2., 3. and 4., 102.13 (2) (a), 102.13 (2) (b), 102.17 (1) (d) 1. and

2., 102.29 (3), 102.42 (2) (a), 106.30 (1), 118.15 (3) (a), 118.25 (1) (a), 118.29 (1)

(e), 118.2925 (3), 118.2925 (4) (c), 118.2925 (5), 146.343 (1) (c), 146.82 (3) (a),

146.89 (1) (r) 1., 146.89 (1) (r) 8., 146.89 (6), 154.01 (1g), 252.07 (8) (a) 2., 252.07

(9) (c), 252.10 (7), 252.11 (2), (4), (5), (7) and (10), 252.15 (3m) (d) 11. b. and 13.,
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(5g) (c), (5m) (d) 2. and (e) 2. and 3. and (7m) (intro.) and (b), 252.16 (3) (c)
(intro.), 252.17 (3) (c) (intro.), 253.07 (4) (d), 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., 440.094 (1) (c) 1.,
440.094 (2) (a) (intro.), 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 (1g) (b),
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 46.03 (44), 50.08 (2), 70.47 (8) (intro.),
146.82 (3) (a), 146.89 (1) (r) 1., 155.01 (1g) (b), 255.07 (1) (d), 343.16 (5) (a),
441.06 (title), 448.03 (2) (a), 448.035 (2), (3) and (4), 448.956 (1m), 450.11 (1g)
(b), 450.11 (1i) (a) 1., 462.04 and 961.01 (19) (a); 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 (3c), 441.001 (3g), 441.001 (3n),
441.001 (3r), 441.001 (3w), 441.001 (5), 441.01 (7) (c), 441.09 and 441.092 of the
statutes; relating to: advanced practice registered nurses, extending the time
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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 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, 2019, 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 bill also, however, automatically grants licenses to certain RNs, as further described below. 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 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 APRN’s expertise.
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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 is licensed as a nurse-midwife under current law is automatically granted an APRN license with a certified nurse-midwife specialty designation. The bill otherwise allows nurse-midwives to be licensed as APRNs if they satisfy the licensure requirements, except that the bill also requires that a person applying for a certified nurse-midwife specialty designation be certified by the American Midwifery Certification Board. The bill also requires APRNs with a specialty designation as a certified nurse-midwife to file and keep current with DSPS a plan for involving a hospital or physician in treating certain patients if the APRN practices outside of a hospital.

**Prescribing authority**

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 generally authorizes APRNs to issue prescription orders. A person who is certified to issue prescription orders under current law is automatically granted an APRN license with his or her appropriate specialty designation. RNs who were practicing in a recognized role on January 1, 2019, but who did not hold a certificate to issue prescription orders on that date and who are granted an APRN license under the bill may not issue prescription orders. As under current law, an APRN issuing prescription orders 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, including various terminology changes and technical changes relating to the Nurse Licensure Compact.
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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:

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 licensed advanced practice registered nurse prescriber.

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 certified licensed advanced practice registered nurse prescriber.

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 certified licensed advanced practice
registered nurse prescriber 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 may 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 may issue prescription orders under s. 441.09 (2) providing expedited partner
therapy to that patient under s. 441.092 or 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. 46.03 (44) of the statutes, as affected by 2021 Wisconsin Acts 23
and .... (this act), is repealed and recreated 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,
physician assistant, or an advanced practice registered nurse who may issue
prescription orders under s. 441.09 (2) providing expedited partner therapy to that
patient under s. 441.092, 448.035, or 448.9725. 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 12. 50.01 (1b) of the statutes is repealed.

SECTION 13. 50.08 (2) of the statutes is amended to read:

50.08 (2) A physician, an advanced practice registered nurse prescriber
certified who may 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 14. 50.08 (2) of the statutes, as affected by 2021 Wisconsin Acts 23 and
.... (this act), is repealed and recreated to read:

50.08 (2) A physician, an advanced practice registered nurse who may issue
prescription orders under s. 441.09 (2), or a physician assistant, 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 15.** 50.09 (1) (a) (intro.) of the statutes is amended to read:

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 16.** 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 registered nurse prescriber in the resident’s medical record.

**SECTION 17.** 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 18.** 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 registered nurse prescriber 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 registered nurse prescriber 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 19. 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 registered nurse prescriber, 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 registered nurse prescriber 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 20. 51.41 (1d) (b) 4. of the statutes is amended to read:

51.41 (1d) (b) 4. A psychiatric mental health advanced practice registered 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 21. 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 22. 70.47 (8) (intro.) of the statutes, as affected by 2021 Wisconsin Acts
23 and .... (this act), is repealed and recreated 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, physician assistant, or advanced practice registered nurse 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 23.** 77.54 (14) (f) 3. of the statutes is repealed.

**SECTION 24.** 77.54 (14) (f) 4. of the statutes is amended to read:

77.54 (14) (f) 4. An advanced practice registered nurse who may issue prescription orders under s. 441.09 (2).

**SECTION 25.** 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 26. 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 27. 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
practice registered nurse prescriber, 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 registered nurse prescriber, or
vocational expert.

3. The employee’s right to have his or her physician, chiropractor, psychologist,
dentist, physician assistant, advanced practice registered nurse prescriber, 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
vocational expert immediately upon receipt of these reports by the employer or
worker’s compensation insurer.

SECTION 28. 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 registered nurse prescriber, 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 registered nurse prescriber, 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 registered nurse prescriber, 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 29. 102.13 (2) (a) of the statutes, as affected by 2021 Wisconsin Act 29, is amended to read:

102.13 (2) (a) An employee who reports an injury alleged to be work-related or files an application 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. If the request is by a representative of a worker’s compensation insurer for a billing statement, the physician, chiropractor, psychologist, dentist, podiatrist, physician assistant, advanced practice registered nurse prescriber, hospital, or health care provider shall, within 30 days after receiving the request, provide that person with a complete copy of an itemized billing statement or a billing statement in a standard billing format recognized by the federal government.

SECTION 30. 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 31. 102.17 (1) (d) 1. and 2. of the statutes are amended to read:

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 registered nurse prescriber, 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 32. 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 registered nurse prescriber, or podiatrist for malpractice.

SECTION 33. 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 34. 106.30 (1) of the statutes is amended to read:

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 35. 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 36. 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 37. 118.29 (1) (e) of the statutes is amended to read:

118.29 (1) (e) “Practitioner” means any physician, dentist, optometrist,
physician assistant, advanced practice registered nurse prescriber with prescribing
authority, or podiatrist licensed in any state.

SECTION 38. 118.2925 (1) (b) of the statutes is repealed.
SECTION 39. 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 may 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 40. 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 may 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 41. 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 may 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 42. 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 43. 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
and other information relevant to the condition to the department of transportation
without the informed consent of the patient.

SECTION 44. 146.82 (3) (a) of the statutes, as affected by 2021 Wisconsin Acts
23 and .... (this act), is repealed and recreated to read:
146.82 (3) (a) Notwithstanding sub. (1), a physician, a physician assistant, or
an advanced practice registered nurse licensed under s. 441.09 who treats a patient
whose physical or mental condition in the physician’s, physician assistant’s, or
advanced practice 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
and other information relevant to the condition to the department of transportation
without the informed consent of the patient.

**SECTION 45.** 146.89 (1) (r) 1. of the statutes is amended to read:

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

**SECTION 46.** 146.89 (1) (r) 1. of the statutes, as affected by 2021 Wisconsin Acts
23 and .... (this act), is repealed and recreated to read:

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

**SECTION 47.** 146.89 (1) (r) 3. of the statutes is repealed.

**SECTION 48.** 146.89 (1) (r) 8. of the statutes is amended to read:
146.89 (1) (r) 8. An advanced practice registered nurse who has a certificate to
may issue prescription orders under s. 441.16 441.09 (2).

SECTION 49. 146.89 (6) of the statutes is amended to read:

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

(b) While serving as a volunteer health care provider under this section, an
advanced practice registered nurse who has a certificate to may issue prescription
orders under s. 441.16 441.09 (2) is not required to maintain in effect malpractice
insurance.

SECTION 50. 154.01 (1g) of the statutes is amended to read:

154.01 (1g) “Advanced practice registered nurse” means a nurse an individual
licensed under ch. 441 who is currently certified by a national certifying body
approved by the board of nursing as a nurse practitioner, certified nurse-midwife,
certified registered nurse anesthetist, or clinical nurse specialist s. 441.09.

SECTION 51. 155.01 (1g) (b) of the statutes is repealed and recreated to read:

155.01 (1g) (b) An individual who is licensed as an advanced practice registered
nurse and possesses a nurse practitioner specialty designation under s. 441.09.

SECTION 52. 252.01 (1c) of the statutes is repealed.

SECTION 53. 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 54. 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 55. 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 may issue prescription orders under s. 441.09 (2).

SECTION 56. 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 registered nurse prescriber, 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 registered nurse prescriber to whom reported.

SECTION 57. 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) 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 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 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 contact under subd. 1. constitutes a significant exposure. A health
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 registered nurse prescriber 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 registered nurse prescriber 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:

(b) Notified the HIV test subject that 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 will be reported to the state epidemiologist.

SECTION 58. 252.16 (3) (c) (intro.) of the statutes is amended to read:

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

SECTION 59. 252.17 (3) (c) (intro.) of the statutes is amended to read:

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

SECTION 60. 253.07 (4) (d) of the statutes is amended to read:

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

SECTION 61. 253.115 (1) (f) of the statutes is created to read:

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

SECTION 62. 253.115 (4) of the statutes is amended to read:

253.115 (4) SCREENING REQUIRED. Except as provided in sub. (6), the physician,
nurse-midwife licensed under s. 441.15, or certified professional midwife licensed
under s. 440.982 who attended the birth shall ensure that the infant is screened for
hearing loss before being discharged from a hospital, or within 30 days of birth if the
infant was not born in a hospital.
SECTION 63. 253.115 (7) (a) (intro.) of the statutes is amended to read:

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

SECTION 64. 253.13 (1) of the statutes is renumbered 253.13 (1) (b) and amended to read:

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

SECTION 65. 253.13 (1) (a) of the statutes is created to read:

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

SECTION 66. 253.15 (1) (em) of the statutes is created to read:

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

SECTION 67. 253.15 (2) of the statutes is amended to read:

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 68.** 255.06 (1) (d) of the statutes is renumbered 255.06 (1) (f) (intro.) and amended to read:

255.06 (1) (f) (intro.) “Nurse practitioner” “Women’s health nurse clinician” means any of the following:
A registered nurse who is licensed under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued in a party state, as defined in s. 441.51 (2) (k), and whose practice of professional nursing under s. 441.001 (4) includes performance of delegated medical services under the supervision of a physician, dentist, or podiatrist, or advanced practice registered nurse.

SECTION 69. 255.06 (1) (f) 2. of the statutes is created to read:
255.06 (1) (f) 2. An advanced practice registered nurse.

SECTION 70. 255.06 (2) (d) of the statutes is amended to read:
255.06 (2) (d) Specialized training for rural colposcopic examinations and activities. Provide not more than $25,000 in each fiscal year as reimbursement for the provision of specialized training of nurse practitioners, women’s health nurse clinicians, to perform, in rural areas, colposcopic examinations and follow-up activities for the treatment of cervical cancer.

SECTION 71. 255.07 (1) (d) of the statutes is amended to read:
255.07 (1) (d) “Health care practitioner” means a physician, a physician assistant licensed under s. 448.04 (1) (f), or an advanced practice registered nurse who is certified to may issue prescription orders under s. 441.16 441.09 (2).

SECTION 72. 255.07 (1) (d) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), is repealed and recreated to read:
255.07 (1) (d) “Health care practitioner” means a physician, a physician assistant, or an advanced practice registered nurse who may issue prescription orders under s. 441.09 (2).

SECTION 73. 257.01 (5) (a) and (b) of the statutes are amended to read:
257.01 (5) (a) An individual who is 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 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.

(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, nurse-midwife, advanced practice registered nurse under ch. 441, licensed as a nurse-midwife under ch. 441, 2019 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 74. 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
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
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 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 75. 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
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 76. 343.16 (5) (a) of the statutes, as affected by 2021 Wisconsin Acts
23 and .... (this act), is repealed and recreated 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
a physician, physician assistant, advanced practice registered nurse 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 77. 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 78.** 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 79. 440.03 (13) (b) 3. of the statutes is repealed.

SECTION 80. 440.03 (13) (b) 39m. of the statutes is created to read:

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

SECTION 81. 440.03 (13) (b) 42. of the statutes is repealed.

SECTION 82. 440.08 (2) (a) 4m. of the statutes is repealed.

SECTION 83. 440.08 (2) (a) 47. of the statutes is created to read:

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

SECTION 84. 440.08 (2) (a) 50. of the statutes is repealed.

SECTION 85. 440.094 (1) (c) 1. of the statutes, as created by 2021 Wisconsin Act 10, is amended to read:

440.094 (1) (c) 1. A registered nurse, licensed practical nurse, or nurse midwife licensed under ch. 441, or an advanced practice registered nurse prescriber certified licensed under ch. 441.

SECTION 86. 440.094 (2) (a) (intro.) of the statutes, as created by 2021 Wisconsin Act 10, is amended to read:

440.094 (2) (a) (intro.) Notwithstanding ss. 441.06 (4), 441.15 (2), 441.16, 441.09 (3) (b), 446.02 (1), 447.03 (1) and (2), 448.03 (1) (a), (b), and (c) and (1m), 448.51 (1), 448.61, 448.76, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 455.02 (1m), 457.04 (4), (5), (6), and (7), 459.02 (1), 459.24 (1), and 460.02, a health care provider may provide services within the scope of the credential that the health care provider holds and the department shall grant the health care provider a temporary credential to practice under this section if all of the following apply:

SECTION 87. 440.981 (1) of the statutes is amended to read:
440.981 (1) No person may use the title “licensed midwife,” describe or imply that he or she is a licensed midwife, or represent himself or herself as a licensed midwife unless the person is granted a license under this subchapter or 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.

Section 88. 440.982 (1) of the statutes is amended to read:

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

Section 89. 440.987 (2) of the statutes is amended to read:

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 90. 441.001 (1c) of the statutes is created to read:

441.001 (1c) Advanced practice registered nursing. “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 91. 441.001 (1m) of the statutes is created to read:
441.001 (m) 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 92. 441.001 (3c) of the statutes is created to read:

441.001 (3c) Practice of a certified nurse-midwife. "Practice of a certified nurse-midwife" means practice in the management of women's health care, pregnancy, childbirth, postpartum care for newborns, family planning, and gynecological services consistent with the standards of practice of the American College of Nurse-Midwives or its successor.

SECTION 93. 441.001 (3g) of the statutes is created to read:

441.001 (3g) Practice of a certified registered nurse anesthetist. "Practice of a certified registered nurse anesthetist" means providing anesthesia care, pain management care, and care related to anesthesia and pain management for persons across their lifespan, whose health status may range from healthy through all levels of acuity, including persons with immediate, severe, or life-threatening illness or injury, in diverse settings, including hospitals, ambulatory surgery centers, outpatient clinics, medical offices, and home health care settings.

SECTION 94. 441.001 (3n) of the statutes is created to read:

441.001 (3n) Practice of a clinical nurse specialist. "Practice of a clinical nurse specialist" means providing advanced nursing care, primarily in health care
facilities, including the diagnosis and treatment of illness for identified specific populations based on a specialty.

**SECTION 95.** 441.001 (3r) of the statutes is created to read:

441.001 (3r) **Practice of a Nurse Practitioner.** “Practice of a nurse practitioner” means practice in ambulatory, acute, and long-term care settings as a primary and specialty care provider who assesses, diagnoses, treats, and manages acute, episodic, and chronic illnesses.

**SECTION 96.** 441.001 (3w) of the statutes is created to read:

441.001 (3w) **Prescription Order.** “Prescription order” has the meaning given in s. 450.01 (21).

**SECTION 97.** 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 98.** 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 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.
SECTION 99. 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 100. 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 nurse license issued under this chapter to do all of the following as a condition for renewing the license:

SECTION 101. 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 nurse 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 102. 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) (c) is only required to pay a single fee under par. (a) 2.

SECTION 103. 441.06 (title) of the statutes is repealed and recreated to read:
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441.06 (title) Registered nurses; civil liability exemption.

SECTION 104. 441.06 (3) of the statutes is amended to read:

441.06 (3) Except as provided in s. 441.09 (1) (c), 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 105. 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 does not apply to any registered 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 106. 441.06 (7) of the statutes is renumbered 441.09 (7) and amended to read:

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

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

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

SECTION 107. 441.07 (1g) (intro.), (a), (c) and (e) of the statutes are amended to read:

441.07 (1g) (intro.) Subject to the rules promulgated under s. 440.03 (1), the board may deny an initial license or revoke, limit, suspend, or deny the renewal of a license of a registered nurse, nurse-midwife, advanced practice registered nurse, or licensed practical nurse; deny an initial certificate or revoke, limit, suspend, or deny the renewal of a certificate to prescribe drugs or devices granted under s. 441.16; 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 or license.

(c) Acts which 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 a certificate to prescribe drugs or devices under s. 441.16 may issue prescription orders under s. 441.09 (2).
SECTION 108. 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 paragraph.
   c. The applicant is a registered 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 nurse licensure compact.

2. The applicant provides evidence satisfactory to the board that he or she satisfies 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, 2019, 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 sub. (6) (c) 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. (b) 1., the applicant provides evidence satisfactory to the board that the applicant is currently certified by the American Midwifery Certification Board or its successor.

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 under sub. (6) (c) relating to the education, training, or experience required for each recognized role.

(b) 1. a. 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 under this subd. 1. 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. The board shall grant an advanced practice registered nurse license to each individual who, on the day before the effective date of this subd. 1. b. .... [LRB inserts date], was certified to issue prescription orders under s. 441.16, 2019 stats. The board shall also grant a person who is granted a license under this subd. 1. b. 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.

c. The board shall grant an advanced practice registered nurse license to each individual who, on the day before the effective date of this subd. 1. c. .... [LRB inserts
date], was licensed as a nurse-midwife under s. 441.15, 2019 stats. The board shall also grant a person who is granted a license under this subd. 1. c. a nurse-midwife specialty designation.

2. Each specialty designation granted under subd. 1. 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.

5. If all of the following apply to a person, a notation indicating that the person may not issue prescription orders shall appear on the person’s advanced practice registered nurse license:

   a. The person is granted an advanced practice registered nurse license under subd. 1. a. and satisfies only par. (a) 2. b. but not par. (a) 2. a., or the person is granted an advanced practice registered nurse license under subd. 1. c.

   b. On January 1, 2019, the person did not hold a certificate under s. 441.16 (2), 2019 Stats.

   (c) 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. (b) 1. and shall, if the person holds a license under
s. 441.06 (1), (1c), or (1m), also grant the renewal of that license.

(2) Prescribing Authority. (a) Except as provided in par. (b), an advanced
practice registered nurse may issue prescription orders, subject to the rules
promulgated under sub. (6) (a) and (d), and may provide expedited partner therapy
in the manner described in s. 441.092.

(b) An advanced practice registered nurse may not issue prescription orders if
a notation under sub. (1) (b) 5. indicating that the advanced practice registered nurse
may not issue prescription orders appears on the advanced practice registered
nurse’s license.

(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) (b) 1. 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) (b) 1.
   b. Use the title “certified registered nurse 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) (b) 1.
   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) (b) 1.
   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) (b) 1.

   (c) An advanced practice registered nurse shall adhere to professional standards when managing situations that are beyond the advanced practice registered nurse’s expertise. If a particular patient’s needs are beyond the advanced practice registered nurse’s expertise, the advanced practice registered nurse shall consult or collaborate with another health care provider or refer the patient to another health care provider, as warranted by the patient’s needs.

   (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.

(e) If an advanced practice registered nurse with a certified nurse-midwife specialty designation under sub. (1) (b) 1. practices outside of a hospital setting, the advanced practice registered nurse shall file and keep current with the department a proactive plan for involving a hospital or a physician who has admitting privileges at a hospital in the treatment of patients with higher acuity or emergency care needs that exceed the advanced practice registered nurse’s scope of practice.

(f) Nothing in this section prohibits an employer, hospital, or other entity with a relationship with an advanced practice registered nurse from establishing employment practice requirements on the advanced practice registered nurse as a condition of employment.

(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.

(5m) Nurse anesthetists. (b) Opt-out of federal certified registered nurse
anesthetist supervision requirement. 1. The legislature finds that allowing certified
registered nurse anesthetists to administer anesthesia without supervision or
direction from an operating practitioner, physician, or anesthesiologist increases
access to quality anesthesia services throughout the state and is in the best interests
of the citizens of the state.

2. The state, including the governor, the board, and the medical examining
board, shall act to maintain an opt-out of the federal requirement for physician
supervision of certified registered nurse anesthetists pursuant to 42 CFR 482.52 (c).

(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, practice of a certified nurse-midwife, practice of a certified registered nurse
anesthetist, practice of a nurse practitioner, and practice of a clinical nurse specialist
and defining the scope of practice within which an advanced practice registered
nurse may issue prescription orders under sub. (2).

(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 in order to be an advanced practice
registered nurse.

(d) Specifying the classes of drugs, individual drugs, or devices that may not
be prescribed by an advanced practice registered nurse 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.

SECTION 109. 441.092 of the statutes is created to read:

441.092 Expedited partner therapy. (1) In this section:

(b) “Antimicrobial drug” has the meaning given in s. 448.035 (1) (b).

(c) “Expedited partner therapy” has the meaning given in s. 448.035 (1) (c).

(2) Notwithstanding the requirements of s. 448.9785, an advanced practice registered nurse who may issue prescription orders under s. 441.09 (2) may provide expedited partner therapy if a 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 advanced practice registered nurse 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 advanced practice registered nurse 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, “existed partner therapy” or the letters “EPT.”

(3) The advanced practice registered nurse 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), an advanced practice registered nurse 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 an advanced practice
registered nurse whose act or omission involves reckless, wanton, or intentional
misconduct.

**SECTION 110.** 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 111.** 441.11 (title) of the statutes is repealed.

**SECTION 112.** 441.11 (1) of the statutes is repealed.

**SECTION 113.** 441.11 (2) of the statutes is renumbered 441.09 (5m) (a) and amended to read:

> 441.09 (5m) (a) **Licensure exemption.** The provisions of s. 448.04 (1)(g) 448.03 (1)(d) do not apply to an advanced practice registered nurse licensed under this section who possesses a certified registered nurse anesthetist specialty designation under sub. (1)(b) 1, or to a person who engages in the practice of a nurse anesthetist while performing official duties for the armed services or federal health services of the United States.

**SECTION 114.** 441.11 (3) of the statutes is repealed.

**SECTION 115.** 441.15 of the statutes is repealed.

**SECTION 116.** 441.16 of the statutes is repealed.

**SECTION 117.** 441.18 (2) (a) (intro.) of the statutes is amended to read:

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

**SECTION 118.** 441.18 (2) (b) of the statutes is amended to read:

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

**SECTION 119.** 441.18 (3) of the statutes is amended to read:
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441.18 (3) An advanced practice registered nurse who, acting in good faith, prescribes or delivers an opioid antagonist in accordance with sub. (2), or who, acting in good faith, otherwise lawfully prescribes or dispenses an opioid antagonist, shall be immune from criminal or civil liability and may not be subject to professional discipline under s. 441.07 for any outcomes resulting from prescribing, delivering, or dispensing the opioid antagonist.

SECTION 120. 441.19 of the statutes is repealed.

SECTION 121. Subchapter II (title) of chapter 441 [precedes 441.51] of the statutes is amended to read:

CHAPTER 441

SUBCHAPTER II

ENHANCED NURSE LICENSURE COMPACT

SECTION 122. 441.51 (title) of the statutes is amended to read:

441.51 (title) Enhanced nurse Nurse licensure compact.

SECTION 123. 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 124. 448.03 (2) (a) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), is repealed and recreated 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, practical, or advanced practice registered nursing 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 as a physician assistant under subch. VIII, to practice acupuncture under ch. 451 or under any other statutory provision, or as otherwise provided by statute.

SECTION 125. 448.035 (1) (a) of the statutes is repealed.

SECTION 126. 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, or a physician assistant, or certified advanced practice nurse prescriber 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, or physician assistant, or certified advanced practice 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, or physician assistant, or certified advanced practice 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, or physician assistant, or certified advanced practice 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, or physician assistant, or certified advanced practice 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, or physician assistant, or certified advanced practice nurse prescriber whose act or omission involves reckless, wanton, or intentional misconduct.

SECTION 127. 448.035 (2), (3) and (4) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), are repealed and recreated to read:

448.035 (2) Notwithstanding the requirements of s. 448.30, a physician 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 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 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 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 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 whose act or omission involves reckless, wanton, or intentional misconduct.

SECTION 128. 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 129. 448.62 (2m) of the statutes is amended to read:

448.62 (2m) An advanced practice registered 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 130. 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 131. 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 or from a practitioner who holds a compact privilege under subch. IX of ch. 448.

SECTION 132. 448.956 (1m) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), is repealed and recreated 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. 441.09 or from a practitioner who holds a compact privilege under subch. X of ch. 448.

SECTION 133. 450.01 (1m) of the statutes is repealed.

SECTION 134. 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 may issue prescription orders under s. 441.09 (2).

SECTION 135. 450.01 (16) (hr) 2. of the statutes is amended to read:

450.01 (16) (hr) 2. An advanced practice registered nurse prescriber who may issue prescription orders under s. 441.09 (2).
SECTION 136. 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 or 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 137. 450.11 (1g) (b) of the statutes is amended to read:

450.11 (1g) (b) A pharmacist may, upon the prescription order of a practitioner providing expedited partner therapy, as specified in s. 441.092 or 448.035, that complies with the requirements of sub. (1), dispense an antimicrobial drug as a course of therapy for treatment of chlamydial infections, gonorrhea, or trichomoniasis to the practitioner’s patient or a person with whom the patient has had sexual contact for use by the person with whom the patient has had sexual contact. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the dispensing of a prescription to the person to whom the antimicrobial drug is dispensed. A pharmacist providing a consultation under this paragraph shall ask whether the person for whom the antimicrobial drug has been prescribed is allergic to the antimicrobial drug and advise that the person for whom the antimicrobial drug has been prescribed must discontinue use of the antimicrobial drug if the person is allergic to or develops signs of an allergic reaction to the antimicrobial drug.

SECTION 138. 450.11 (1g) (b) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), is repealed and recreated to read:
450.11 (1g) (b) A pharmacist may, upon the prescription order of a practitioner providing expedited partner therapy, as specified in s. 441.092, 448.035, or 448.9725, that complies with the requirements of sub. (1), dispense an antimicrobial drug as a course of therapy for treatment of chlamydial infections, gonorrhea, or trichomoniasis to the practitioner’s patient or a person with whom the patient has had sexual contact for use by the person with whom the patient has had sexual contact. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the dispensing of a prescription to the person to whom the antimicrobial drug is dispensed. A pharmacist providing a consultation under this paragraph shall ask whether the person for whom the antimicrobial drug has been prescribed is allergic to the antimicrobial drug and advise that the person for whom the antimicrobial drug has been prescribed must discontinue use of the antimicrobial drug if the person is allergic to or develops signs of an allergic reaction to the antimicrobial drug.

Section 139. 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 140.** 450.11 (1i) (a) 1. of the statutes, as affected by 2021 Wisconsin
Acts 23 and .... (this act), is repealed and recreated to read:

450.11 (1i) (a) 1. A pharmacist may, upon and in accordance with the
prescription order of an advanced practice registered nurse under s. 441.18 (2) (a),
of a physician under s. 448.037 (2) (a), or of a physician assistant under s. 448.9727
(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 under s. 441.18 (2) (a)
2., of a physician under s. 448.037 (2) (a) 2., or of a physician assistant under s.
448.9727 (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 141.** 450.11 (1i) (b) 2. b. of the statutes is amended to read:

450.11 (1i) (b) 2. b. An advanced practice registered nurse prescriber 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 142.** 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 registered nurse prescriber in an effort to procure unlawfully
a prescription drug or the administration of a prescription drug is not a privileged
communication.

**SECTION 143.** 450.11 (8) (e) of the statutes is amended to read:
450.11 (8) (e) The board of nursing, insofar as this section applies to advanced
practice nurse prescribers registered nurses.

SECTION 144. 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
advanced practice registered nurse prescriber has entered into a written agreement
to collaborate with a physician may issue prescription orders under s. 441.09 (2).

SECTION 145. 450.135 (7) (b) of the statutes is amended to read:

450.135 (7) (b) 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 may issue prescription orders under s.
441.09 (2).

SECTION 146. 462.04 of the statutes is amended to read:

462.04 Prescription or order required. A person who holds a license or
limited X-ray machine operator permit under this chapter may not use diagnostic
X-ray equipment on humans for diagnostic purposes unless authorized to do so by
prescription or order of a physician licensed under s. 448.04 (1) (a), a dentist licensed
under s. 447.04 (1), a podiatrist licensed under s. 448.63, a chiropractor licensed
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
s. 448.56 (7) (a), a physical therapist who is licensed under s. 448.53 or who holds a
compact privilege under subch. IX of ch. 448.

SECTION 147. 462.04 of the statutes, as affected by 2021 Wisconsin Acts 23 and
.... (this act), is repealed and recreated to read:

462.04 Prescription or order required. A person who holds a license or
limited X-ray machine operator permit under this chapter may not use diagnostic
X-ray equipment on humans for diagnostic purposes unless authorized to do so by
prescription or order of a physician licensed under s. 448.04 (1) (a), a dentist licensed
under s. 447.04 (1), a podiatrist licensed under s. 448.63, a chiropractor licensed
under s. 446.02, an advanced practice registered nurse licensed under s. 441.09, a
physician assistant licensed under s. 448.974, or, subject to s. 448.56 (7) (a), a
physical therapist who is licensed under s. 448.53 or who holds a compact privilege
under subch. IX of ch. 448.

SECTION 148. 655.001 (7t) of the statutes is amended to read:

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

SECTION 149. 655.001 (9) of the statutes is amended to read:

655.001 (9) “Nurse anesthetist” means a nurse an individual who is licensed
under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued
in a party state, as defined in s. 441.51 (2) (k), and who is certified as a nurse
anesthetist by the American association of nurse anesthetists as an advanced
practice registered nurse and possesses a certified registered nurse anesthetist
specialty designation under s. 441.09.

SECTION 150. 655.005 (2) (a) of the statutes is amended to read:

655.005 (2) (a) An employee of a health care provider if the employee is a
physician or a nurse anesthetist or is a health care practitioner who is providing
health care services that are not in collaboration with a physician under s. 441.15 (2)
(b) or under the direction and supervision of a physician or nurse anesthetist.
SECTION 151. 961.01 (19) (a) of the statutes is amended to read:

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

SECTION 152. 961.01 (19) (a) of the statutes, as affected by 2021 Wisconsin Acts 23 and .... (this act), is repealed and recreated to read:

961.01 (19) (a) A physician, advanced practice registered nurse, dentist, veterinarian, podiatrist, optometrist, scientific investigator or, subject to s. 448.975 (1) (b), a physician assistant, or other person licensed, registered, certified or otherwise permitted to distribute, dispense, conduct research with respect to, administer or use in teaching or chemical analysis a controlled substance in the course of professional practice or research in this state.

SECTION 153. 961.395 of the statutes is amended to read:

961.395 Limitation on advanced practice registered nurses. (1) An advanced practice registered nurse who is certified may issue 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 registered nurse certified under s. 441.16 who may issue prescription orders under s. 441.09 (2) shall include with each prescription order the advanced practice nurse prescriber certification license number issued to him or her by the board of nursing.
(3) An advanced practice registered nurse certified under s. 441.16 who may issue prescription orders under s. 441.09 (2) 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).


(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), a rule promulgated under this subsection is effective for 2 years after its promulgation, or until permanent rules take effect, whichever is sooner, and the effective period of a rule promulgated under this subsection may not be further extended under s. 227.24 (2).

(2) (a) In this subsection, the definitions under s. 441.001 apply.

(b) Notwithstanding s. 441.09 (3), an individual who, on January 1, 2019, was licensed as a registered nurse in this state and was practicing in a recognized role may continue to practice advanced practice registered nursing and the corresponding recognized role in which he or she was practicing and may continue to use the titles corresponding to the recognized roles in which he or she was practicing during the period before which the board takes final action on the person’s application under s. 441.09. This paragraph does not apply after March 1, 2023.

SECTION 155. Effective dates. This act takes effect on March 1, 2022, except as follows:
(1) SECTION 154 (1) of this act takes effect on the day after publication.

(2) The treatment of ss. 46.03 (44) (by SECTION 11), 50.08 (2) (by SECTION 14), 70.47 (8) (intro.) (by SECTION 22), 146.82 (3) (a) (by SECTION 44), 146.89 (1) (r) 1. (by SECTION 46), 255.07 (1) (d) (by SECTION 72), 343.16 (5) (a) (by SECTION 76), 448.03 (2) (a) (by SECTION 124), 448.035 (2), (3), and (4) (by SECTION 127), 448.956 (1m) (by SECTION 132), 450.11 (1g) (b) (by SECTION 138) and (1i) (a) 1. (by SECTION 140), 462.04 (by SECTION 147), and 961.01 (19) (a) (by SECTION 152) takes effect on April 1, 2022.