

State of Misconsin 2017 - 2018 LEGISLATURE

 $LRB-4543/1 \\ MED\&TJD:emw\&jm$

2017 ASSEMBLY BILL 568

October 24, 2017 - Introduced by Representatives Rohrkaste, Jagler, Kooyenga, Kitchens, Petersen, Tranel, Spiros, Tusler, Hutton, Horlacher, Neylon, Tittl, Kuglitsch, Berceau, Genrich, Anderson, Subeck, Sinicki and Hintz, cosponsored by Senators Lemahieu, Vukmir, Harsdorf, Nass, Moulton, Marklein, Olsen and Ringhand. Referred to Committee on Health.

AN ACT to repeal 50.01 (1b), 77.54 (14) (f) 3., 118.2925 (1) (b), 146.89 (1) (r) 3., 1 2 252.01 (1c), 440.03 (13) (b) 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, 448.035 (1) (a) and 3 450.01 (1m); to renumber and amend 253.13 (1), 255.06 (1) (d), 441.06 (7) and 4 5 441.11 (2); to amend 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 6 7 (1g) (a), 46.03 (44), 50.08 (2), 50.09 (1) (a) (intro.), 50.09 (1) (f) 1., 50.09 (1) (h), 8 50.09 (1) (k), 50.49 (1) (b) (intro.), 51.41 (1d) (b) 4., 70.47 (8) (intro.), 77.54 (14) (f) 4., 97.59, 102.13 (1) (a), 102.13 (1) (b) (intro.), 1., 3. and 4., 102.13 (1) (d) 1., 9 10 2., 3. and 4., 102.13 (2) (a), 102.13 (2) (b), 102.17 (1) (d) 1. and 2., 102.29 (3), 11 102.42 (2) (a), 106.30 (1), 118.15 (3) (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., 12 13 146.89 (6), 252.07 (8) (a) 2., 252.07 (9) (c), 252.10 (7), 252.11 (2), (4), (5), (7) and 14 (10), 252.15 (3m) (d) 11. b. and 13., (5g) (c), (5m) (d) 2. and (e) 2. and 3. and (7m)

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(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., 440.981 (1), 440.982 (1), 440.987 (2), 441.01 (7) (a) (intro.) and 1., 441.01 (7) (b), 441.06 (3), 441.07 (1g) (intro.), (a), (c) and (e), 441.18 (2) (a) (intro.), 441.18 (2) (b), 441.18 (3), 448.03 (2) (a), 448.035 (2), (3) and (4), 448.56 (1) and (1m) (b), 448.67 (2), 448.956 (1m), 450.01 (16) (h) 2., 450.01 (16) (hr) 2., 450.03 (1) (e), 450.11 (1i) (a) 1., 450.11 (1i) (b) 2. b., 450.11 (7) (b), 450.11 (8) (e), 450.13 (5) (b), 462.04, 655.001 (7t), 655.001 (9), 655.005 (2) (a), 961.01 (19) (a) and 961.395; 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. and 441.09 of the statutes; relating to: advanced practice registered nurses 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 3) pay a fee set by the Department of Safety and Professional Services. The bill also allows a person who has not completed an accredited education program described above to receive an APRN license if the person 1) on January 1, 2017, was both licensed as an RN in Wisconsin and practicing in one of the four recognized roles and 2) satisfies additional practice or education criteria established by the board. The four recognized roles, as defined in the bill, are 1) certified nurse-midwife, 2) certified registered nurse anesthetist, 3) clinical nurse specialist, and 4) nurse practitioner.

The bill also requires the board, upon granting a person an APRN license, to also grant the person one or more endorsements 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 endorsements 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 an endorsement for that role. 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 an APRN to complete continuing education requirements in clinical pharmacology or therapeutics relevant to the APRN's area of practice, including a minimum number of hours regarding best practices in prescribing controlled substances. The bill also requires an APRN, when applying for a license or license renewal or upon request of the board, to submit to the board evidence that he or she has in effect malpractice liability insurance coverage in the minimum amounts required by the rules of the board.

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 and maintain malpractice insurance. Under the bill, "certified nurse-midwife" is one of the four recognized roles for APRNs, and a person who practices nurse-midwifery under current law who satisfies the APRN licensure requirements may apply for and receive an APRN license and a certified nurse-midwife endorsement, except that the bill also requires that a person applying for a certified nurse-midwife endorsement be certified by the American Midwifery Certification Board. In addition, the bill prohibits the practice of nurse-midwifery, as defined under current law, without a certified nurse-midwife endorsement.

Advanced practice registered nurse prescribers

Under current law, a person licensed as an RN may apply to the board for a certificate to issue prescription orders if the person meets certain requirements established by the board. A person holding the certificate is subject to various practice requirements 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 instead provides that the board may grant an APRN who applies for licensure and who meets the education, training, and examination requirements established by the board the authority to issue prescription orders. The bill requires the board to maintain a register of all APRNs who are authorized to issue prescription orders.

OTHER CHANGES

The bill makes numerous other changes throughout the statutes relating to APRNs and APRN prescribers, including changing references to "advanced practice nurse" and "advanced practice nurse prescriber" in favor of the terms "advanced

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practice registered nurse" and "advanced practice registered nurse who has prescribing authority."

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. 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 2. 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 3. 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

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advanced practice <u>registered</u> nurse <u>prescriber</u> selected by the applicant from a list of licensed physicians, licensed physician assistants, licensed chiropractors, licensed podiatrists, and <u>certified licensed</u> advanced practice <u>nurse prescribers registered nurses</u> 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 4. 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 5. 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 6. 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 <u>certified licensed</u> advanced practice <u>registered</u> 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 7. 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 8. 45.40 (1g) (a) of the statutes is amended to read:

45.40 (1g) (a) "Health care provider" means an advanced practice <u>registered</u> nurse prescriber certified under s. 441.16 (2) <u>licensed under ch. 441</u>, 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 9. 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, physician assistant, or certified advanced practice registered nurse prescriber who has prescribing authority under s. 441.09 (2) (c) providing expedited partner therapy to that patient under s. 448.035. The information sheet shall include information about sexually transmitted diseases and their treatment and about the risk of drug allergies. The information sheet shall also include a statement advising a person

- with questions about the information to contact his or her physician, pharmacist, or local health department, as defined in s. 250.01 (4).
- **Section 10.** 50.01 (1b) of the statutes is repealed.
- **SECTION 11.** 50.08 (2) of the statutes is amended to read:
 - 50.08 **(2)** A physician, an advanced practice <u>registered</u> nurse <u>prescriber</u> certified under s. 441.16 (2) who has prescribing authority under s. 441.09 (2) (c), 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 12. 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 <u>registered</u> nurse prescriber, attorney, and any other person, unless medically contraindicated as documented by the resident's physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u> 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 13. 50.09 (1) (f) 1. of the statutes is amended to read:

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

SECTION 14. 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 15. 50.09 (1) (k) of the statutes is amended to read:

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

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

50.49 (1) (b) (intro.) "Home health services" means the following items and services that are furnished to an individual, who is under the care of a physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, by a home health agency, or by others under arrangements made by the home health agency, that are under a plan for furnishing those items and services to the individual that is established and periodically reviewed by a physician, physician assistant, or

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advanced practice <u>registered</u> 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 17. 51.41 (1d) (b) 4. of the statutes is amended to read:

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

Section 18. 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 19.** 77.54 (14) (f) 3. of the statutes is repealed.
- **Section 20.** 77.54 (14) (f) 4. of the statutes is amended to read:
 - 77.54 (14) (f) 4. An advanced practice <u>registered</u> nurse <u>who has prescribing</u> authority under s. 441.09 (2) (c).
 - **SECTION 21.** 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 22.** 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

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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 23. 102.13 (1) (b) (intro.), 1., 3. and 4. of the statutes are amended to read:

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 <u>registered</u> nurse prescriber, or vocational expert.
- 3. The employee's right to have his or her physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse 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 <u>registered</u> nurse prescriber, or vocational expert immediately upon receipt of these reports by the employer or worker's compensation insurer.
- **SECTION 24.** 102.13 (1) (d) 1., 2., 3. and 4. of the statutes are amended to read: 102.13 (1) (d) 1. Any physician, chiropractor, psychologist, dentist, podiatrist, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or vocational expert who is present at any examination under par. (a) or (am) may be required to testify as to the results of the examination.
- 2. Any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse <u>prescriber</u>, or podiatrist who attended a worker's compensation claimant for any condition or complaint reasonably related to the condition for which the claimant claims compensation may be required to testify before the division when the division so directs.
- 3. Notwithstanding any statutory provisions except par. (e), any physician, chiropractor, psychologist, dentist, physician assistant, advanced practice <u>registered</u> nurse prescriber, or podiatrist attending a worker's compensation claimant for any

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condition or complaint reasonably related to the condition for which the claimant claims compensation may furnish to the employee, employer, worker's compensation insurer, department, or division information and reports relative to a compensation claim.

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

SECTION 25. 102.13 (2) (a) of the statutes is amended to read:

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

Section 26. 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 <u>registered</u> nurse prescriber, hospital, or health service provider shall furnish a legible, certified duplicate of the written

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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 27. 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

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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 <u>registered</u> 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 sanitorium 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 28. 102.29 (3) of the statutes is amended to read:

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

Section 29. 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 <u>registered</u> nurse <u>prescriber</u>, 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 30. 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 31. 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

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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 32. 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 <u>registered</u> nurse <u>prescriber</u> <u>with prescribing</u> <u>authority</u>, or podiatrist licensed in any state.

SECTION 33. 118.2925 (1) (b) of the statutes is repealed.

SECTION 34. 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 has prescribing authority under s. 441.09 (2) (c), 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 35. 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 has prescribing authority under s. 441.09 (2) (c), 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 36. 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, advanced practice registered nurse prescriber who has prescribing authority under s. 441.09 (2) (c), or 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 37. 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 endorsement under s. 441.09.

Section 38. 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 <u>registered</u> nurse <u>prescriber certified</u> under s. 441.16 (2) <u>licensed under s. 441.09</u> who treats a patient whose physical or mental condition in the physician's, physician assistant's, or advanced practice <u>nurse</u>

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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 39.** 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 40.** 146.89 (1) (r) 3. of the statutes is repealed. **Section 41.** 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 issue prescription orders under s. 441.16 (2) prescribing authority under s. 441.09 (2) (c). **Section 42.** 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 issue prescription orders under s. 441.16 (2) prescribing authority under s. 441.09 (2) (c) 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 issue prescription orders

under s. 441.16 (2) prescribing authority	under s.	441.09	(2) (c)	is not	required	. to
maintain in effect malpractice insurance.						

- **Section 43.** 252.01 (1c) of the statutes is repealed.
- **Section 44.** 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 45. 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 <u>registered</u> nurse <u>prescriber</u>, 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 46. 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 have prescribing authority under s. 441.09 (2) (c).

SECTION 47. 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

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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 <u>registered</u> nurse <u>prescriber</u>. The court shall summon the person to appear on a date at least 48 hours, but not more than 96 hours, after service if an officer of the department or a local health officer petitions the court and states the facts authorizing commitment. If the person fails to appear or fails to accept commitment without reasonable cause, the court may cite the

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

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

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the name of the physician, physician assistant, or advanced practice <u>registered</u> nurse prescriber to whom reported.

SECTION 48. 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 <u>registered</u> nurse <u>prescriber</u>, based on information provided to the physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, determines and certifies in writing that the 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 <u>registered</u> nurse prescriber, based on information provided to the physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, determines and certifies in writing that the 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 <u>registered</u> nurse <u>prescriber</u>, he or she may not make this determination or certification. The information that is provided to a physician, physician assistant, or advanced practice

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

- (5m) (d) 2. A physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, based on information provided to the physician, physician assistant, or advanced practice <u>registered</u> nurse <u>prescriber</u>, determines and certifies in writing that the contact under subd. 1. constitutes a significant exposure. 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 <u>registered</u> 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 <u>registered</u> 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 <u>registered</u> nurse <u>prescriber</u> 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 <u>registered</u> 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 <u>registered</u> 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 49. 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 50. 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 51. 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 52. 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
endorsement under s. 441.09.

SECTION 53. 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 54. 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 55. 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 <u>nurse-midwife</u> , or birth attendant who attended the birth
shall cause the infant, within one week of birth, to be subjected to these tests.
Section 56. 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 endorsement under s. 441.09

Section 57. 253.15 (1) (em) of the statutes is created to read:

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

Section 58. 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

1	to be made available by making those materials available at no charge on the board's
2	Internet site.
3	Section 59. 255.06 (1) (d) of the statutes is renumbered 255.06 (1) (f) (intro.)
4	and amended to read:
5	255.06 (1) (f) (intro.) "Nurse practitioner" "Women's health nurse clinician"
6	means a any of the following:
7	1. A registered nurse licensed under ch. 441 or in a party state, as defined in
8	s. 441.50 (2) (j), whose practice of professional nursing under s. 441.001 (4) includes
9	performance of delegated medical services under the supervision of a physician,
10	dentist, or podiatrist, or advanced practice registered nurse.
11	Section 60. 255.06 (1) (f) 2. of the statutes is created to read:
12	255.06 (1) (f) 2. An advanced practice registered nurse.
13	Section 61. 255.06 (2) (d) of the statutes is amended to read:
14	255.06 (2) (d) Specialized training for rural colposcopic examinations and
15	activities. Provide not more than \$25,000 in each fiscal year as reimbursement for
16	the provision of specialized training of nurse practitioners women's health nurse
17	clinicians to perform, in rural areas, colposcopic examinations and follow-up
18	activities for the treatment of cervical cancer.
19	Section 62. 255.07 (1) (d) of the statutes is amended to read:
20	255.07 (1) (d) "Health care practitioner" means a physician, a physician
21	assistant licensed under s. 448.04 (1) (f), or an advanced practice <u>registered</u> nurse
22	who is certified to issue prescription orders under s. 441.16 has prescribing authority
23	under s. 441.09 (2) (c).
24	Section 63. 257.01 (5) (a) and (b) of the statutes are amended to read:

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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, or nurse-midwife, advanced practice registered nurse under ch. 441, licensed as a nurse-midwife under ch. 441, 2015 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 64. 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,

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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).

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(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 65. 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

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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 66. 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

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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 67. 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

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1 Science journal certifying that, in the medical care provider's judgment, the 2 applicant is physically fit to teach driving. 3 **Section 68.** 440.03 (13) (b) 3. of the statutes is repealed. 4 **Section 69.** 440.03 (13) (b) 39m. of the statutes is created to read: 5 440.03 (13) (b) 39m. Nurse, advanced practice registered. 6 **Section 70.** 440.03 (13) (b) 42. of the statutes is repealed. 7 **SECTION 71.** 440.08 (2) (a) 4m. of the statutes is repealed. 8 **Section 72.** 440.08 (2) (a) 47. of the statutes is created to read: 9 440.08 (2) (a) 47. Nurse, advanced practice registered: March 1 of each 10 even-numbered year. 11 **Section 73.** 440.08 (2) (a) 50. of the statutes is repealed. 12 **Section 74.** 440.981 (1) of the statutes is amended to read: 13 440.981 (1) No person may use the title "licensed midwife," describe or imply 14 that he or she is a licensed midwife, or represent himself or herself as a licensed 15 midwife unless the person is granted a license under this subchapter or is licensed 16 as a nurse-midwife under s. 441.15 an advanced practice registered nurse and possesses a certified nurse-midwife endorsement under s. 441.09. 17 **Section 75.** 440.982 (1) of the statutes is amended to read: 18 19 440.982 (1) No person may engage in the practice of midwifery unless the 20 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 2122nurse-midwife under s. 441.15 an advanced practice registered nurse and possesses 23 a certified nurse-midwife endorsement under s. 441.09.

Section 76. 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
endorsement under s. 441.09 and who practices in an out-of-hospital setting.
SECTION 77. 441.01 (7) (a) (intro.) and 1. of the statutes are amended to read:
441.01 (7) (a) (intro.) The board shall require each applicant for the renewal
of a license, certificate, or permit issued under this chapter to do all of the following
as a condition for renewing the license, certificate, or permit:
1. Complete and submit to the department with the application for renewal of
the license, certificate, or permit a nursing workforce survey developed by the
department of workforce development under s. 106.30 (2).
SECTION 78. 441.01 (7) (b) of the statutes is amended to read:
441.01 (7) (b) The board may not renew a license, certificate, or permit 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 79. 441.06 (3) of the statutes is amended to read:
441.06 (3) A Except as provided in s. 441.09 (3), 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 applicable renewal fee

Section 80. 441.06 (7) of the statutes is renumbered 441.09 (5) and amended to read:

determined by the department under s. 440.03 (9) (a).

441.09 (5) 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 menta
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 81. 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.

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- (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 is authorized to issue prescription orders under s. 441.09.

Section 82. 441.09 of the statutes is created to read:

- **441.09** Advanced practice registered nurses. (1) Definitions. In this section:
- (a) "Advanced practice registered nursing" means practicing 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, management of patient conditions, and the use and prescription of pharmacological interventions.
- (b) "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.
- (c) "Practice of nurse-midwifery" means 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 and the education, training, and experience of the nurse-midwife.

 (d) "Recognized role" means one of the following roles:
- 4 1. Certified nurse-midwife.
 - 2. Certified registered nurse anesthetist.
- 6 3. Clinical nurse specialist.
- 7 4. Nurse practitioner.

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- (2) Initial license. (a) Any person who satisfies all of the following requirements may apply to the department for initial licensure by the board as an advanced practice registered nurse:
- 1. The person holds a valid license to practice as a registered nurse issued under s. 441.06 (1) or (1m) or applies concurrently for a license under s. 441.06 (1) or (1m) with the application for a license under this paragraph.
 - 2. The person provides evidence satisfactory to the board that he or she satisfies one of the following criteria:
 - a. The person has completed an accredited graduate-level or postgraduate-level education program that prepares the person for the practice of advanced practice registered nursing.
 - b. On January 1, 2017, the person was licensed as a registered nurse in this state and was practicing in a recognized role, and the person satisfies additional criteria established by the board by rule under this subd. 2. b. relating to practice or education.
- 3. The person pays the fee specified under s. 440.05(1).
- 4. The person provides evidence of malpractice liability insurance coverage as provided in sub. (7).

- 5. If the person is applying to receive a certified nurse-midwife endorsement under par. (b), the person provides evidence satisfactory to the board that the person is certified by the American Midwifery Certification Board.
- (b) The board shall grant an advanced practice registered nurse license to a person the board determines meets the requirements under par. (a). The board shall also grant a person who receives a license under this paragraph one or more endorsements corresponding to the recognized roles for which the board determines that the person qualifies based on the person's education and experience under par. (a) 2. a. or b. and, if applicable, the person's certification under par. (a) 5. The board may not grant a license under this paragraph to a person applying concurrently for a license under s. 441.06 (1) or (1m), unless the board also grants the person a license to practice as a registered nurse.
- (c) The board, upon application, shall also grant authority to issue prescription orders to a person who is granted a license under this subsection and who meets the education, training, and examination requirements established by the board for authority to issue prescription orders. The board shall maintain a register of all advanced practice registered nurses authorized to issue prescription orders under this paragraph. An advanced practice registered nurse with the authority to issue prescription orders under this paragraph may provide expedited partner therapy in the manner described in s. 448.035.
- (3) LICENSE RENEWAL. On or before the applicable renewal date specified under s. 440.08 (2) (a), a person issued a license under sub. (2) 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. (6), evidence of

- malpractice liability insurance coverage as provided in sub. (7), and 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 subsection the renewal of his or her advanced practice registered nurse license and endorsements granted under sub. (2) (b) and shall grant the renewal of his or her license to practice as a registered nurse.
- (4) PRACTICE; TITLES. (a) 1. The holder of a license issued under this section is an "advanced practice registered nurse" and 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 an endorsement for a recognized role granted under sub. (2) (b) may append to his or her name the title and an abbreviation corresponding to that recognized role.
- 3. The holder of a certified nurse-midwife endorsement granted under sub. (2) (b) is a certified nurse-midwife and is authorized to engage in the practice of nurse-midwifery.
- (b) 1. Except as provided in 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 endorsement under sub. (2) (b).
- b. Engage in the practice of nurse-midwifery unless he or she has been granted a certified nurse-midwife endorsement under sub. (2) (b).

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- c. 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 endorsement under sub. (2) (b).
- d. 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 endorsement under sub. (2) (b).
- e. 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 endorsement under sub. (2) (b).
- (6) 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 hours required under this subsection must include at least 2 contact hours regarding best practices in prescribing controlled substances.
- (7) Malpractice liability insurance. Every advanced practice registered nurse shall at all times have 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.
- (8) DELEGATION. An advanced practice registered nurse who has authority to issue prescription orders may not delegate the act of issuing a prescription order to

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any nurse who is not authorized to issue prescription orders. Nothing in this section 1 $\mathbf{2}$ prohibits a nurse from issuing a prescription order as an act delegated by a physician. 3 (9) RULES. The board shall promulgate rules necessary to administer this 4 section, including rules for all of the following: 5 Establishing the appropriate education, training, or experience (a) 6 requirements that a registered nurse must satisfy to be an advanced practice 7 registered nurse and to qualify to be granted the authority to issue prescription 8 orders under sub. (2) (c). 9 (b) Specifying the classes of drugs, individual drugs, or devices that may not 10 be prescribed by an advanced practice registered nurse authorized to issue prescription orders under sub. (2) (c). 11 12 (c) Specifying the conditions to be met for registered nurses to do the following: 13 1. Administer a drug prescribed by an advanced practice registered nurse. 14 2. Administer a drug at the direction of an advanced practice registered nurse. 15 **SECTION 83.** 441.11 (title) of the statutes is repealed. 16 **SECTION 84.** 441.11 (1) of the statutes is repealed. 17 Section 85. 441.11 (2) of the statutes is renumbered 441.09 (8m) and amended 18 to read: 441.09 (8m) Nurse an esthetists. The provisions of s. 448.04 (1) (g) do not apply 19 20 to a licensed advanced practice registered nurse who possesses a certified registered nurse anesthetist endorsement under this section. 2122 **Section 86.** 441.11 (3) of the statutes is repealed. 23 **Section 87.** 441.15 of the statutes is repealed. 24 **Section 88.** 441.16 of the statutes is repealed.

Section 89. 441.18 (2) (a) (intro.) of the statutes is amended to read:

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

Section 90. 441.18 (2) (b) of the statutes is amended to read:

441.18 (2) (b) An advanced practice <u>registered</u> 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 91. 441.18 (3) of the statutes is amended to read:

441.18 (3) An advanced practice <u>registered</u> 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 92. 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 er, 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 93.** 448.035 (1) (a) of the statutes is repealed.
- **SECTION 94.** 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, physician assistant, or certified advanced practice registered nurse prescriber who has prescribing authority under s. 441.09 (2) (c) may provide expedited partner therapy if the patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The physician, physician assistant, or certified advanced practice registered nurse prescriber shall attempt to obtain the name of the patient's sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient's sexual partner, if known. If the physician, physician assistant, or certified advanced practice registered nurse prescriber is unable to obtain the name of the patient's sexual partner, the prescription order shall include, in ordinary bold-faced capital letters, the words, "expedited partner therapy" or the letters "EPT."
 - (3) The physician, physician assistant, or certified advanced practice registered nurse prescriber shall provide the patient with a copy of the information sheet prepared by the department of health services under s. 46.03 (44) and shall request that the patient give the information sheet to the person with whom the patient had sexual contact.

- (4) (a) Except as provided in par. (b), a physician, physician assistant, or eertified advanced practice <u>registered</u> nurse <u>prescriber</u> is immune from civil liability for injury to or the death of a person who takes any antimicrobial drug if the antimicrobial drug is prescribed, dispensed, or furnished under this section and if expedited partner therapy is provided as specified under this section.
- (b) The immunity under par. (a) does not extend to the donation, distribution, furnishing, or dispensing of an antimicrobial drug by a physician, physician assistant, or certified advanced practice registered nurse prescriber whose act or omission involves reckless, wanton, or intentional misconduct.

SECTION 95. 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.

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(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 96. 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 97. 448.956 (1m) of the statutes is amended to read:

448.956 (**1m**) Subject to sub. (1) (a), a licensee may provide athletic training to an individual without a referral, except that a licensee may not provide athletic training as described under s. 448.95 (5) (d) or (e) in an outpatient rehabilitation setting unless the licensee has obtained a written referral for the individual from a practitioner licensed or certified under subch. II, III, IV, V, or VII of this chapter; under ch. 446; or under s. 441.16 (2) 441.09.

Section 98. 450.01 (1m) of the statutes is repealed.

SECTION 99.	450.01	(16)	(h) 2.	of the	statutes	is amended	to read:
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450.01 (16) (h) 2. The patient's advanced practice <u>registered</u> nurse <u>prescriber</u>, if the advanced practice <u>registered</u> nurse <u>prescriber has entered into a written</u> agreement to collaborate with a physician <u>has prescribing authority under s. 441.09</u> (2) (c).

Section 100. 450.01 (16) (hr) 2. of the statutes is amended to read:

450.01 (16) (hr) 2. An advanced practice <u>registered</u> nurse <u>prescriber who has</u> prescribing authority under s. 441.09 (2) (c).

Section 101. 450.03 (1) (e) of the statutes is amended to read:

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

Section 102. 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 103. 450.11 (1i) (b) 2. b. of the statutes is amended to read:
450.11 (1i) (b) 2. b. An advanced practice <u>registered</u> nurse 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 104. 450.11 (7) (b) of the statutes is amended to read:
450.11 (7) (b) Information communicated to a physician, physician assistant,
or advanced practice <u>registered</u> nurse prescriber in an effort to procure unlawfully
a prescription drug or the administration of a prescription drug is not a privileged
communication.
Section 105. 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 <u>registered nurses</u> .
Section 106. 450.13 (5) (b) of the statutes is amended to read:
450.13 (5) (b) The patient's advanced practice <u>registered</u> nurse prescriber , if the
advanced practice <u>registered</u> nurse prescriber has entered into a written agreement
to collaborate with a physician has prescribing authority under s. 441.09 (2) (c).
Section 107. 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 <u>registered</u> nurse <u>certified licensed</u> 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 licensed under s. 448.53.
SECTION 108. 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 109. 655.001 (9) of the statutes is amended to read:

655.001 (9) "Nurse anesthetist" means <u>a nurse an individual who is</u> licensed under ch. 441 or in a party state, as defined in s. 441.50 (2) (j), 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 endorsement under s. 441.09.

Section 110. 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 111. 961.01 (19) (a) of the statutes is amended to read:

961.01 (19) (a) A physician, advanced practice <u>registered</u> 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

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1	in teaching or chemical analysis a controlled substance in the course of professional
2	practice or research in this state.
3	SECTION 112. 961.395 of the statutes is amended to read:
4	961.395 Limitation on advanced practice registered nurses. (1) An
5	advanced practice registered nurse who is certified under s. 441.16 who has
6	prescribing authority under s. 441.09 (2) (c) may prescribe controlled substances only
7	as permitted by the rules promulgated under s. $441.16(3) 441.09(9)$.
8	(2) An advanced practice registered nurse certified under s. 441.16 shall
9	include with each prescription order the advanced practice registered nurse
10	prescriber certification number identifier issued to him or her by the board of
11	nursing.
12	(3) An advanced practice registered nurse certified under s. 441.16 who has
13	prescribing authority under s. 441.09 (2) (c) may dispense a controlled substance only
14	by prescribing or administering the controlled substance or as otherwise permitted
15	by the rules promulgated under s. 441.16 (3) 441.09 (9).
16	Section 113. Effective date.
17	(1) This act takes effect on March 1, 2020.

(END)