

LEGISLATIVE BILL 256

Approved by the Governor June 2, 2005

Introduced by Price, 26; Combs, 32

AN ACT relating to public health and welfare; to amend sections 44-2803, 44-2824, 44-2827, 71-121.01, 71-168, 71-168.02, 71-1,103, 71-1,132.05, 71-1,132.07, 71-1,132.08, 71-1,132.11, 71-1,132.18, 71-1,143, 71-1,198, 71-1,339, 71-541, 71-1405, 71-1704, 71-1706, 71-1707, 71-1709.02, 71-1714, 71-1716, 71-1716.02, 71-1716.03, 71-1716.05, 71-1717, 71-1718.01, 71-1718.02, 71-1721, 71-1721.07 to 71-1726.02, 71-1729 to 71-1731, 71-1735, 71-1737, 71-1738, 71-1743, 71-1747, 71-1749, 71-1750, 71-1753 to 71-1755, 71-1757, 71-1913.01, 71-2610.01, 71-5191, 77-2704.09, 79-214, and 79-221, Reissue Revised Statutes of Nebraska, and sections 18-1738, 28-401, 71-1,142, 71-3,106, 83-4,157, and 83-4,159, Revised Statutes Supplement, 2004; to adopt the Clinical Nurse Specialist Practice Act and the Advanced Practice Registered Nurse Licensure Act; to rename the Advanced Practice Registered Nurse Act; to eliminate a term relating to the Nurse Practice Act; to change provisions relating to the Board of Nursing and the Board of Advanced Practice Registered Nurses; to change provisions relating to licensure of advanced practice registered nurses; to provide for certification of nurse practitioners; to name the Certified Registered Nurse Anesthetist Act; to change provisions relating to regulation of certified nurse midwives, certified registered nurse anesthetists, and clinical nurse specialists; to provide exemptions from the Nebraska Cosmetology Act for airbrush tanning and temporary nonpermanent airbrush tattooing; to eliminate an advisory council; to harmonize provisions; to provide operative dates; to repeal the original sections; and to outright repeal sections 71-1705 and 71-1736, Reissue Revised Statutes of Nebraska.

Be it enacted by the people of the State of Nebraska,

Section 1. Sections 1 to 14 of this act shall be known and may be cited as the Clinical Nurse Specialist Practice Act.

Sec. 2. For purposes of the Clinical Nurse Specialist Practice Act:

(1) Approved certifying body means a national certification organization which (a) is approved by the board, (b) certifies qualified licensed registered nurses for advanced practice, (c) has eligibility requirements related to education and practice, and (d) offers an examination in an area of practice which meets psychometric guidelines and tests approved by the board;

(2) Board means the Board of Advanced Practice Registered Nurses;

(3) Clinical nurse specialist means a registered nurse who meets the requirements of section 3 of this act and who holds a certificate issued under the Clinical Nurse Specialist Practice Act; and

(4) Department means the Department of Health and Human Services Regulation and Licensure.

Sec. 3. An applicant for certification as a clinical nurse specialist shall be licensed as a registered nurse under the Nurse Practice Act or have the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska and shall submit to the department the following:

(1) A completed application, including, but not limited to, the applicant's social security number and such other information as the department requires pursuant to rules and regulations, accompanied by the fee established pursuant to section 14 of this act;

(2) Evidence that the applicant holds a master's degree or a doctoral degree in a nursing clinical specialty area or has a master's degree in nursing and has successfully completed a graduate-level clinical nurse specialist education program; and

(3) Except as provided in section 5 of this act, evidence of passage of a board-approved examination issued by an approved certifying body or, when such examination is not available, an alternative method of competency assessment by any means permitted under section 8 of this act and approved by the board.

Sec. 4. The practice of a clinical nurse specialist includes health promotion, health supervision, illness prevention, and disease management, including assessing patients, synthesizing and analyzing data, and applying

advanced nursing practice. A clinical nurse specialist conducts and applies research, advocates, serves as an agent of change, engages in systems management, and assesses and intervenes in complex health care problems within the selected clinical specialty.

Sec. 5. (1) An applicant who meets the requirements for certification in section 3 of this act shall be certified by the department as a clinical nurse specialist, except that a person practicing as a clinical nurse specialist pursuant to the Nurse Practice Act on July 1, 2007, who applies on or after such date and before September 1, 2007, shall be certified as a clinical nurse specialist under this section without complying with subdivision (3) of section 3 of this act.

(2) A person certified as a clinical nurse specialist has the right to use the title Clinical Nurse Specialist and the abbreviation CNS.

Sec. 6. If an applicant for initial certification as a clinical nurse specialist files an application for certification within one hundred eighty days prior to the biennial renewal date, the provisions of subsection (2) of section 71-162.04 apply.

Sec. 7. All certificates issued under the Clinical Nurse Specialist Practice Act shall expire on October 31 of each even-numbered year. Biennial certificate renewals shall be accomplished as the department, with the concurrence of the board, establishes by rule and regulation.

Sec. 8. (1) An applicant for renewal of a certificate issued under the Clinical Nurse Specialist Practice Act shall demonstrate continuing competency. Continuing competency may be demonstrated by methods which include, but are not limited to, continuing education, course work, continuing practice, national certification or recertification offered by an approved certifying body, a reentry program, satisfactory peer review including patient outcomes, examination, or other continuing competency activities listed in section 71-161.09.

(2) The department, with the concurrence of the board, may waive any continuing competency requirement established under subsection (1) of this section for any two-year period for which a certificate holder submits documentation of circumstances justifying such a waiver. The department shall define such justifying circumstances in rules and regulations.

Sec. 9. A certificate issued under the Clinical Nurse Specialist Practice Act may be denied, refused renewal, revoked, suspended, or disciplined in any other manner for any violation of the act, for physical or mental disability or incapacity, for gross incompetence, or for any reason for which a license issued under the Advanced Practice Registered Nurse Licensure Act or the Nurse Practice Act may be denied, refused renewal, revoked, suspended, or disciplined. The methods and procedures provided in the Nurse Practice Act for opportunity for hearing, notice of hearing, presentation of evidence, conduct of a hearing, reinstatement, and related matters shall apply to disciplinary actions under this section. A decision to deny, refuse renewal of, revoke, suspend, or discipline a certificate as a clinical nurse specialist may be appealed, and the appeal shall be in accordance with the Administrative Procedure Act.

Sec. 10. (1) A certificate issued under the Clinical Nurse Specialist Practice Act lapses if the certificate holder (a) does not have a current license to practice as a registered nurse or an advanced practice registered nurse or the authority to practice as a registered nurse in this state based on the Nurse Licensure Compact or has had either license or such authority to practice denied, refused renewal, suspended, or revoked or (b) renews his or her license to practice as a registered nurse or an advanced practice registered nurse but does not renew his or her clinical nurse specialist's certificate.

(2) When a certificate issued under the act lapses, the right of the person whose certificate has lapsed to represent himself or herself as a clinical nurse specialist and to practice the activities for which a certificate is required terminates. To restore the certificate to active status, the person shall meet the requirements for renewal which are in effect at the time that he or she wishes to restore the certificate and shall pay the renewal fee and the late fee established and collected as provided in section 71-162.

Sec. 11. Any person practicing as a clinical nurse specialist who is not certified as such by the department and who possesses a license to engage in any health profession for which a license is issued by the department may have such license denied, refused renewal, suspended, or revoked or have other disciplinary action taken against such license by the department pursuant to the provisions of the Nurse Practice Act or the Uniform Licensing Law relating to such profession, irrespective of any criminal proceedings for practicing without a certificate.

Sec. 12. The Clinical Nurse Specialist Practice Act does not prohibit the performance of the professional activities of a clinical nurse specialist by a person not holding a certificate issued under the act if performed:

- (1) In an emergency situation;
- (2) By a legally qualified person from another state employed by the United States and performing official duties in this state; or
- (3) By a person enrolled in an approved clinical nurse specialist program for the education of clinical nurse specialists as part of that approved program.

Sec. 13. Any person committing any of the following acts is guilty of a Class IV felony:

- (1) Practicing as a clinical nurse specialist without a certificate issued under the Clinical Nurse Specialist Practice Act except as provided in section 12 of this act;
- (2) Knowingly employing or offering to employ any person as a clinical nurse specialist who does not hold a certificate issued under the act;
- (3) Fraudulently seeking, obtaining, or furnishing a certificate as a clinical nurse specialist or aiding and abetting such actions; or
- (4) Holding himself or herself out as a clinical nurse specialist or using the abbreviation CNS or any other designation tending to imply that he or she is a clinical nurse specialist holding a certificate issued under the act if he or she does not hold such a certificate.

Sec. 14. The department shall establish and collect fees for credentialing activities under the Clinical Nurse Specialist Practice Act as provided in section 71-162.

Sec. 15. Section 18-1738, Revised Statutes Supplement, 2004, is amended to read:

18-1738. (1) The clerk of any city of the primary class, first class, or second class or village shall, or the county clerk or designated county official pursuant to section 23-186 or the Department of Motor Vehicles may, take an application from a handicapped or disabled person or temporarily handicapped or disabled person or his or her parent, legal guardian, or foster parent for a permit which will entitle the holder thereof or a person driving a motor vehicle for the purpose of transporting such holder to park in those spaces or access aisles provided for by sections 18-1736 to 18-1741 when the holder of the permit will enter or exit the motor vehicle while it is parked in such spaces or access aisles. For purposes of this section, the handicapped or disabled person or temporarily handicapped or disabled person shall be considered the holder of the permit.

(2) For purposes of sections 18-1736 to 18-1741, handicapped or disabled person shall mean any individual with a severe visual or physical impairment which limits personal mobility and results in an inability to travel unassisted more than two hundred feet without the use of a wheelchair, crutch, walker, or prosthetic, orthotic, or other assistant device, any individual whose personal mobility is limited as a result of respiratory problems, any individual who has a cardiac condition to the extent that his or her functional limitations are classified in severity as being Class III or Class IV, according to standards set by the American Heart Association, and any individual who has permanently lost all or substantially all the use of one or more limbs. Temporarily handicapped or disabled person shall mean any handicapped or disabled person whose personal mobility is expected to be limited in such manner for no longer than one year.

(3) A person applying for a permit or for the renewal of a permit shall complete an application, shall provide proof of identity, and shall submit a completed medical form containing the statutory criteria for qualification and signed by a physician, a physician assistant, or an advanced practice registered nurse practicing under and in accordance with his or her certification act, certifying that the person who will be the holder meets the definition of handicapped or disabled person or temporarily handicapped or disabled person. No applicant shall be required to provide his or her social security number. In the case of a temporarily handicapped or disabled person, the certifying physician, physician assistant, or advanced practice registered nurse shall indicate the estimated date of recovery or that the temporary handicap or disability will continue for a period of six months, whichever is less. A person may hold only one permit under this section and may hold either a permit under this section or a permit under section 18-1738.01, but not both. The Department of Motor Vehicles shall provide applications and medical forms to the clerk or designated county official. The application form shall contain information listing the legal uses of the permit and that the permit is not transferable, is to be used by the party to whom issued or

for the motor vehicle for which it is issued, is not to be altered or reproduced, and is to be used only when a handicapped or disabled person or a temporarily handicapped or disabled person will enter or exit the motor vehicle while it is parked in a designated parking space or access aisle. The application form shall provide space for the applicant to sign a statement that he or she is aware of his or her rights, duties, and responsibilities with regard to the use and possession of a handicapped or disabled parking permit and the penalties provided by law for handicapped parking infractions. The application form shall also indicate that those convicted of handicapped parking infractions shall be subject to suspension of the permit for six months. A copy of the completed application form shall be given to each applicant. Before a permit is issued, the department shall enter all information required in the manner prescribed by section 18-1739. The clerk or designated county official shall submit to the department the name, address, and license number of all persons applying for a permit pursuant to this section. An application for the renewal of a permit under this section may be filed within thirty days prior to the expiration of the permit. The existing permit shall be invalid upon receipt of the new permit. Following the receipt of the application and its processing, the Department of Motor Vehicles shall deliver each individual renewed permit to the applicant in person or by first-class United States mail, postage prepaid, as circumstances permit, except that renewed permits shall not be issued sooner than ten days prior to the date of expiration.

(4) The Department of Motor Vehicles, upon receipt from the clerk or designated county official of a completed application form and completed medical form from an applicant for a handicapped parking permit under this section, shall verify that the applicant qualifies for such permit and, if so, shall issue the same by delivering the permit to the applicant in person or by first-class United States mail, postage prepaid, as circumstances permit. Upon issuing such permit, the department shall provide the basic issuing data to the clerk or designated county official of the city or county where the permitholder resides or, if different, to the clerk or designated county official who originally accepted the application.

Sec. 16. Section 28-401, Revised Statutes Supplement, 2004, is amended to read:

28-401. As used in the Uniform Controlled Substances Act, unless the context otherwise requires:

(1) Administer shall mean to directly apply a controlled substance by injection, inhalation, ingestion, or any other means to the body of a patient or research subject;

(2) Agent shall mean an authorized person who acts on behalf of or at the direction of another person but shall not include a common or contract carrier, public warehouse keeper, or employee of a carrier or warehouse keeper;

(3) Administration shall mean the Drug Enforcement Administration, United States Department of Justice;

(4) Controlled substance shall mean a drug, biological, substance, or immediate precursor in Schedules I to V of section 28-405. Controlled substance shall not include distilled spirits, wine, malt beverages, tobacco, or any nonnarcotic substance if such substance may, under the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. 301 et seq., as such act existed on January 1, 2003, and the law of this state, be lawfully sold over the counter without a prescription;

(5) Counterfeit substance shall mean a controlled substance which, or the container or labeling of which, without authorization, bears the trademark, trade name, or other identifying mark, imprint, number, or device, or any likeness thereof, of a manufacturer, distributor, or dispenser other than the person or persons who in fact manufactured, distributed, or dispensed such substance and which thereby falsely purports or is represented to be the product of, or to have been distributed by, such other manufacturer, distributor, or dispenser;

(6) Department shall mean the Department of Health and Human Services Regulation and Licensure;

(7) Division of Drug Control shall mean the personnel of the Nebraska State Patrol who are assigned to enforce the Uniform Controlled Substances Act;

(8) Dispense shall mean to deliver a controlled substance to an ultimate user or a research subject pursuant to a medical order issued by a practitioner authorized to prescribe, including the packaging, labeling, or compounding necessary to prepare the controlled substance for such delivery;

(9) Distribute shall mean to deliver other than by administering or dispensing a controlled substance;

(10) Prescribe shall mean to issue a medical order;

(11) Drug shall mean (a) articles recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States, official National Formulary, or any supplement to any of them, (b) substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in human beings or animals, and (c) substances intended for use as a component of any article specified in subdivision (a) or (b) of this subdivision, but shall not include devices or their components, parts, or accessories;

(12) Deliver or delivery shall mean the actual, constructive, or attempted transfer from one person to another of a controlled substance, whether or not there is an agency relationship;

(13) Marijuana shall mean all parts of the plant of the genus cannabis, whether growing or not, the seeds thereof, and every compound, manufacture, salt, derivative, mixture, or preparation of such plant or its seeds, but shall not include the mature stalks of such plant, hashish, tetrahydrocannabinols extracted or isolated from the plant, fiber produced from such stalks, oil or cake made from the seeds of such plant, any other compound, manufacture, salt, derivative, mixture, or preparation of such mature stalks, or the sterilized seed of such plant which is incapable of germination. When the weight of marijuana is referred to in the Uniform Controlled Substances Act, it shall mean its weight at or about the time it is seized or otherwise comes into the possession of law enforcement authorities, whether cured or uncured at that time;

(14) Manufacture shall mean the production, preparation, propagation, compounding, conversion, or processing of a controlled substance, either directly or indirectly, by extraction from substances of natural origin, independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and shall include any packaging or repackaging of the substance or labeling or relabeling of its container. Manufacture shall not include the preparation or compounding of a controlled substance by an individual for his or her own use, except for the preparation or compounding of components or ingredients used for or intended to be used for the manufacture of methamphetamine, or the preparation, compounding, conversion, packaging, or labeling of a controlled substance: (a) By a practitioner as an incident to his or her prescribing, administering, or dispensing of a controlled substance in the course of his or her professional practice; or (b) by a practitioner, or by his or her authorized agent under his or her supervision, for the purpose of, or as an incident to, research, teaching, or chemical analysis and not for sale;

(15) Narcotic drug shall mean any of the following, whether produced directly or indirectly by extraction from substances of vegetable origin, independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis: (a) Opium, opium poppy and poppy straw, coca leaves, and opiates; (b) a compound, manufacture, salt, derivative, or preparation of opium, coca leaves, or opiates; or (c) a substance and any compound, manufacture, salt, derivative, or preparation thereof which is chemically equivalent to or identical with any of the substances referred to in subdivisions (a) and (b) of this subdivision, except that the words narcotic drug as used in the Uniform Controlled Substances Act shall not include decocainized coca leaves or extracts of coca leaves, which extracts do not contain cocaine or ecgonine, or isoquinoline alkaloids of opium;

(16) Opiate shall mean any substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having such addiction-forming or addiction-sustaining liability. Opiate shall not include the dextrorotatory isomer of 3-methoxy-n methylmorphinan and its salts. Opiate shall include its racemic and levorotatory forms;

(17) Opium poppy shall mean the plant of the species *Papaver somniferum* L., except the seeds thereof;

(18) Poppy straw shall mean all parts, except the seeds, of the opium poppy after mowing;

(19) Person shall mean any corporation, association, partnership, limited liability company, or one or more individuals;

(20) Practitioner shall mean a physician, a physician assistant, a dentist, a veterinarian, a pharmacist, a podiatrist, an optometrist, a certified nurse midwife, ~~advanced practice registered nurse~~, a certified registered nurse anesthetist, a nurse practitioner, a scientific investigator, a pharmacy, a hospital, or any other person licensed, registered, or otherwise permitted to distribute, dispense, prescribe, conduct research with respect to, or administer a controlled substance in the course of practice or research in this state, including an emergency medical service as defined in section

71-5175;

(21) Production shall include the manufacture, planting, cultivation, or harvesting of a controlled substance;

(22) Immediate precursor shall mean a substance which is the principal compound commonly used or produced primarily for use and which is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled substance, the control of which is necessary to prevent, curtail, or limit such manufacture;

(23) State shall mean the State of Nebraska;

(24) Ultimate user shall mean a person who lawfully possesses a controlled substance for his or her own use, for the use of a member of his or her household, or for administration to an animal owned by him or her or by a member of his or her household;

(25) Hospital shall have the same meaning as in section 71-419;

(26) Cooperating individual shall mean any person, other than a commissioned law enforcement officer, who acts on behalf of, at the request of, or as agent for a law enforcement agency for the purpose of gathering or obtaining evidence of offenses punishable under the Uniform Controlled Substances Act;

(27) Hashish or concentrated cannabis shall mean: (a) The separated resin, whether crude or purified, obtained from a plant of the genus cannabis; or (b) any material, preparation, mixture, compound, or other substance which contains ten percent or more by weight of tetrahydrocannabinols;

(28) Exceptionally hazardous drug shall mean (a) a narcotic drug, (b) thiophene analog of phencyclidine, (c) phencyclidine, (d) amobarbital, (e) secobarbital, or (f) pentobarbital;

(29) Imitation controlled substance shall mean a substance which is not a controlled substance but which, by way of express or implied representations and consideration of other relevant factors including those specified in section 28-445, would lead a reasonable person to believe the substance is a controlled substance. A placebo or registered investigational drug manufactured, distributed, possessed, or delivered in the ordinary course of practice or research by a health care professional shall not be deemed to be an imitation controlled substance;

(30) (a) Controlled substance analogue shall mean a substance (i) the chemical structure of which is substantially similar to the chemical structure of a Schedule I or Schedule II controlled substance as provided in section 28-405 or (ii) which has a stimulant, depressant, analgesic, or hallucinogenic effect on the central nervous system that is substantially similar to or greater than the stimulant, depressant, analgesic, or hallucinogenic effect on the central nervous system of a Schedule I or Schedule II controlled substance as provided in section 28-405. A controlled substance analogue shall, to the extent intended for human consumption, be treated as a controlled substance under Schedule I of section 28-405 for purposes of the Uniform Controlled Substances Act; and

(b) Controlled substance analogue shall not include (i) a controlled substance, (ii) any substance generally recognized as safe and effective within the meaning of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. 301 et seq., as such act existed on January 1, 2003, (iii) any substance for which there is an approved new drug application, or (iv) with respect to a particular person, any substance if an exemption is in effect for investigational use for that person, under section 505 of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. 355, as such section existed on January 1, 2003, to the extent conduct with respect to such substance is pursuant to such exemption;

(31) Anabolic steroid shall mean any drug or hormonal substance, chemically and pharmacologically related to testosterone (other than estrogens, progestins, and corticosteroids), that promotes muscle growth and includes any controlled substance in Schedule III(d) of section 28-405. Anabolic steroid shall not include any anabolic steroid which is expressly intended for administration through implants to cattle or other nonhuman species and has been approved by the Secretary of Health and Human Services for such administration, but if any person prescribes, dispenses, or distributes such a steroid for human use, such person shall be considered to have prescribed, dispensed, or distributed an anabolic steroid within the meaning of this subdivision;

(32) Chart order shall mean an order for a controlled substance issued by a practitioner for a patient who is in the hospital where the chart is stored or for a patient receiving detoxification treatment or maintenance treatment pursuant to section 28-412. Chart order shall not include a prescription;

(33) Medical order shall mean a prescription, a chart order, or an

order for pharmaceutical care issued by a practitioner;

(34) Prescription shall mean an order for a controlled substance issued by a practitioner. Prescription shall not include a chart order;

(35) Registrant shall mean any person who has a controlled substances registration issued by the state or the administration;

(36) Reverse distributor shall mean a person whose primary function is to act as an agent for a pharmacy, wholesaler, manufacturer, or other entity by receiving, inventorying, and managing the disposition of outdated, expired, or otherwise nonsaleable controlled substances; and

(37) Signature shall mean the name, word, or mark of a person written in his or her own hand with the intent to authenticate a writing or other form of communication or a digital signature which complies with section 86-611.

Sec. 17. Section 44-2803, Reissue Revised Statutes of Nebraska, is amended to read:

44-2803. ~~(1)~~ Health care provider shall mean ~~(a)~~ a means: (1) A physician; ~~(b) a nurse anesthetist;~~ ~~(c)~~ (2) a certified registered nurse anesthetist; (3) an individual, partnership, limited liability company, corporation, association, facility, institution, or other entity authorized by law to provide professional medical services by physicians or certified registered nurse anesthetists; ~~(d)~~ (4) a hospital; or ~~(e)~~ (5) a personal representative as defined in section 30-2209 who is successor or assignee of any health care provider designated in subdivisions ~~(a)~~ (1) through ~~(d)~~ (4) of this ~~subsection~~ section.

~~(2) Nurse anesthetist shall mean a person licensed in this state pursuant to the Nurse Practice Act when acting as an anesthetist on a contract basis or as an employee of a hospital.~~

Sec. 18. Section 44-2824, Reissue Revised Statutes of Nebraska, is amended to read:

44-2824. (1) To be qualified under the Nebraska Hospital-Medical Liability Act, a health care provider or such health care provider's employer, employee, partner, or limited liability company member shall:

(a) File with the director proof of financial responsibility, pursuant to section 44-2827 or 44-2827.01, in the amount of five hundred thousand dollars for each occurrence. In the case of physicians or certified registered nurse anesthetists and their employers, employees, partners, or limited liability company members an aggregate liability amount of one million dollars for all occurrences or claims made in any policy year for each named insured shall be provided. In the case of hospitals and their employees, an aggregate liability amount of three million dollars for all occurrences or claims made in any policy year or risk-loss trust year shall be provided. Such policy may be written on either an occurrence or a claims-made basis. Any risk-loss trust shall be established and maintained only on an occurrence basis. Such qualification shall remain effective only as long as insurance coverage or risk-loss trust coverage as required remains effective; and

(b) Pay the surcharge and any special surcharge levied on all health care providers pursuant to sections 44-2829 to 44-2831.

(2) Subject to the requirements in subsections (1) and (4) of this section, the qualification of a health care provider shall be either on an occurrence or claims-made basis and shall be the same as the insurance coverage provided by the insured's policy.

(3) The director shall have authority to permit qualification of health care providers who have retired or ceased doing business if such health care providers have primary insurance coverage under subsection (1) of this section.

(4) A health care provider who is not qualified under the act at the time of the alleged occurrence giving rise to a claim shall not, for purposes of that claim, qualify under the act notwithstanding subsequent filing of proof of financial responsibility and payment of a required surcharge.

(5) Qualification of a health care provider under the Nebraska Hospital-Medical Liability Act shall continue only as long as the health care provider meets the requirements for qualification. A health care provider who has once qualified under the act and who fails to renew or continue his or her qualification in the manner provided by law and by the rules and regulations of the Department of Insurance shall cease to be qualified under the act.

Sec. 19. Section 44-2827, Reissue Revised Statutes of Nebraska, is amended to read:

44-2827. Financial responsibility of a health care provider may be established only by filing with the director proof that the health care provider is insured pursuant to sections 44-2837 to 44-2839 or by a policy of professional liability insurance in a company authorized to do business in Nebraska. Such insurance shall be in the amount of five hundred thousand

dollars per occurrence and, in cases involving physicians or certified registered nurse anesthetists, but not with respect to hospitals, an aggregate liability of at least one million dollars for all occurrences or claims made in any policy year shall be provided. In the case of hospitals and their employees, an aggregate liability amount of three million dollars for all occurrences or claims made in any policy year shall be provided. The filing shall state the premium charged for the policy of insurance.

Sec. 20. Section 71-121.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-121.01. The department shall be responsible for the general administration of the activities of each of the boards as defined in the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, and sections 71-4701 to 71-4719 and 71-6053 to 71-6068 and the boards covered by the scope of the Uniform Licensing Law and named in section 71-102. The cost of operation and administration of the boards shall be paid from fees, gifts, grants, and other money credited to the Professional and Occupational Credentialing Cash Fund. The Director of Regulation and Licensure shall determine the proportionate share of this cost to be paid from the fees of the respective boards, except that no fees shall be paid for such purpose from the fund without the prior approval of the boards concerned. The director's determinations shall become final when approved by the respective boards and the department and shall be valid for one fiscal year only.

Sec. 21. Section 71-168, Reissue Revised Statutes of Nebraska, is amended to read:

71-168. (1) The department shall enforce the Uniform Licensing Law and for that purpose shall make necessary investigations. Every credentialed person listed under subsection (4) of this section and every member of a professional board shall furnish the department such evidence as he or she may have relative to any alleged violation which is being investigated.

(2) Every credentialed person listed under subsection (4) of this section shall report to the department the name of every person without a credential that he or she has reason to believe is engaged in practicing any profession for which a credential is required by the Uniform Licensing Law. The department may, along with the Attorney General and other law enforcement agencies, investigate such reports or other complaints of unauthorized practice. The professional board may issue an order to cease and desist the unauthorized practice of such profession as a measure to obtain compliance with the applicable credentialing requirements by the person prior to referral of the matter to the Attorney General for action. Practice of such profession without a credential after receiving a cease and desist order is a Class III felony.

(3) Any credentialed person listed under subsection (4) of this section who is required to file a report of loss or theft of a controlled substance to the federal Drug Enforcement Administration shall provide a copy of such report to the department.

(4) Every credentialed person regulated under the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Emergency Medical Services Act, the Licensed Practical Nurse-Certified Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, the Uniform Controlled Substances Act, the Uniform Licensing Law, the Wholesale Drug Distributor Licensing Act, or sections 71-3702 to 71-3715, 71-4701 to 71-4719, or 71-6053 to 71-6068 shall, within thirty days of an occurrence described in this subsection, report to the department in such manner and form as the department may require by rule and regulation whenever he or she:

(a) Has first-hand knowledge of facts giving him or her reason to believe that any person in his or her profession has committed acts indicative of gross incompetence, a pattern of negligent conduct as defined in subdivision (5)(e) of section 71-147, or unprofessional conduct, may be practicing while his or her ability to practice is impaired by alcohol, controlled substances, narcotic drugs, or physical, mental, or emotional disability, or has otherwise violated such regulatory provisions governing the practice of the profession;

(b) Has first-hand knowledge of facts giving him or her reason to believe that any person in another profession regulated under such regulatory provisions has committed acts indicative of gross incompetence or may be practicing while his or her ability to practice is impaired by alcohol,

controlled substances, narcotic drugs, or physical, mental, or emotional disability. The requirement to file a report under subdivision (a) or (b) of this subsection shall not apply (i) to the spouse of the person, (ii) to a practitioner who is providing treatment to such person in a practitioner-patient relationship concerning information obtained or discovered in the course of treatment unless the treating practitioner determines that the condition of the person may be of a nature which constitutes a danger to the public health and safety by the person's continued practice, or (iii) when a credentialed person who is chemically impaired enters the Licensee Assistance Program authorized by section 71-172.01 except as provided in such section; or

(c) Has been the subject of any of the following actions:

(i) Loss of privileges in a hospital or other health care facility due to alleged incompetence, negligence, unethical or unprofessional conduct, or physical, mental, or chemical impairment or the voluntary limitation of privileges or resignation from staff of any health care facility when that occurred while under formal or informal investigation or evaluation by the facility or a committee of the facility for issues of clinical competence, unprofessional conduct, or physical, mental, or chemical impairment;

(ii) Loss of employment due to alleged incompetence, negligence, unethical or unprofessional conduct, or physical, mental, or chemical impairment;

(iii) Adverse judgments, settlements, or awards arising out of professional liability claims, including settlements made prior to suit, or adverse action by an insurance company affecting professional liability coverage. The department may define by rule and regulation what constitutes a settlement that would be reportable when a credentialed person refunds or reduces a fee or makes no charge for reasons related to a patient or client complaint other than costs;

(iv) Denial of a credential or other form of authorization to practice by any state, territory, or jurisdiction, including any military or federal jurisdiction, due to alleged incompetence, negligence, unethical or unprofessional conduct, or physical, mental, or chemical impairment;

(v) Disciplinary action against any credential or other form of permit he or she holds taken by another state, territory, or jurisdiction, including any federal or military jurisdiction, the settlement of such action, or any voluntary surrender of or limitation on any such credential or other form of permit;

(vi) Loss of membership in a professional organization due to alleged incompetence, negligence, unethical or unprofessional conduct, or physical, mental, or chemical impairment; or

(vii) Conviction of any misdemeanor or felony in this or any other state, territory, or jurisdiction, including any federal or military jurisdiction.

(5) A report made to the department under this section shall be confidential and treated in the same manner as complaints and investigative files under subsection (7) of section 71-168.01. Any person making a report to the department under this section except those self-reporting shall be completely immune from criminal or civil liability of any nature, whether direct or derivative, for filing a report or for disclosure of documents, records, or other information to the department under this section. Persons who are members of committees established under sections 25-12,123, 71-2046 to 71-2048, and 71-7901 to 71-7903 or witnesses before such committees shall not be required to report such activities. Any person who is a witness before a committee established under such sections shall not be excused from reporting matters of first-hand knowledge that would otherwise be reportable under this section only because he or she attended or testified before such committee. Documents from original sources shall not be construed as immune from discovery or use in actions under subsection (4) of this section.

Sec. 22. Section 71-168.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-168.02. (1) A health care facility licensed under the Health Care Facility Licensure Act or a peer review organization or professional association of a health care profession regulated under the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Emergency Medical Services Act, the Licensed Practical Nurse-Certified Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, the Uniform Controlled Substances Act, the Uniform Licensing Law, the Wholesale Drug Distributor Licensing Act, or sections 71-3702 to 71-3715, 71-4701 to 71-4719, or 71-6053 to 71-6068 shall report to the

department, on a form and in the manner specified by the department by rule and regulation, any facts known to them, including, but not limited to, the identity of the practitioner and patient, when the facility, organization, or association:

(a) Has made payment due to adverse judgment, settlement, or award of a professional liability claim against it or a licensee, certificate holder, or registrant, including settlements made prior to suit, arising out of the acts or omissions of the licensee, certificate holder, or registrant; or

(b) Takes action adversely affecting the privileges or membership of a licensee, certificate holder, or registrant in such facility, organization, or association due to alleged incompetence, professional negligence, unprofessional conduct, or physical, mental, or chemical impairment.

The report shall be made within thirty days after the date of the action or event.

(2) A report made to the department under this section shall be confidential and treated in the same manner as complaints and investigative files under subsection (7) of section 71-168.01. The facility, organization, association, or person making such report shall be completely immune from criminal or civil liability of any nature, whether direct or derivative, for filing a report or for disclosure of documents, records, or other information to the department under this section. The reports and information shall be subject to the investigatory and enforcement provisions of the regulatory provisions listed in subsection (1) of this section. Nothing in this subsection shall be construed to require production of records protected by section 25-12,123, 71-2048, or 71-7903 except as otherwise provided in any of such sections.

(3) For purposes of this section, the department shall accept reports made to it under the Nebraska Hospital-Medical Liability Act or in accordance with national practitioner data bank requirements of the federal Health Care Quality Improvement Act of 1986, as amended, and may require a supplemental report to the extent such reports do not contain the information required by rules and regulations of the department.

Sec. 23. Section 71-1,103, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,103. The following classes of persons shall not be construed to be engaged in the unauthorized practice of medicine:

- (1) Persons rendering gratuitous services in cases of emergency;
- (2) Persons administering ordinary household remedies;
- (3) The members of any church practicing its religious tenets, except that they shall not prescribe or administer drugs or medicines, perform surgical or physical operations, nor assume the title of or hold themselves out to be physicians or surgeons, and such members shall not be exempt from the quarantine laws of this state;
- (4) Students of medicine and surgery who are studying in an accredited school or college of medicine and who gratuitously prescribe for and treat disease under the supervision of a licensed physician;
- (5) Physicians and surgeons of the United States Armed Forces or Public Health Service or United States Department of Veterans Affairs when acting in the line of such duty in this state;
- (6) Physicians and surgeons who are graduates of an accredited school or college of medicine with the degree of Doctor of Medicine and licensed in another state when incidentally called into this state for consultation with a physician and surgeon licensed in this state;
- (7) Physicians and surgeons who are graduates of an accredited school or college of medicine with the degree of Doctor of Medicine and who reside in a state bordering this state and who are duly licensed under the laws thereof to practice medicine and surgery but who do not open an office or maintain or appoint a place to meet patients or to receive calls within this state unless they are performing services described in subdivision (7) of section 71-1,102;
- (8) Persons providing or instructing as to use of braces, prosthetic appliances, crutches, contact lenses, and other lenses and devices prescribed by a doctor of medicine licensed to practice while working under the direction of such physician;
- (9) Dentists practicing their profession when licensed and practicing in accordance with sections 71-183 to 71-191;
- (10) Optometrists practicing their profession when licensed and practicing under and in accordance with sections 71-1,133 to 71-1,136;
- (11) Osteopathic physicians practicing their profession if licensed and practicing under and in accordance with sections 71-1,137 and 71-1,141;
- (12) Chiropractors practicing their profession if licensed and

practicing under sections 71-177 to 71-182;

(13) Podiatrists practicing their profession when licensed and practicing under and in accordance with sections 71-173 to 71-176;

(14) Psychologists practicing their profession when licensed and practicing under and in accordance with sections 71-1,206.01 to 71-1,206.35;

(15) Advanced practice registered nurses ~~and certified registered nurse anesthetists~~ practicing in their ~~profession~~ clinical specialty areas when licensed under the Advanced Practice Registered Nurse Licensure Act and practicing under and in accordance with ~~the Advanced Practice Registered Nurse Act~~ their respective certification acts;

(16) Any person licensed or certified under the laws of this state to practice a limited field of the healing art, not specifically named in this section, when confining themselves strictly to the field for which they are licensed or certified, not assuming the title of physician, surgeon, or physician and surgeon, and not professing or holding themselves out as qualified to prescribe drugs in any form or to perform operative surgery;

(17) Physicians and surgeons who are duly licensed to practice medicine and surgery in another state who have been recommended by the secretary of the board of examiners in the state of licensure and who have been granted temporary practice rights by the Board of Medicine and Surgery, with the approval of the department, for a period not to exceed three months in any twelve-month period;

(18) Persons obtaining blood specimens while working under an order of or protocols and procedures approved by a physician, registered nurse, or other independent health care practitioner licensed to practice by the state if the scope of practice of that practitioner permits the practitioner to obtain blood specimens; and

(19) Any other trained person employed by a licensed health care facility or health care service defined in the Health Care Facility Licensure Act or clinical laboratory certified pursuant to the federal Clinical Laboratories Improvement Act of 1967, as amended, or Title XVIII or XIX of the federal Social Security Act to withdraw human blood for scientific or medical purposes.

Every act or practice falling within the practice of medicine and surgery as defined not specially excepted in this section shall constitute the practice of medicine and surgery and may be performed in this state only by those licensed by law to practice medicine in Nebraska.

Sec. 24. Section 71-1,132.05, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.05. For purposes of the Nurse Practice Act, unless the context otherwise requires:

(1) Executive director means the executive director of the Board of Nursing;

(2) Board means the Board of Nursing;

(3) License by endorsement means the granting of active status and the authority to practice to an individual who has been licensed in another jurisdiction;

(4) License by examination means the authority to practice is based on an assessment of minimum competency by such means as the board may determine;

(5) License, for purposes of discipline, includes the multistate licensure privilege to practice granted by the Nurse Licensure Compact. If the multistate licensure privilege is restricted due to disciplinary action by the home state, the department may, upon request by the individual, grant the authority to practice in this state;

(6) Licensed practitioner means a person lawfully authorized to prescribe medications or treatments;

(7) The practice of nursing means the performance for compensation or gratuitously of any act expressing judgment or skill based upon a systematized body of nursing knowledge. Such acts include the identification of and intervention in actual or potential health problems of individuals, families, or groups, which acts are directed toward maintaining health status, preventing illness, injury, or infirmity, improving health status, and providing care supportive to or restorative of life and well-being through nursing assessment and through the execution of nursing care and of diagnostic or therapeutic regimens prescribed by any person lawfully authorized to prescribe. Each nurse is directly accountable and responsible to the consumer for the quality of nursing care rendered. Licensed nurses may use the services of unlicensed individuals to provide assistance with personal care and activities of daily living;

(8) The practice of nursing by a registered nurse means assuming responsibility and accountability for nursing actions which include, but are

not limited to:

- (a) Assessing human responses to actual or potential health conditions;
 - (b) Establishing nursing diagnoses;
 - (c) Establishing goals and outcomes to meet identified health care needs;
 - (d) Establishing and maintaining a plan of care;
 - (e) Prescribing nursing interventions to implement the plan of care;
 - (f) Implementing the plan of care;
 - (g) Teaching health care practices;
 - (h) Delegating, directing, or assigning nursing interventions that may be performed by others and that do not conflict with the act;
 - (i) Maintaining safe and effective nursing care rendered directly or indirectly;
 - (j) Evaluating responses to interventions, including, but not limited to, performing physical and psychological assessments of patients under restraint and seclusion as required by federal law, if the registered nurse has been trained in the use of emergency safety intervention;
 - (k) Teaching theory and practice of nursing;
 - (l) Conducting, evaluating, and utilizing nursing research;
 - (m) Administering, managing, and supervising the practice of nursing; and
 - (n) Collaborating with other health professionals in the management of health care;
- (9) The practice of nursing by a licensed practical nurse means the assumption of responsibilities and accountability for nursing practice in accordance with knowledge and skills acquired through an approved program of practical nursing. A licensed practical nurse may function at the direction of a licensed practitioner or a registered nurse. Such responsibilities and performances of acts must utilize procedures leading to predictable outcomes and must include, but not be limited to:
- (a) Contributing to the assessment of the health status of individuals and groups;
 - (b) Participating in the development and modification of a plan of care;
 - (c) Implementing the appropriate aspects of the plan of care;
 - (d) Maintaining safe and effective nursing care rendered directly or indirectly;
 - (e) Participating in the evaluation of response to interventions; and
 - (f) Assigning and directing nursing interventions that may be performed by others and that do not conflict with the act;
- (10) Department means the Department of Health and Human Services Regulation and Licensure;
- (11) Director means the Director of Regulation and Licensure;
- (12) ~~Clinical nurse specialist means a registered nurse licensed in Nebraska who holds a master's degree or a doctoral degree in a nursing clinical specialty area;~~
- ~~(13)~~ Inactive status means the designation given to a licensee who requests this status and pays the fee. A licensee on inactive status is issued a card indicating inactive status but shall not practice;
- ~~(14)~~ (13) Lapsed status means the designation given to a licensee who requests this status. A licensee on lapsed status shall not practice;
- ~~(15)~~ (14) Expiration date means the date on which the license expires has passed. The licensee whose license has expired shall not practice;
- ~~(16)~~ (15) Suspended means the licensee's authority to practice has been temporarily removed as a result of disciplinary action;
- ~~(17)~~ (16) Revoked means the licensee's authority to practice has been removed as a result of disciplinary action. The licensee may apply for reinstatement of his or her license two years or more after the date of revocation;
- ~~(18)~~ (17) Reinstatement means the return to active status and the restoration of the authority to practice to a licensee who was previously licensed in this state;
- ~~(19)~~ (18) Verification means attesting to the current status of an individual's license;
- ~~(20)~~ (19) Certification means attesting to the current status of an individual's license, any disciplinary action taken, and the means by which the individual was licensed;
- ~~(21)~~ (20) Probation means that the individual's authority to practice is contingent on the licensee meeting specified conditions imposed as

a result of disciplinary action;

~~(22)~~ (21) Limited license means that certain restrictions have been imposed on the individual's authority to practice as a result of disciplinary action;

~~(23)~~ (22) Assignment means appointing or designating another individual the responsibility for the performance of nursing interventions;

~~(24)~~ (23) Delegation means transferring to another individual the authority, responsibility, and accountability to perform nursing interventions; and

~~(25)~~ (24) Direction means managing, guiding, and supervising the nursing interventions performed by another individual.

Sec. 25. Section 71-1,132.07, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.07. (1) The Board of Nursing is established. The board shall consist of eight registered nurse members, two licensed practical nurse members, and two consumer members, all of whom shall be appointed by the State Board of Health. The registered nurses on the Board of Nursing shall be from the following areas: (a) One practical nurse educator; (b) one associate degree or diploma nurse educator; (c) one baccalaureate nurse educator; (d) two nursing service administrators; (e) two staff nurses; and (f) one ~~clinical nurse specialist, advanced practice registered nurse, certified nurse practitioner-anesthetist, or certified nurse midwife~~ advanced practice registered nurse. The nursing service administrators, the staff nurses, and the licensed practical nurses shall be equally representative of acute care, long-term care, and community-based care. All congressional districts shall be equally represented on the board, and each member shall have been a bona fide resident of the congressional district from which he or she is appointed for a period of at least one year prior to the time of the appointment of such member.

(2) The terms of office of all board members shall be staggered terms of four years each as the State Board of Health determines.

(3) At the expiration of the term of any member, the State Board of Health may consult with appropriate nursing organizations regarding candidates for appointment. Appointments shall be made on or before December 1 of each year. In order to be considered for reappointment, a candidate must currently meet all criteria for initial appointment. Vacancies occurring on the Board of Nursing shall be filled for the unexpired terms by appointments made by the State Board of Health. No member shall serve more than two consecutive terms on the Board of Nursing. Any board member initially appointed for less than a full term shall be eligible to serve for two additional consecutive full terms.

(4) The State Board of Health shall have power to remove from office at any time any member of the Board of Nursing, after a public hearing pursuant to the Administrative Procedure Act, for physical or mental incapacity to carry out the duties of a board member, for continued neglect of duty, for incompetency, for acting beyond the individual member's scope of authority, for malfeasance in office, for any cause for which a license or certificate in the member's profession involved may be suspended or revoked, for a lack of licensure or certification in the member's profession, or for other sufficient cause.

(5) All members of the board are immune from individual civil liability while acting within the scope of their duties as board members.

(6) If the entire board, an individual member, or a staff member is sued, the Attorney General shall appoint an attorney to represent the involved parties.

(7) The department shall adopt and promulgate rules and regulations which establish definitions of conflicts of interest for members of the board and which establish procedures in the case such a conflict arises.

Sec. 26. Section 71-1,132.08, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.08. (1) Each licensed practical nurse educator on the board shall (a) be a registered nurse currently licensed in the state, (b) have graduated with a baccalaureate degree in nursing or a related field of study, (c) have had a minimum of three years' experience in administration, teaching, or consultation in practical nurse education, and (d) be currently employed as a practical nurse educator.

(2) Each associate degree or diploma nurse educator on the board and the baccalaureate nurse educator on the board shall (a) be a registered nurse currently licensed in the state, (b) have graduated with a master's degree in nursing, (c) have had a minimum of five years' experience in administration, teaching, or consultation in nursing education, and (d) be currently employed in the field being represented.

(3) Each staff nurse on the board shall (a) be a registered nurse currently licensed in the state, (b) have had a minimum of five years' experience in nursing, and (c) be currently employed as a staff nurse in the provision of patient care services.

(4) Each nursing service administrator on the board shall (a) be a registered nurse currently licensed in the state, (b) have had a minimum of five years' experience in nursing service administration, and (c) be currently employed in such field.

(5) Each licensed practical nurse member shall (a) have completed at least four years of high school study, (b) be licensed as a licensed practical nurse in this state, (c) have obtained a certificate or diploma from a state-approved practical nursing program, (d) have been actively engaged in practical nursing for at least five years, and (e) be currently employed in the provision of patient care services as a licensed practical nurse in the state.

(6) Each consumer member shall (a) not have been involved in providing health care services in this state for at least three years prior to his or her appointment, (b) be of voting age, and (c) be a resident of the state.

(7) ~~The clinical nurse specialist, advanced practice registered nurse, certified nurse practitioner-anesthetist, or certified nurse midwife~~ on the board shall (a) have a minimum of five years' experience as, in the role and (b) be currently employed in the role as, and (c) ~~the advanced practice registered nurse, nurse practitioner-anesthetist, or nurse midwife must be currently licensed or certified according to the Advanced Practice Registered Nurse Act or the Nebraska Certified Nurse Midwifery Practice Act~~ be licensed as an advanced practice registered nurse.

(8) For purposes of this section, current employment means having practiced no less than two thousand hours in the two years preceding appointment.

Sec. 27. Section 71-1,132.11, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.11. The board may adopt, promulgate, and revise, with the approval of the department, such rules and regulations consistent with the Nurse Practice Act as may be necessary to carry the act into effect. All such rules and regulations shall be published and distributed. The board shall:

(1) Adopt reasonable and uniform standards for nursing practice and nursing education;

(2) If requested, issue or decline to issue advisory opinions defining acts which in the opinion of the board are or are not permitted in the practice of nursing as defined in section 71-1,132.05. Such opinions shall be considered informational only and are nonbinding. Practice-related information provided by the board to registered nurses or licensed practical nurses licensed under the act shall be made available by the board on request to nurses practicing in this state under a license issued by a state that is a party to the Nurse Licensure Compact;

(3) Establish rules and regulations for approving and classifying programs preparing nurses, taking into consideration administrative and organizational patterns, the curriculum, students, student services, faculty, and instructional resources and facilities, and provide surveys for each educational program as determined by the board;

(4) Approve educational programs which meet the requirements of the act;

(5) ~~Examine, license, and renew the licenses of duly qualified applicants;~~

~~(6)~~ Keep a record of all its proceedings and compile an annual report for distribution;

~~(7)~~ (6) Establish continuing competency requirements. Continuing education is sufficient to meet continuing competency requirements. The requirements may also include, but not be limited to, one or more of the continuing competency activities listed in section 71-161.09 which a licensee may select as an alternative to continuing education;

~~(8)~~ (7) Adopt rules and regulations establishing standards for delegation of nursing activities, including training or experience requirements, competency determination, and nursing supervision;

~~(9)~~ (8) Make recommendations in accordance with section 71-168.01 regarding licensure and disciplinary dispositions for individuals who have violated the act and upon the grounds provided in the Uniform Licensing Law;

~~(10)~~ (9) Collect data regarding nursing;

~~(11)~~ (10) Provide consultation and conduct conferences, forums, studies, and research on nursing practice and education;

~~(12)~~ (11) Join organizations that develop and regulate the national

nursing licensure examinations and exclusively promote the improvement of the legal standards of the practice of nursing for the protection of the public health, safety, and welfare;

~~(13)~~ (12) Appoint special purpose groups or ad hoc groups to advise the board; and

~~(14)~~ (13) Administer the provisions of the Advanced Practice Registered Nurse Act as it applies to certified registered nurse anesthetists, the Nebraska Certified Nurse Midwifery Practice Act, and the Nurse Licensure Compact. In reporting information to the coordinated licensure information system under Article VII of the compact, the department may disclose personal identifying information about a nurse, including his or her social security number.

Sec. 28. Section 71-1,132.18, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.18. Any person who holds a license to practice as a registered nurse in this state has the right to use the title Registered Nurse and the abbreviation R.N. No other person shall assume or use such title or abbreviation or any words, letters, signs, or devices to indicate that the person using the same is authorized to practice registered nursing. ~~No person shall use the title Clinical Nurse Specialist unless he or she is a clinical nurse specialist as defined in section 71-1,132.05.~~

Sec. 29. Section 71-1,142, Revised Statutes Supplement, 2004, is amended to read:

71-1,142. For purposes of sections 71-1,142 to 71-1,151 and elsewhere in the Uniform Licensing Law, unless the context otherwise requires:

(1) Practice of pharmacy means (a) the interpretation, evaluation, and implementation of a medical order, (b) the dispensing of drugs and devices, (c) drug product selection, (d) the administration of drugs or devices, (e) drug utilization review, (f) patient counseling, (g) the provision of pharmaceutical care, and (h) the responsibility for compounding and labeling of dispensed or repackaged drugs and devices, proper and safe storage of drugs and devices, and maintenance of proper records. The active practice of pharmacy means the performance of the functions set out in this subdivision by a pharmacist as his or her principal or ordinary occupation;

(2) Administer means to directly apply a drug or device by injection, inhalation, ingestion, or other means to the body of a patient or research subject;

(3) Administration means the act of (a) administering, (b) keeping a record of such activity, and (c) observing, monitoring, reporting, and otherwise taking appropriate action regarding desired effect, side effect, interaction, and contraindication associated with administering the drug or device;

(4) Board means the Board of Pharmacy;

(5) Caregiver means any person acting as an agent on behalf of a patient or any person aiding and assisting a patient;

(6) Chart order means an order for a drug or device issued by a practitioner for a patient who is in the hospital where the chart is stored or for a patient receiving detoxification treatment or maintenance treatment pursuant to section 28-412. Chart order does not include a prescription;

(7) Compounding means preparing, mixing, or assembling a drug or device (a) as the result of a practitioner's medical order or initiative occurring in the course of practice based upon the relationship between the practitioner, patient, and pharmacist or (b) for the purpose of, or incident to, research, teaching, or chemical analysis and not for sale or dispensing. Compounding includes preparing drugs or devices in anticipation of medical orders based upon routine, regularly observed prescribing patterns;

(8) Delegated dispensing means the practice of pharmacy by which one or more pharmacists have jointly agreed, on a voluntary basis, to work in conjunction with one or more persons pursuant to sections 71-1,147.42 to 71-1,147.64 under a protocol which provides that such person may perform certain dispensing functions authorized by the pharmacist or pharmacists under certain specified conditions and limitations;

(9) Deliver or delivery means to actually, constructively, or attempt to transfer a drug or device from one person to another, whether or not for consideration;

(10) Department means the Department of Health and Human Services Regulation and Licensure;

(11) Device means an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part, or accessory, which is prescribed by a practitioner and dispensed by a pharmacist or other person authorized by law to do so;

(12) Dialysis drug or device distributor means a manufacturer or wholesaler who provides dialysis drugs, solutions, supplies, or devices, to persons with chronic kidney failure for self-administration at the person's home or specified address, pursuant to a prescription;

(13) Dialysis drug or device distributor worker means a person working for a dialysis drug or device distributor with a delegated dispensing permit who has completed the approved training and has demonstrated proficiency to perform the task or tasks of assembling, labeling, or delivering drugs or devices pursuant to a prescription;

(14) Dispense or dispensing means interpreting, evaluating, and implementing a medical order, including preparing and delivering a drug or device to a patient or caregiver in a suitable container appropriately labeled for subsequent administration to, or use by, a patient. Dispensing includes (a) dispensing incident to practice, (b) dispensing pursuant to a delegated dispensing permit, (c) dispensing pursuant to a medical order, and (d) any transfer of a prescription drug or device to a patient or caregiver other than by administering;

(15) Distribute means to deliver a drug or device, other than by administering or dispensing;

(16) Facility means a health care facility as defined in section 71-413;

(17) Hospital has the same meaning as in section 71-419;

(18) Person means an individual, corporation, partnership, limited liability company, association, or other legal entity;

(19) Labeling means the process of preparing and affixing a label to any drug container or device container, exclusive of the labeling by a manufacturer, packer, or distributor of a nonprescription drug or commercially packaged legend drug or device. Any such label shall include all information required by federal and state law or regulation;

(20) Medical order means a prescription, a chart order, or an order for pharmaceutical care issued by a practitioner;

(21) Pharmaceutical care means the provision of drug therapy for the purpose of achieving therapeutic outcomes that improve a patient's quality of life. Such outcomes include (a) the cure of disease, (b) the elimination or reduction of a patient's symptomatology, (c) the arrest or slowing of a disease process, or (d) the prevention of a disease or symptomatology. Pharmaceutical care includes the process through which the pharmacist works in concert with the patient and his or her caregiver, physician, or other professionals in designing, implementing, and monitoring a therapeutic plan that will produce specific therapeutic outcomes for the patient;

(22) Pharmacist means any person who is licensed by the State of Nebraska to practice pharmacy;

(23) Pharmacy has the same meaning as in section 71-425;

(24) Drugs, medicines, and medicinal substances means (a) articles recognized in the official United States Pharmacopoeia, the Homeopathic Pharmacopoeia of the United States, the official National Formulary, or any supplement to any of them, (b) articles intended for use in the diagnosis, cure, mitigation, treatment, or prevention of diseases in humans or animals, (c) articles, except food, intended to affect the structure or any function of the body of a human or an animal, (d) articles intended for use as a component of any articles specified in subdivision (a), (b), or (c) of this subdivision, except any device or its components, parts, or accessories, and (e) prescription drugs or devices as defined in subdivision (31) of this section;

(25) Patient counseling means the verbal communication by a pharmacist, pharmacist intern, or practitioner, in a manner reflecting dignity and the right of the patient to a reasonable degree of privacy, of information to the patient or caregiver in order to improve therapeutic outcomes by maximizing proper use of prescription drugs and devices and also includes the duties set out in section 71-1,147.35;

(26) Pharmacist in charge means a pharmacist who is designated on a pharmacy license or designated by a hospital as being responsible for the practice of pharmacy in the pharmacy for which a pharmacy license is issued and who works within the physical confines of such pharmacy for a majority of the hours per week that the pharmacy is open for business averaged over a twelve-month period or thirty hours per week, whichever is less;

(27) Pharmacist intern means a person who meets the requirements of section 71-1,144;

(28) Pharmacy technician means an individual at least eighteen years of age who is a high school graduate or officially recognized by the State Department of Education as possessing the equivalent degree of education, who has never been convicted of any drug-related misdemeanor or felony, and who, under the written control procedures and guidelines of an employing pharmacy,

may perform those functions which do not require professional judgment and which are subject to verification to assist a pharmacist in the practice of pharmacy;

(29) Practitioner means ~~an advanced practice registered nurse, a~~ certified registered nurse anesthetist, a certified nurse midwife, a dentist, an optometrist, a nurse practitioner, a physician assistant, a physician, a podiatrist, or a veterinarian;

(30) Prescribe means to issue a medical order;

(31) Prescription drug or device or legend drug or device means (a) a drug or device which is required under federal law to be labeled with one of the following statements prior to being dispensed or delivered: (i) Caution: Federal law prohibits dispensing without prescription; (ii) Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian; or (iii) "Rx Only" or (b) a drug or device which is required by any applicable federal or state law to be dispensed pursuant only to a prescription or chart order or which is restricted to use by practitioners only;

(32) Prescription means an order for a drug or device issued by a practitioner for a specific patient, for emergency use, or for use in immunizations. Prescription does not include a chart order;

(33) Nonprescription drugs means nonnarcotic medicines or drugs which may be sold without a medical order and which are prepackaged for use by the consumer and labeled in accordance with the requirements of the laws and regulations of this state and the federal government;

(34) Public health clinic worker means a person in a public health clinic with a delegated dispensing permit who has completed the approved training and has demonstrated proficiency to perform the task of dispensing authorized refills of oral contraceptives pursuant to a written prescription;

(35) Public health clinic means the department, any county, city-county, or multicounty health department, or any private not-for-profit family planning clinic licensed as a health clinic as defined in section 71-416;

(36) Signature means the name, word, or mark of a person written in his or her own hand with the intent to authenticate a writing or other form of communication or a digital signature which complies with section 86-611;

(37) Supervision means the immediate personal guidance and direction by the licensed pharmacist on duty in the facility of the performance by a pharmacy technician of authorized activities or functions subject to verification by such pharmacist, except that when a pharmacy technician performs authorized activities or functions to assist a pharmacist on duty in the facility when the prescribed drugs or devices will be administered by a licensed staff member or consultant or by a licensed physician assistant to persons who are patients or residents of a facility, the activities or functions of such pharmacy technician shall only be subject to verification by a pharmacist on duty in the facility;

(38) Verification means the confirmation by a supervising pharmacist of the accuracy and completeness of the acts, tasks, or functions undertaken by a pharmacy technician to assist the pharmacist in the practice of pharmacy;

(39) Written control procedures and guidelines means the document prepared and signed by the pharmacist in charge and approved by the board which specifies the manner in which basic levels of competency of pharmacy technicians employed by the pharmacy are determined, the manner in which supervision is provided, the manner in which the functions of pharmacy technicians are verified, the maximum ratio of pharmacy technicians to one pharmacist used in the pharmacy, and guidelines governing the use of pharmacy technicians and the functions which they may perform; and

(40) Medical gas distributor means a person who dispenses medical gases to a patient or ultimate user but does not include a person who manufactures medical gases or a person who distributes, transfers, delivers, dispenses, or sells medical gases to a person other than a patient or ultimate user.

Sec. 30. Section 71-1,143, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,143. As authorized by the Uniform Licensing Law, the practice of pharmacy may be engaged in by a pharmacist, a pharmacist intern, or a practitioner with a pharmacy license. The practice of pharmacy shall not be construed to include:

(1) Persons who sell, offer, or expose for sale completely denatured alcohol or concentrated lye, insecticides, and fungicides in original packages;

(2) Practitioners, other than veterinarians, certified nurse midwives, certified registered nurse anesthetists, and nurse practitioners, ~~and advanced practice registered nurses,~~ who dispense drugs or devices as an

incident to the practice of their profession, except that if such practitioner regularly engages in dispensing such drugs or devices to his or her patients for which such patients are charged, such practitioner shall obtain a pharmacy license;

(3) Persons who sell, offer, or expose for sale nonprescription drugs or proprietary medicines, the sale of which is not in itself a violation of the Nebraska Liquor Control Act;

(4) Medical representatives, detail persons, or persons known by some name of like import, but only to the extent of permitting the relating of pharmaceutical information to health care professionals;

(5) Licensed veterinarians practicing within the scope of their profession;

(6) ~~Advanced practice registered nurses~~ Certified nurse midwives, certified registered nurse anesthetists, and nurse practitioners who dispense sample medications which are provided by the manufacturer and are dispensed at no charge to the patient;

(7) Hospitals engaged in the compounding and dispensing of drugs and devices pursuant to chart orders for persons registered as patients and within the confines of the hospital, except that if a hospital engages in such compounding and dispensing for persons not registered as patients and within the confines of the hospital, such hospital shall obtain a pharmacy license or delegated dispensing permit;

(8) Optometrists who prescribe or dispense eyeglasses or contact lenses to their own patients;

(9) Registered nurses employed by a hospital who administer pursuant to a chart order, or procure for such purpose, single doses of drugs or devices from original drug or device containers or properly labeled prepackaged drug or device containers to persons registered as patients and within the confines of the hospital;

(10) Persons employed by a facility where dispensed drugs and devices are delivered from a pharmacy for pickup by a patient or caregiver and no dispensing or storage of drugs or devices occurs; and

(11) Persons who sell or purchase medical products, compounds, vaccines, or serums used in the prevention or cure of animal diseases and maintenance of animal health if such medical products, compounds, vaccines, or serums are not sold or purchased under a direct, specific, written medical order of a licensed veterinarian.

Sec. 31. Section 71-1,198, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,198. For purposes of sections 71-1,198 to 71-1,205, unless the context otherwise requires:

(1) Law enforcement agency means any governmental agency charged by law with carrying out any of the regulatory provisions or any person authorized by law to make arrests within the State of Nebraska;

(2) Practitioner means any person required to be licensed, certified, or registered under the regulatory provisions, whether or not such person is so licensed, certified, or registered; and

(3) Regulatory provisions means the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Emergency Medical Services Act, the Licensed Practical Nurse-Certified Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, the Uniform Controlled Substances Act, the Uniform Licensing Law, the Wholesale Drug Distributor Licensing Act, or sections 71-3702 to 71-3715, 71-4701 to 71-4719, or 71-6053 to 71-6068.

Sec. 32. Section 71-1,339, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,339. ~~Beginning July 1, 1995, the~~ The clerk of any county or district court in this state shall report to the Department of Health and Human Services Regulation and Licensure the conviction of any person licensed, certified, or registered by the department under the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Emergency Medical Services Act, the Licensed Practical Nurse-Certified Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, the Uniform Controlled Substances Act, the Uniform Licensing Law, the Wholesale Drug Distributor Licensing Act, or sections 71-3702 to 71-3715, 71-4701 to 71-4719, or 71-6053 to 71-6068 of any felony or of any misdemeanor involving the use, sale, distribution, administration, or dispensing of a controlled substance, alcohol or chemical impairment, or

substance abuse and shall also report a judgment against any such licensee, certificate holder, or registrant arising out of a claim of professional liability. The Attorney General or city or county prosecutor prosecuting any such criminal action and plaintiff in any such civil action shall provide the court with information concerning the licensure, certification, or registration of the defendant or party. Notice to the department shall be filed within thirty days after the date of conviction or judgment in a manner agreed to by the Director of Regulation and Licensure and the State Court Administrator.

Sec. 33. Section 71-3,106, Revised Statutes Supplement, 2004, is amended to read:

71-3,106. The Nebraska Cosmetology Act does not apply to or restrict the activities of the following:

(1) Any person holding a current license or certificate issued pursuant to Chapter 71 when engaged in the usual and customary practice of his or her profession or occupation;

(2) Any person engaging solely in earlobe piercing;

(3) Any person when engaged in domestic or charitable administration;

(4) Any person performing any of the practices of cosmetology or nail technology solely for theatrical presentations or other entertainment functions;

(5) Any person practicing cosmetology, electrology, esthetics, or nail technology within the confines of a hospital, nursing home, massage therapy establishment, funeral establishment, or other similar establishment or facility licensed or otherwise regulated by the department, except that no unlicensed or unregistered person may accept compensation for such practice;

(6) Any person providing services during a bona fide emergency;

(7) Any retail or wholesale establishment or any person engaged in the sale of cosmetics, nail technology products, or other beauty products when the products are applied by the customer or when the application of the products is in direct connection with the sale or attempted sale of such products at retail;

(8) Any person when engaged in nonvocational training;

(9) A person demonstrating on behalf of a manufacturer or distributor any cosmetology, nail technology, electrolysis, or body art equipment or supplies if such demonstration is performed without charge; ~~and~~

(10) Any person or licensee engaged in the practice or teaching of manicuring; and

(11) Any person or licensee engaged in the practice of airbrush tanning or temporary, nonpermanent airbrush tattooing.

Sec. 34. Section 71-541, Reissue Revised Statutes of Nebraska, is amended to read:

71-541. A physician, an advanced practice registered nurse practicing under and in accordance with his or her applicable certification act, a physician assistant, a pharmacist, a licensed health care facility, a public immunization clinic, a local or district health department, the Department of Health and Human Services, the Department of Health and Human Services Regulation and Licensure, and the Department of Health and Human Services Finance and Support may share immunization information which is not restricted under section 71-540. The unrestricted immunization information shared may include, but is not limited to, the patient's name, date of birth, dates and vaccine types administered, and any immunization information obtained from other sources.

Sec. 35. Section 71-1405, Reissue Revised Statutes of Nebraska, is amended to read:

71-1405. (1) Within thirty days after the date of the birth of any child born in this state with visible congenital deformities, the physician, certified nurse midwife, or person acting as midwife, who is other person in attendance upon such birth, shall prepare and file with the Department of Health and Human Services Finance and Support, a statement setting forth such visible congenital deformity. The form of such statement shall be prepared by the Director of Finance and Support and shall be a part of the birth report furnished by the department.

(2) For purposes of this section, congenital deformities include a cleft lip, cleft palate, hernia, congenital cataract, or disability resulting from congenital or acquired heart disease, or any congenital abnormality or orthopedic condition that can be cured or materially improved. The orthopedic condition or deformity includes any deformity or disease of childhood generally recognized by the medical profession, and it includes deformities resulting from burns.

Sec. 36. Sections 36 to 46 of this act shall be known and may be

cited as the Advanced Practice Registered Nurse Licensure Act.

Sec. 37. The Legislature finds and declares that:

(1) Because of the geographic maldistribution of health care services in Nebraska, it is necessary to utilize the skills and proficiency of existing health professionals more efficiently;

(2) It is necessary to encourage the more effective utilization of the skills of registered nurses by enabling them to perform advanced roles in nursing; and

(3) The Advanced Practice Registered Nurse Licensure Act is established to encourage registered nurses to perform advanced roles in nursing.

Sec. 38. For purposes of the Advanced Practice Registered Nurse Licensure Act and except as provided in section 71-1708, the definitions found in section 71-1,132.05 shall apply.

Sec. 39. Section 71-1718.01, Reissue Revised Statutes of Nebraska, is amended to read:

~~71-1718.01.~~ (1) The Board of Advanced Practice Registered Nurses is established. The purpose of the board is to (a) provide for the health, safety, and welfare of the citizens, (b) ensure that licensees serving the public meet minimum standards of proficiency and competency, and (c) control the profession in the interest of consumer protection. ~~The Board of Advanced Practice Registered Nurses is the direct and only successor to the Board of Advanced Registered Nurse Practitioners.~~

(2) (a) Until the operative date of this section, the ~~The~~ board shall consist of ~~(a)~~ (i) five advanced practice registered nurses representing different advanced practice registered nurse specialties for which a license has been issued, ~~(b)~~ (ii) five physicians licensed under the Uniform Licensing Law to practice medicine in Nebraska, at least three of whom shall have a current collaborating relationship with an advanced practice registered nurse, ~~(c)~~ (iii) three consumer members, and ~~(d)~~ (iv) one licensed pharmacist.

(b) On and after the operative date of this section, the board shall consist of:

(i) One nurse practitioner holding a certificate under the Nurse Practitioner Act, one certified nurse midwife holding a certificate under the Nebraska Certified Nurse Midwifery Practice Act, one certified registered nurse anesthetist holding a certificate under the Certified Registered Nurse Anesthetist Act, and one clinical nurse specialist holding a certificate under the Clinical Nurse Specialist Practice Act, except that the initial clinical nurse specialist appointee may be a clinical nurse specialist practicing pursuant to the Nurse Practice Act as such act existed prior to the operative date of this section. Of the initial appointments under this subdivision, one shall be for a one-year term, one shall be for a two-year term, one shall be for a three-year term, and one shall be for a four-year term. All subsequent appointments under this subdivision shall be for four-year terms;

(ii) Three physicians, one of whom shall have a professional relationship with a nurse practitioner, one of whom shall have a professional relationship with a certified nurse midwife, and one of whom shall have a professional relationship with a certified registered nurse anesthetist. Of the initial appointments under this subdivision, one shall be for a two-year term, one shall be for a three-year term, and one shall be for a four-year term. All subsequent appointments under this subdivision shall be for four-year terms; and

(iii) Two public members. Of the initial appointments under this subdivision, one shall be for a three-year term, and one shall be for a four-year term. All subsequent appointments under this subdivision shall be for four-year terms. Public members of the board shall have the same qualifications as provided in subsection (1) of section 71-113.

(c) Members of the board serving immediately before the operative date of this section shall serve until members are appointed and qualified under subdivision (2) (b) of this section.

(3) The members of the board shall be appointed by the State Board of Health. Members shall be appointed for terms of four years except as otherwise provided in subdivisions (2) (b) and (c) of this section. At the expiration of the term of any member, the State Board of Health may consult with appropriate professional organizations regarding candidates for appointment to the Board of Advanced Practice Registered Nurses. Upon expiration of terms, appointments or reappointments shall be made on or before December 1 of each year. Vacancies on the Board of Advanced Practice Registered Nurses shall be filled for the unexpired term by appointments made by the State Board of Health. No member shall serve more than two consecutive terms on the Board of Advanced Practice Registered Nurses.

(4) The State Board of Health has power to remove from office any

member of the Board of Advanced Practice Registered Nurses, after a public hearing pursuant to the Administrative Procedure Act, for physical or mental incapacity to carry out the duties of a board member, for continued neglect of duty, for incompetence, for acting beyond the individual member's scope of authority, for malfeasance in office, for any cause for which a license or certificate in the member's profession involved may be suspended or revoked, for a lack of licensure or certification in the member's profession, or for other sufficient cause.

(5) Each member of the Board of Advanced Practice Registered Nurses shall receive a per diem of thirty dollars per day for each day the member is actually engaged in the discharge of his or her official duties and shall be reimbursed for travel, lodging, and other necessary expenses incurred as a member of the board pursuant to sections 81-1174 to 81-1177.

(6) The department shall adopt and promulgate rules and regulations which define conflicts of interest for members of the Board of Advanced Practice Registered Nurses and which establish procedures in case such a conflict arises.

Sec. 40. Section 71-1718.02, Reissue Revised Statutes of Nebraska, is amended to read:

~~71-1718.02.~~ The Board of Advanced Practice Registered Nurses shall:

(1) Establish standards for integrated practice agreements between ~~advanced practice registered nurses and collaborating physicians~~ collaborating physicians and certified nurse midwives, and nurse practitioners;

(2) Monitor the scope of practice by ~~advanced practice registered nurses and advise the Board of Nursing in matters pertaining to the scope of practice of advanced practice registered nurses~~ certified nurse midwives, certified registered nurse anesthetists, clinical nurse specialists, and nurse practitioners; and

(3) Administer and enforce the Advanced Practice Registered Nurse Licensure Act in order to (a) provide for the health, safety, and welfare of the citizens, (b) ensure that advanced practice registered nurses serving the public meet minimum standards of proficiency and competency, (c) control the profession in the interest of consumer protection, (d) regulate the scope of advanced practice nursing, (e) recommend disciplinary actions as provided in this section, and (f) enforce licensure requirements;

(4) Recommend disciplinary action relating to licenses of advanced practice registered nurses and certificates of certified nurse midwives, certified registered nurse anesthetists, clinical nurse specialists, and nurse practitioners;

(5) Engage in other activities not inconsistent with the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Nebraska Certified Nurse Midwifery Practice Act, and the Nurse Practitioner Act; and

(6) Approve rules and regulations ~~with the Board of Nursing~~ to implement the Advanced Practice Registered Nurse Licensure Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Nebraska Certified Nurse Midwifery Practice Act, and the Nurse Practitioner Act, for adoption and promulgation by the department. Such rules and regulations shall include: (a) Approved certification organizations and approved certification programs; (b) continuing competency requirements. The requirements may include, but not be limited to, continuing education, continuing practice, national recertification, a reentry program, peer review including patient outcomes, ~~supervised practice~~, examination, or other continuing competency activities listed in section 71-161.09; (c) grounds for discipline; (d) ~~licensure~~, license issuance, renewal, and ~~license reinstatement requirements~~ of licenses and certificates; (e) fees; (f) professional liability insurance; and (g) conflict of interest for board members.

Sec. 41. The department shall issue a license as an advanced practice registered nurse to a registered nurse who meets the requirements of subsection (1) or (3) of section 42 of this act. The department may issue a license as an advanced practice registered nurse to a registered nurse pursuant to subsection (2) of section 42 of this act.

Sec. 42. (1) An applicant for initial licensure as an advanced practice registered nurse shall:

(a) Be licensed as a registered nurse under the Nurse Practice Act or have authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska;

(b) Be a graduate of or have completed a graduate-level advanced practice registered nurse program in a clinical specialty area of certified registered nurse anesthetist, clinical nurse specialist, certified nurse midwife, or nurse practitioner, which program is accredited by a national

accrediting body;

(c) Be certified as a certified registered nurse anesthetist, a clinical nurse specialist, a certified nurse midwife, or a nurse practitioner, by an approved certifying body or an alternative method of competency assessment approved by the board, pursuant to the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Nebraska Certified Nurse Midwifery Practice Act, or the Nurse Practitioner Act, as appropriate to the applicant's educational preparation;

(d) Submit a completed written application to the department which includes the applicant's social security number and appropriate fees established and collected as provided in section 71-162;

(e) Provide evidence as required by rules and regulations approved by the board and adopted and promulgated by the department; and

(f) Have committed no acts or omissions which are grounds for disciplinary action in another jurisdiction or, if such acts have been committed and would be grounds for discipline under the Nurse Practice Act, the board has found after investigation that sufficient restitution has been made.

(2) (a) Except as provided in subdivisions (b) through (d) of this subsection, the department may issue a license by endorsement under this section to an applicant who holds a license from another jurisdiction if the licensure requirements of such other jurisdiction meet or exceed the requirements for licensure as an advanced practice registered nurse under the Advanced Practice Registered Nurse Licensure Act.

(b) The department may issue a license as an advanced practice registered nurse by endorsement to an applicant who holds a credential equivalent to a nurse practitioner issued by another jurisdiction if such applicant holds a certificate or degree described in subdivision (3) of section 71-1717.

(c) The department may issue a license as an advanced practice registered nurse by endorsement to an applicant who holds a credential equivalent to a certified registered nurse anesthetist issued by another jurisdiction if such applicant meets the requirements of subdivision (4) of section 71-1730 as such subdivision existed on December 31, 1998.

(d) The department may issue a license as an advanced practice registered nurse by endorsement to an applicant who holds a credential equivalent to a certified nurse midwife issued by another jurisdiction if such applicant meets the requirements of subsection (1) of section 71-1755 as such subsection existed immediately before the operative date of this section.

(e) An applicant under this subsection shall submit a completed application to the department which includes the applicant's social security number, fees established and collected as provided in section 71-162, and other evidence as required by rules and regulations approved by the board and adopted and promulgated by the department.

(3) A person licensed as an advanced practice registered nurse or certified as a certified registered nurse anesthetist or a certified nurse midwife in this state on the operative date of this section shall be issued a license by the department as an advanced practice registered nurse on such date.

(4) A person licensed as an advanced practice registered nurse in this state may use the title advanced practice registered nurse and the abbreviation APRN.

Sec. 43. (1) The license of each person licensed under the Advanced Practice Registered Nurse Licensure Act shall be renewed at the same time and in the same manner as renewal of his or her certificate described in subdivision (c) of this subsection. Renewal of such a license shall require that the applicant have (a) a license as a registered nurse issued by the state or have the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska, (b) documentation of continuing competency, either by reference, peer review, examination, or one or more of the continuing competency activities listed in section 71-161.09, as established by the board in rules and regulations approved by the board and adopted and promulgated by the department, and (c) a certificate issued under the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Nebraska Certified Nurse Midwifery Practice Act, or the Nurse Practitioner Act.

(2) The department shall establish and collect fees for renewal as provided in section 71-162.

Sec. 44. A license issued under the Advanced Practice Registered Nurse Licensure Act may be denied, refused renewal, revoked, suspended, or disciplined in any other manner for any violation of the act, for physical or mental disability or incapacity, for gross incompetence, or for any reason for

which a license issued under the Nurse Practice Act may be denied, refused renewal, revoked, suspended, or disciplined. The methods and procedures provided in the Nurse Practice Act for opportunity for hearing, notice of hearing, presentation of evidence, conduct of a hearing, reinstatement, and related matters shall apply to disciplinary actions under this section. A decision to deny, refuse renewal of, revoke, suspend, or discipline a license as an advanced practice registered nurse may be appealed, and the appeal shall be in accordance with the Administrative Procedure Act.

Sec. 45. (1) An advanced practice registered nurse's license lapses if he or she (a) does not have a current license to practice as a registered nurse or has had his or her license to practice as a registered nurse denied, refused renewal, suspended, or revoked or (b) renews his or her license to practice as a registered nurse but does not renew his or her advanced practice registered nurse's license.

(2) When an advanced practice registered nurse's license lapses, the right of the person whose license has lapsed to represent himself or herself as an advanced practice registered nurse and to practice the activities for which a license is required terminates. To restore the license to active status, the person shall meet the requirements for renewal which are in effect at the time that he or she wishes to restore the license and shall pay the renewal fee and the late fee established and collected as provided in section 71-162.

Sec. 46. Any person practicing as an advanced practice registered nurse who does not hold a license as such issued by the department and who possesses a license to engage in any health profession for which a license is issued by the department may have such other license denied, refused renewal, suspended, or revoked or have other disciplinary action taken against such license by the department pursuant to the provisions of the Nurse Practice Act or the Uniform Licensing Law relating to such profession, irrespective of any criminal proceedings for practicing without a license as an advanced practice registered nurse.

Sec. 47. Section 71-1704, Reissue Revised Statutes of Nebraska, is amended to read:

71-1704. Sections 71-1704 to ~~71-1737~~ 71-1726.02 shall be known and may be cited as the Advanced Practice Registered Nurse Practitioner Act.

Sec. 48. Section 71-1706, Reissue Revised Statutes of Nebraska, is amended to read:

71-1706. For purposes of the Advanced Practice Registered Nurse Practitioner Act, unless the context otherwise requires, and except as provided in section 71-1729, the definitions provided in sections 71-1707 to 71-1717 shall apply.

Sec. 49. Section 71-1707, Reissue Revised Statutes of Nebraska, is amended to read:

71-1707. Advanced practice registered nurse Nurse practitioner means a registered nurse who meets the requirements established in section 71-1722 and who holds a current license as an advanced practice registered nurse issued by the department certificate issued under the Nurse Practitioner Act.

Sec. 50. Section 71-1709.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-1709.02. Consultation means a process whereby an advanced practice registered nurse a nurse practitioner seeks the advice or opinion of a physician or another health care practitioner.

Sec. 51. Section 71-1714, Reissue Revised Statutes of Nebraska, is amended to read:

71-1714. Preceptorship means the clinical practice component of an educational program for the preparation of advanced practice registered nurses nurse practitioners.

Sec. 52. Section 71-1716, Reissue Revised Statutes of Nebraska, is amended to read:

71-1716. Collaboration means a process and relationship in which an advanced practice registered nurse a nurse practitioner, together with other health professionals, delivers health care within the scope of authority of the various clinical specialty practices.

Sec. 53. Section 71-1716.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-1716.02. Approved certification program means a certification process for advanced practice registered nurses nurse practitioners utilized by an approved certifying body that (1) requires evidence of completion of a formal program of study in an advanced practice registered the nurse practitioner clinical specialty, (2) requires successful completion of a nationally recognized certification examination developed by the approved

certifying body, (3) provides an ongoing recertification program, and (4) is approved by the board.

Sec. 54. Section 71-1716.03, Reissue Revised Statutes of Nebraska, is amended to read:

71-1716.03. Integrated practice agreement means a written agreement between ~~an advanced practice registered nurse~~ a nurse practitioner and a collaborating physician in which the ~~advanced practice registered nurse practitioner~~ and the collaborating physician provide for the delivery of health care through an integrated practice. The integrated practice agreement shall provide that the ~~advanced practice registered nurse practitioner~~ and the collaborating physician will practice collaboratively within the framework of their respective scopes of practice. Each provider shall be responsible for his or her individual decisions in managing the health care of patients. Integrated practice includes consultation, collaboration, and referral.

The ~~advanced practice registered nurse practitioner~~ and the collaborating physician shall have joint responsibility for patient care, based upon the scope of practice of each practitioner. The collaborating physician shall be responsible for supervision of the ~~advanced practice registered nurse practitioner~~ to ensure the quality of health care provided to patients.

For purposes of this section:

(1) Collaborating physician means a physician or osteopathic physician licensed in Nebraska and practicing in the same geographic area and practice specialty, related specialty, or field of practice as the ~~advanced practice registered nurse practitioner~~; and

(2) Supervision means the ready availability of the collaborating physician for consultation and direction of the activities of the ~~advanced practice registered nurse practitioner~~ within the ~~advanced practice registered nurse's~~ nurse practitioner's defined scope of practice.

Sec. 55. Section 71-1716.05, Reissue Revised Statutes of Nebraska, is amended to read:

71-1716.05. Referral means a process whereby ~~the advanced practice registered nurse~~ a nurse practitioner directs the patient to a physician or other health care practitioner for management of a particular problem or aspect of the patient's care.

Sec. 56. Section 71-1717, Reissue Revised Statutes of Nebraska, is amended to read:

71-1717. Approved ~~advanced practice registered nurse practitioner~~ program means a program which:

(1) Is a minimum of one full-time academic year or nine months in length and includes both a didactic component and a preceptorship of five hundred contact hours;

(2) Includes, but is not limited to, instruction in biological, behavioral, and health sciences relevant to practice as ~~an advanced practice registered nurse~~ a nurse practitioner in a specific clinical area; and

(3) ~~Except for~~ For the specialties of women's health and neonatal, grants a post-master certificate, master's degree, or doctoral degree for all applicants who graduated on or after the operative date of this section, and for all other specialties, grants a post-master certificate, master's degree, or doctoral degree for all applicants who graduated on or after July 19, 1996. ~~and granted a master's or doctoral degree, post-master certificate, or diploma for all applicants who graduated prior to July 19, 1996. A post-master certificate, a master's degree, or a doctoral degree is not required for programs in the speciality of women's health or neonatal.~~

Sec. 57. Section 71-1721, Reissue Revised Statutes of Nebraska, is amended to read:

71-1721. ~~An advanced practice registered nurse~~ A nurse practitioner may provide health care services within specialty areas. ~~An advanced practice registered nurse~~ A nurse practitioner shall function by establishing collaborative, consultative, and referral networks as appropriate with other health care professionals. Patients who require care beyond the scope of practice of ~~an advanced practice registered nurse~~ a nurse practitioner shall be referred to an appropriate health care provider. ~~Advanced practice registered nurse~~ Nurse practitioner practice means health promotion, health supervision, illness prevention and diagnosis, treatment, and management of common health problems and chronic conditions, including:

(1) Assessing patients, ordering diagnostic tests and therapeutic treatments, synthesizing and analyzing data, and applying advanced nursing principles;

(2) Dispensing, incident to practice only, sample medications which are provided by the manufacturer and are provided at no charge to the patient; and

(3) Prescribing therapeutic measures and medications, except controlled substances listed in Schedule II of section 28-405 not otherwise provided for in this section, related to health conditions within the scope of practice. ~~An advanced practice registered nurse~~ A nurse practitioner may prescribe controlled substances listed in Schedule II of section 28-405 used for pain control for a maximum seventy-two-hour supply if any subsequent renewal of such prescription is by a licensed physician.

Sec. 58. Section 71-1721.07, Reissue Revised Statutes of Nebraska, is amended to read:

71-1721.07. The department shall, after consultation with the ~~boards~~ board, adopt and promulgate rules and regulations to carry out the Advanced Practice Registered Nurse Practitioner Act.

Sec. 59. Section 71-1722, Reissue Revised Statutes of Nebraska, is amended to read:

71-1722. Requirements for licensure as an advanced practice ~~registered nurse~~ certification as a nurse practitioner shall be the following:

(1) A license as a registered nurse in the State of Nebraska or the authority based upon the Nurse Licensure Compact to practice as a registered nurse in Nebraska;

(2) A completed application which includes the applicant's social security number;

(3) A licensure certification fee established and collected as provided in section 71-162;

(4) Evidence of having successfully completed ~~an approved advanced practice registered nurse program~~ a graduate-level program in the clinical specialty area of nurse practitioner practice, which program is accredited by a national accrediting body;

(5) Evidence of having successfully completed thirty contact hours of education in pharmacotherapeutics;

(6) Submission of proof of having passed an examination pertaining to the specific ~~advanced practice registered nurse practitioner~~ role in nursing adopted or approved by the ~~boards~~ board with the approval of the department. Such examination may include any recognized national credentialing examination for ~~advanced practice registered nurses~~ nurse practitioners conducted by an approved certifying body which administers an approved certification program; and

(7) If more than five years have elapsed since the completion of the ~~advanced practice registered nurse practitioner~~ program or since the applicant has practiced in the specific ~~advanced practice registered nurse practitioner~~ role, the applicant shall meet the requirements in subdivisions (1) through (6) of this section and provide evidence of continuing competency as required by the ~~boards~~ board pursuant to section ~~71-1718.02~~ 40 of this act.

Sec. 60. Section 71-1723, Reissue Revised Statutes of Nebraska, is amended to read:

71-1723. Anyone fulfilling the requirements listed in section 71-1722 shall be issued a license as an advanced practice registered nurse certificate as a nurse practitioner by the department.

Sec. 61. Section 71-1723.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-1723.01. A person licensed as an advanced ~~registered nurse practitioner~~ practice registered nurse in this state on ~~April 14, 2000,~~ the operative date of this section shall be ~~deemed to be licensed~~ issued a license by the department as an advanced practice registered nurse under the Advanced Practice Registered Nurse Licensure Act and shall be issued a certificate by the department as a nurse practitioner under the Nurse Practitioner Act on such date. A person licensed to practice as an advanced practice registered nurse in this state may use the title advanced practice registered nurse and the abbreviation APRN certified as a nurse practitioner in this state may use the title nurse practitioner and the abbreviation NP.

Sec. 62. Section 71-1723.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-1723.02. (1) ~~An advanced practice registered nurse~~ A nurse practitioner (a) who has a master's degree or doctorate degree in nursing and has completed an approved ~~advanced practice registered nurse practitioner~~ program, (b) who can demonstrate separate course work in pharmacotherapeutics, advanced health assessment, and pathophysiology or psychopathology, and (c) who has completed a minimum of two thousand hours of practice under the supervision of a physician shall (i) submit to the department an integrated practice agreement with a collaborating physician and (ii) furnish proof of professional liability insurance required under section 71-1723.04 prior to commencing practice.

(2) ~~An advanced practice registered nurse who intends to practice~~

~~the clinical specialty of neonatal or women's health and who does not meet the education and training requirements of subsection (1) of this section or an advanced practice registered nurse~~ A nurse practitioner who needs to obtain the two thousand hours of supervised practice required under subdivision (1)(c) of this section shall (a) submit to the department one or more integrated practice agreements with a collaborating physician, (b) furnish proof of jointly approved protocols with a collaborating physician which shall guide the ~~advanced practice registered nurse's~~ nurse practitioner's practice, and (c) furnish proof of professional liability insurance required under section 71-1723.04.

(3) If, after a diligent effort to obtain an integrated practice agreement, ~~an advanced practice registered nurse~~ a nurse practitioner is unable to obtain an integrated practice agreement with one physician, the Board of Advanced Practice Registered Nurses board may waive the requirement of an integrated practice agreement upon a showing that the applicant (a) meets the requirements of subsection (1) of this section, (b) has made a diligent effort to obtain an integrated practice agreement, and (c) will practice in a geographic area where there is a shortage of health care services.

Sec. 63. Section 71-1723.03, Reissue Revised Statutes of Nebraska, is amended to read:

71-1723.03. Nothing in the Advanced Practice Registered Nurse Practitioner Act shall prohibit ~~an advanced practice registered nurse~~ a nurse practitioner from consulting or collaborating with and referring patients to health care providers not included in the ~~advanced practice registered nurse's~~ nurse practitioner's integrated practice agreement.

Sec. 64. Section 71-1723.04, Reissue Revised Statutes of Nebraska, is amended to read:

71-1723.04. (1) ~~Advanced practice registered nurses~~ Nurse practitioners shall maintain in effect professional liability insurance with such coverage and limits as may be established by the board.

(2) If ~~an advanced practice registered nurse~~ a nurse practitioner renders services in a hospital or other health care facility, he or she shall be subject to the rules and regulations of that facility. Such rules and regulations may include, but need not be limited to, reasonable requirements that the ~~advanced practice registered nurse practitioner~~ and all collaborating licensed practitioners maintain professional liability insurance with such coverage and limits as may be established by the hospital or other health care facility upon the recommendation of the medical staff.

Sec. 65. Section 71-1724, Reissue Revised Statutes of Nebraska, is amended to read:

71-1724. Renewal of a ~~license as an advanced practice registered nurse certificate as a nurse practitioner~~ shall be at the same time and in the same manner as renewal of a license as a registered nurse and shall require:

(1) A license as a registered nurse in the State of Nebraska ~~or the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska;~~

(2) Documentation of continuing competency upon completion of continuing competency activities established by the ~~boards~~ board pursuant to section ~~71-1718.02~~ 40 of this act;

(3) Documentation of a minimum of two thousand eighty hours of practice as ~~an advanced practice registered nurse~~ a nurse practitioner within the five years immediately preceding renewal. These practice hours shall fulfill the requirements of the practice hours required for registered nurse renewal. Practice hours as an advanced practice registered nurse prior to the operative date of this section shall be used to fulfill the requirements of this section;

(4) Proof of current certification in the specific ~~advanced practice nurse practitioner~~ clinical specialty area by an approved certification program; and

(5) Payment of a biennial ~~license~~ renewal fee established and collected as provided in section 71-162.

Sec. 66. Section 71-1724.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-1724.01. The department may grant a temporary permit as ~~an advanced practice registered nurse~~ a nurse practitioner upon application:

(1) To graduates of an approved ~~advanced practice registered nurse practitioner~~ program pending results of the first credentialing examination following graduation;

(2) For one hundred twenty days to ~~advanced practice registered nurses~~ a nurse practitioner lawfully authorized to practice in another state pending completion of the application for a Nebraska ~~license certificate~~;

(3) To applicants for purposes of a reentry program or supervised practice as part of continuing competency activities established by the ~~boards~~ board pursuant to section ~~71-1718.02~~ 40 of this act.

Sec. 67. Section 71-1724.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-1724.02. Continuing competency requirements established by the ~~boards~~ board pursuant to section ~~71-1718.02~~ 40 of this act shall apply to:

(1) A ~~licensee nurse practitioner seeking to renew an advanced practice registered nurse license~~ his or her certificate;

(2) A ~~licensee nurse practitioner seeking to reinstate his or her certificate from lapsed status; an advanced practice registered nurse license;~~

(3) An applicant for licensure as an advanced practice registered nurse certification as a nurse practitioner who has been authorized by another state to practice in an advanced role; and

(4) An applicant for licensure as an advanced practice registered nurse certification as a nurse practitioner who has not practiced in that role during the five years immediately preceding application.

Sec. 68. Section 71-1725, Reissue Revised Statutes of Nebraska, is amended to read:

71-1725. A license to practice as an advanced practice registered nurse certificate to practice as a nurse practitioner may be denied, refused renewal, revoked, suspended, or disciplined in any other manner for any violation of the Advanced Practice Registered Nurse Licensure Act or the Nurse Practitioner Act, for physical or mental disability or incapacity, for gross incompetence, or for any reason for which a license to practice as a registered nurse or an advanced practice registered nurse could be denied, revoked, or suspended. The methods and procedures for notice of hearing, opportunity for hearing, presentation of evidence, conduct of hearing, reinstatement of license certificate, and related matters in such instance shall be the same as those pertaining to the denial, revocation, or suspension of a license to practice as a registered nurse. Any decision to deny, refuse renewal of, revoke, or suspend a license certificate to practice as an advanced practice registered nurse a nurse practitioner may be appealed. The appeal shall be in accordance with the Administrative Procedure Act.

Sec. 69. Section 71-1725.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-1725.01. (1) ~~An advanced practice registered nurse's license~~ A nurse practitioner's certificate lapses if he or she (a) does not have a current license to practice as a registered nurse or an advanced practice registered nurse or has had his or her license to practice as a registered nurse or an advanced practice registered nurse denied, refused renewal, suspended, or revoked or (b) renews his or her license to practice as a registered nurse or an advanced practice registered nurse but does not renew his or her license to practice as an advanced practice registered nurse practitioner's certificate.

(2) When a license to practice as an advanced practice registered nurse practitioner's certificate lapses, the right of the person whose license certificate has lapsed to represent himself or herself as a licensee nurse practitioner and to practice the activities for which a license certificate is required terminates. To restore the license certificate to active status, the person shall meet the requirements for renewal which are in effect at the time that he or she wishes to restore the license certificate and shall pay the renewal fee and the late fee established and collected as provided in section 71-162.

Sec. 70. Section 71-1726, Reissue Revised Statutes of Nebraska, is amended to read:

71-1726. Any person practicing as an advanced practice registered nurse a nurse practitioner who is not currently licensed certified as such by the department and who possesses a ~~current~~ license to engage in any health profession for which a license is issued by the department may have such license denied, refused renewal, suspended, or revoked or have other disciplinary action taken against him or her such license by the department pursuant to the provisions of Chapter 71, article 1, the Nurse Practice Act or the Uniform Licensing Law relating to such profession, irrespective of any criminal proceedings for practicing without a license certificate.

Sec. 71. Section 71-1726.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-1726.01. The Advanced Practice Registered Nurse Practitioner Act does not prohibit the performance of activities of an advanced practice registered nurse a nurse practitioner by an unlicensed person if performed:

(1) In an emergency situation;

(2) By a legally qualified person from another state employed by the

United States Government and performing official duties in this state;

(3) By a person enrolled in an approved ~~advanced practice registered nurse practitioner~~ program for the preparation of ~~advanced practice registered nurses~~ nurse practitioners as part of that approved program; and

(4) By a person holding a temporary permit pursuant to section 71-1724.01.

Sec. 72. Section 71-1726.02, Reissue Revised Statutes of Nebraska, is amended to read:

71-1726.02. Any person, corporation, association, or other entity engaging in any of the following activities is guilty of a Class IV felony:

(1) Practicing as ~~an advanced practice registered nurse a nurse practitioner~~ without being issued a license certificate as such by the department;

(2) Employing or offering to employ any person as ~~an advanced practice registered nurse a nurse practitioner~~, knowing that such person is not ~~licensed~~ certified as such by the department;

(3) Fraudulently seeking, obtaining, or furnishing a license as an advanced practice registered nurse certificate as a nurse practitioner or aiding and abetting such activities; or

(4) Using in connection with his or her name the title ~~advanced practice registered nurse practitioner~~, the abbreviation APRN NP, or any other designation tending to imply that he or she is ~~an advanced practice registered nurse licensed a nurse practitioner certified~~ by the department when such person is not ~~an advanced practice registered nurse certified~~ as a nurse practitioner.

Sec. 73. This section and sections 71-1729 to 71-1737 and sections 75 to 77 of this act shall be known and may be cited as the Certified Registered Nurse Anesthetist Act.

Sec. 74. Section 71-1729, Reissue Revised Statutes of Nebraska, is amended to read:

71-1729. For purposes of ~~sections 71-1729 to 71-1737~~ the Certified Registered Nurse Anesthetist Act, unless the context otherwise requires:

(1) Board means the Board of Advanced Practice Registered Nurses;

(2) Certified registered nurse anesthetist ~~or nurse practitioner anesthetist~~ means a currently licensed registered nurse holding a current certificate as a nurse practitioner in the specific expanded role of the practice of anesthesia issued under the act;

~~(2)~~ (3) Department means the Department of Health and Human Services Regulation and Licensure;

(4) Licensed practitioner means any physician or osteopathic physician licensed to prescribe, diagnose, and treat as prescribed in sections 71-1,102 and 71-1,137; and

~~(3)~~ (5) Practice of anesthesia means (a) the performance of or the assistance in any act involving the determination, preparation, administration, or monitoring of any drug used to render an individual insensible to pain for procedures requiring the presence of persons educated in the administration of anesthetics or (b) the performance of any act commonly the responsibility of educated anesthesia personnel. Practice of anesthesia includes the use of those techniques which are deemed necessary for adequacy in performance of anesthesia administration. Nothing in sections 71-1729 to 71-1737 shall be intended to prohibit the Certified Registered Nurse Anesthetist Act prohibits routine administration of a drug by a duly licensed registered nurse, licensed practical nurse, or other duly authorized person for the alleviation of pain or intended to prohibit prohibits the practice of anesthesia by students enrolled in an accredited school of nurse anesthesia when the services performed are a part of the course of study and are under the supervision of a licensed practitioner or nurse practitioner anesthetist certified registered nurse anesthetist.

Sec. 75. A certificate issued under the Certified Registered Nurse Anesthetist Act may be denied, refused renewal, revoked, suspended, or disciplined in any other manner for any violation of the act, for physical or mental disability or incapacity, for gross incompetence, or for any reason for which a license issued under the Nurse Practice Act or the Advanced Practice Registered Nurse Licensure Act may be denied, refused renewal, revoked, suspended, or disciplined. The methods and procedures provided in the Nurse Practice Act for opportunity for hearing, notice of hearing, presentation of evidence, conduct of a hearing, reinstatement, and related matters shall apply to disciplinary actions under this section. A decision to deny, refuse renewal of, revoke, suspend, or discipline a certificate as a certified registered nurse anesthetist may be appealed, and the appeal shall be in accordance with the Administrative Procedure Act.

Sec. 76. (1) A certified registered nurse anesthetist's certificate

lapses if he or she (a) does not have a license to practice as a registered nurse or an advanced practice registered nurse or has had such license denied, refused renewal, suspended, or revoked or (b) renews his or her license to practice as a registered nurse or an advanced practice registered nurse but does not renew his or her certified registered nurse anesthetist's certificate.

(2) When a certified registered nurse anesthetist's certificate lapses, the right of the person whose certificate has lapsed to represent himself or herself as a certified registered nurse anesthetist and to practice the activities for which a certificate is required terminates. To restore the certificate to active status, the person shall meet the requirements for renewal which are in effect at the time that he or she wishes to restore the certificate and shall pay the renewal fee and the late fee established and collected as provided in section 71-162.

Sec. 77. Any person practicing as a certified registered nurse anesthetist who does not hold a certificate as such issued by the department and who possesses a license to engage in any health profession for which a license is issued by the department may have such license denied, refused renewal, suspended, or revoked or have other disciplinary action taken against such license by the department pursuant to the provisions of the Nurse Practice Act or the Uniform Licensing Law relating to such profession, irrespective of any criminal proceedings for practicing without a certificate.

Sec. 78. Section 71-1730, Reissue Revised Statutes of Nebraska, is amended to read:

71-1730. In order to obtain a certificate from the department as a certified registered nurse anesthetist an applicant shall:

(1) Hold a license as a registered nurse in the State of Nebraska or have the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska;

(2) Submit a completed application verified by oath which includes the applicant's social security number;

(3) Pay the required fee established and collected as provided in section 71-162;

(4) Submit evidence of successful completion of a course of study in anesthesia in a school of nurse anesthesia accredited or approved by or under the auspices of the department or the Council on Accreditation of Nurse Anesthesia and Educational Programs; and

(5) Take and successfully pass a certifying examination approved by the department after prior approval of such examination by the ~~Board of Nursing and Board of Medicine and Surgery~~ board. Such examination may include (a) the National Qualifying Examination for Certified Registered Nurse Anesthetists or (b) any other approved recognized national qualifying examination for nurse anesthetists.

If more than five years have elapsed since the applicant completed the nurse anesthetist program or since the applicant has practiced as a nurse anesthetist, he or she shall meet the requirements of subdivisions (1) through (5) of this section and shall provide evidence of continuing competency as determined by the ~~Board of Nursing and Board of Medicine and Surgery~~ board, including, but not limited to, a reentry program, supervised practice, examination, or one or more of the continuing competency activities listed in section 71-161.09.

Sec. 79. Section 71-1731, Reissue Revised Statutes of Nebraska, is amended to read:

71-1731. The department, with the prior approval of the ~~Board of Nursing and Board of Medicine and Surgery~~ board, may grant a temporary certification in the practice of anesthesia for a period of not to exceed one year and under such conditions as the ~~boards~~ board with the approval of the department ~~determine~~ determines for graduates of an accredited school of nurse anesthesia. The permit may be issued upon application by the graduate for the first certifying examination following his or her graduation and shall be valid pending the results of such examination. Temporary certification may also be granted for a period not to exceed one year to registered nurse anesthetists currently licensed in another state pending completion of the application for Nebraska certification. A temporary permit issued pursuant to this section may be extended at the discretion of the ~~boards~~ board with the approval of the department.

Sec. 80. Section 71-1735, Reissue Revised Statutes of Nebraska, is amended to read:

71-1735. ~~(1)~~ The procedure for biennial certification renewal as a certified registered nurse anesthetist shall be at the same time and in the same manner as renewal of a license as a registered nurse and shall require:

~~(a)~~ (1) A license as a registered nurse in the State of Nebraska or

the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska;

~~(b)~~ (2) Documentation of continuing competency as required by the Board of Nursing and the Board of Medicine and Surgery board in rules and regulations approved by the ~~boards~~ board and adopted and promulgated by the department. Continuing education is sufficient to meet continuing competency requirements. The requirements may also include, but not be limited to, one or more of the continuing competency activities listed in section 71-161.09 which a person may select as an alternative to continuing education; and

~~(c)~~ (3) Payment of the required fee established and collected as provided in section 71-162.

~~(2) Violations of the Advanced Practice Registered Nurse Act shall be dealt with in the manner prescribed in sections 71-1725, 71-1726, and 71-1737.~~

Sec. 81. Section 71-1737, Reissue Revised Statutes of Nebraska, is amended to read:

71-1737. Notwithstanding the provisions of any other statute, any person, corporation, association, or other entity who engages in any of the following activities shall be guilty of a Class IV felony:

(1) Engaging in the practice of anesthesia as a certified registered nurse anesthetist without being issued a certificate as such by the department, with the approval of the Board of Nursing and the Board of Medicine and Surgery board;

(2) Knowingly employing or offering to employ any person as a certified registered nurse anesthetist when knowing that such person is not certified as such by the department with the approval of the ~~boards~~ board;

(3) Fraudulently seeking, obtaining, or furnishing a certificate as a certified registered nurse anesthetist or aiding and abetting such activities; or

(4) Using in connection with his or her name the title certified registered nurse anesthetist, the abbreviation C.R.N.A., or any other designation tending to imply that he or she is a certified registered nurse anesthetist, certified by the department with the approval of the ~~boards~~ board pursuant to ~~sections 71-1729 to 71-1737~~ the Certified Registered Nurse Anesthetist Act, when such person is not actually a certified registered nurse anesthetist.

Sec. 82. Section 71-1738, Reissue Revised Statutes of Nebraska, is amended to read:

71-1738. Sections 71-1738 to 71-1765 and section 91 of this act shall be known and may be cited as the Nebraska Certified Nurse Midwifery Practice Act.

Sec. 83. Section 71-1743, Reissue Revised Statutes of Nebraska, is amended to read:

71-1743. Boards Board shall mean both the Board of Nursing and the Board of Medicine and Surgery Advanced Practice Registered Nurses.

Sec. 84. Section 71-1747, Reissue Revised Statutes of Nebraska, is amended to read:

71-1747. Collaboration shall mean a process and relationship in which a certified nurse midwife works together, ~~under the terms of a practice agreement, with a licensed practitioner, and may include work~~ with other health professionals, to deliver health care within the scope of practice of certified nurse midwifery as provided in the Nebraska Certified Nurse Midwifery Practice Act. The collaborative relationship between the physician and the nurse midwife shall be subject to the ~~joint~~ control and regulation of the ~~boards~~ board.

Sec. 85. Section 71-1749, Reissue Revised Statutes of Nebraska, is amended to read:

71-1749. Approved certified nurse midwifery education program shall mean a certified nurse midwifery education program approved by the ~~boards~~ board. The ~~boards~~ board may allow such program to be accredited by the American College of Nurse-Midwives.

Sec. 86. Section 71-1750, Reissue Revised Statutes of Nebraska, is amended to read:

71-1750. Practice agreement shall mean the written agreement authored and signed by the certified nurse midwife and the licensed practitioner with whom he or she is associated which:

(1) Identifies the settings within which the certified nurse midwife is authorized to practice;

(2) Names the collaborating licensed practitioner or, if more than one licensed practitioner is a party to such practice agreement, names all of the collaborating licensed practitioners;

(3) Defines or describes the medical functions to be performed by

the certified nurse midwife, which are not inconsistent with the Nebraska Certified Nurse Midwifery Practice Act, as agreed to by the nurse midwife and the collaborating licensed practitioner; and

(4) Contains such other information as required by the ~~boards~~ board.

Sec. 87. Section 71-1753, Reissue Revised Statutes of Nebraska, is amended to read:

71-1753. (1) The specific medical functions to be performed by a certified nurse midwife within the scope of permitted practice defined by section 71-1752 shall be described in the practice agreement which shall be reviewed and approved by the ~~boards~~ board. ~~A quorum shall be required of each board in order to transact any business. For purposes of the Nebraska Certified Nurse Midwifery Practice Act, a majority vote of each respective board shall be required for taking any action and any action shall require the concurrence of both boards.~~ A copy of the agreement shall be maintained on file with the ~~boards~~ board as a condition of lawful practice under the ~~act~~ Nebraska Certified Nurse Midwifery Practice Act.

(2) A certified nurse midwife shall perform the functions detailed in the practice agreement only under the supervision of the licensed practitioner responsible for the medical care of the patients described in the practice agreement. If the collaborating licensed practitioner named in the practice agreement becomes temporarily unavailable, the certified nurse midwife may perform the authorized medical functions only under the supervision of another licensed practitioner designated as a temporary substitute for that purpose by the collaborating licensed practitioner.

(3) A certified nurse midwife may perform authorized medical functions only in the following settings:

(a) In a licensed or certified health care facility as an employee or as a person granted privileges by the facility;

(b) In the primary office of a licensed practitioner or in any setting authorized by the collaborating licensed practitioner, except that a certified nurse midwife shall not attend a home delivery; or

(c) Within an organized public health agency.

(4) The department shall, after consultations with the ~~boards~~ board, adopt and promulgate rules and regulations to carry out the Nebraska Certified Nurse Midwifery Practice Act.

Sec. 88. Section 71-1754, Reissue Revised Statutes of Nebraska, is amended to read:

71-1754. If a certified nurse midwife intends to alter his or her practice status by reason of a change in the setting, supervision by a different licensed practitioner, modification of the authorized medical functions, or for any other reason, he or she shall submit a new or amended practice agreement to the ~~boards~~ board for approval before any change may be permitted.

Sec. 89. Section 71-1755, Reissue Revised Statutes of Nebraska, is amended to read:

71-1755. (1) An applicant for certification as a nurse midwife shall submit to the ~~boards~~ board a written application, which includes the applicant's social security number, and such evidence as the ~~boards~~ board shall require showing that the applicant is currently licensed as a registered nurse by the state or has the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska, has successfully completed an approved certified nurse midwifery education program, and has passed a nationally recognized nurse midwifery examination adopted by the ~~boards~~ board.

(2) The department may, with the approval of the ~~boards~~ board, grant temporary certification as a nurse midwife upon application (a) to graduates of an approved nurse midwifery program pending results of the first certifying examination following graduation and (b) for one hundred twenty days to nurse midwives currently licensed in another state pending completion of the application for Nebraska certification. A temporary permit issued pursuant to this section may be extended for up to one year with the approval of the ~~boards~~ board.

(3) The ~~boards~~ board shall adopt an examination to be used pursuant to subsection (1) of this section.

(4) If more than five years have elapsed since the completion of the nurse midwifery program or since the applicant has practiced as a nurse midwife, the applicant shall meet the requirements in subsection (1) of this section and provide evidence of continuing competency, as may be determined by the ~~boards~~ board, either by means of a reentry program, references, supervised practice, examination, or one or more of the continuing competency activities listed in section 71-161.09.

Sec. 90. Section 71-1757, Reissue Revised Statutes of Nebraska, is amended to read:

71-1757. (1) The certificate of each person certified under the Nebraska Certified Nurse Midwifery Practice Act shall be renewed at the same time and in the same manner as renewal of a license for a registered nurse. Renewal of such a certificate shall require that ~~(a)~~ the applicant have (a) a license as a registered nurse issued by the state or the authority based on the Nurse Licensure Compact to practice as a registered nurse in Nebraska and (b) documentation of continuing competency, either by reference, peer review, examination, or one or more of the continuing competency activities listed in section 71-161.09, as established by the ~~boards~~ board in rules and regulations approved by the ~~boards~~ board and adopted and promulgated by the department.

(2) The department shall establish and collect fees for renewal as provided in section 71-162.

Sec. 91. (1) A certified nurse midwife's certificate lapses if he or she (a) does not have a current license to practice as a registered nurse or an advanced practice registered nurse or has had his or her license to practice as a registered nurse or an advanced practice registered nurse denied, refused renewal, suspended, or revoked or (b) renews such licenses to practice but does not renew his or her certified nurse midwife's certificate.

(2) When a certificate to practice as a certified nurse midwife lapses, the right of the person whose certificate has lapsed to represent himself or herself as a certified nurse midwife and to practice the activities for which a certificate is required terminates. To restore the certificate to active status, the person shall meet the requirements for renewal which are in effect at the time that he or she wishes to restore the certificate and shall pay the renewal fee and the late fee established and collected as provided in section 71-162.

Sec. 92. Section 71-1913.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-1913.01. (1) Each program shall require the parent or guardian of each child enrolled in such program to present within thirty days after enrollment and periodically thereafter (a) proof that the child is protected by age-appropriate immunization against measles, mumps, rubella, poliomyelitis, diphtheria, pertussis, tetanus, and haemophilus influenzae type B and such other diseases as the Department of Health and Human Services may from time to time specify based on then current medical and scientific knowledge, (b) certification by a physician, an advanced practice registered nurse practicing under and in accordance with his or her respective certification act, or a physician assistant that immunization is not appropriate for a stated medical reason, or (c) a written statement that the parent or guardian does not wish to have such child so immunized and the reasons therefor. The program shall exclude a child from attendance until such proof, certification, or written statement is provided. At the time the parent or guardian is notified that such information is required, he or she shall be notified in writing of his or her right to submit a certification or written statement pursuant to subdivision (b) or (c) of this subsection.

(2) Each program shall keep the written record of immunization, the certification, or the written statement of the parent or guardian. Such record, certification, or statement shall be kept by the program as part of the child's file, shall be available onsite to the Department of Health and Human Services and the Department of Health and Human Services Regulation and Licensure, and shall be filed with the Department of Health and Human Services for review and inspection. Each program shall report to the Department of Health and Human Services by November 1 of each year the status of immunization for children enrolled as of September 30 of that year, and children who have reached kindergarten age and who are enrolled in public or private school need not be included in the report.

Sec. 93. Section 71-2610.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-2610.01. The State Board of Health shall:

(1) Adopt and promulgate rules and regulations for the government of the professions and occupations licensed, certified, registered, or issued permits by the Department of Health and Human Services Regulation and Licensure, including rules and regulations necessary to implement laws enforced by the department. These professions and occupations are those subject to the Advanced Practice Registered Nurse Licensure Act, the Asbestos Control Act, the Certified Registered Nurse Anesthetist Act, the Clinical Nurse Specialist Practice Act, the Licensed Practical Nurse-Certified Act, the Nebraska Certified Nurse Midwifery Practice Act, the Nebraska Cosmetology Act, the Nurse Practice Act, the Nurse Practitioner Act, the Occupational Therapy Practice Act, the Radiation Control Act, the Residential Lead-Based Paint Professions Certification Act, the Uniform Controlled Substances Act, the Uniform Licensing Law, the Wholesale Drug Distributor Licensing Act, or

sections 71-102, 71-3702 to 71-3715, 71-4701 to 71-4719, and 71-6053 to 71-6068;

(2) Serve in an advisory capacity for other rules and regulations adopted and promulgated by the department, including those for health care facilities and environmental health services;

(3) Carry out its powers and duties under the Nebraska Regulation of Health Professions Act;

(4) Appoint and remove for cause members of health-related professional boards as provided in sections 71-111, 71-112, and 71-118;

(5) At the discretion of the board, help mediate issues related to the regulation of health care professions except issues related to the discipline of health care professionals; and

(6) Have the authority to participate in the periodic review of the regulation of health care professions.

All funds rendered available by law may be used by the board in administering and effecting such purposes.

Sec. 94. Section 71-5191, Reissue Revised Statutes of Nebraska, is amended to read:

71-5191. The following are exempt from the licensing and certification requirements of the Emergency Medical Services Act:

(1) The occasional use of a vehicle or aircraft not designated as an ambulance and not ordinarily used in transporting patients or operating emergency care, rescue, or resuscitation services;

(2) Vehicles or aircraft rendering services as an ambulance in case of a major catastrophe or emergency when licensed ambulances based in the localities of the catastrophe or emergency are incapable of rendering the services required;

(3) Ambulances from another state which are operated from a location or headquarters outside of this state in order to transport patients across state lines, but no such ambulance shall be used to pick up patients within this state for transportation to locations within this state except in case of an emergency;

(4) Ambulances or emergency vehicles owned and operated by an agency of the United States Government and the personnel of such agency;

(5) Except for the provisions of section 71-5194, physicians, physician assistants, registered nurses, licensed practical nurses, or advanced practice registered nurses, ~~or nurse practitioners~~ who hold current Nebraska licenses and are exclusively engaged in the practice of their respective professions; and

(6) Persons authorized to perform out-of-hospital emergency care in other states when incidentally working in Nebraska in response to an emergency situation.

Sec. 95. Section 77-2704.09, Reissue Revised Statutes of Nebraska, is amended to read:

77-2704.09. (1) Sales and use taxes shall not be imposed on the gross receipts from the sale, lease, or rental of and the storage, use, or other consumption in this state of insulin and the following when sold for a patient's use under a prescription and which are of the type eligible for coverage under the medical assistance program established pursuant to sections 68-1018 to 68-1025: Drugs, not including over-the-counter drugs; durable medical equipment; home medical supplies; prosthetic devices; oxygen; oxygen equipment; and mobility enhancing equipment.

(2) For purposes of this section:

(a) Drug means a compound, substance, preparation, and component of a compound, substance, or preparation, other than food and food ingredients, dietary supplements, or alcoholic beverages:

(i) Recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States, or official National Formulary, and any supplement to any of them;

(ii) Intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease; or

(iii) Intended to affect the structure or any function of the body;

(b) Durable medical equipment means equipment which can withstand repeated use, is primarily and customarily used to serve a medical purpose, generally is not useful to a person in the absence of illness or injury, is appropriate for use in the home, and is not worn in or on the body. Durable medical equipment includes repair and replacement parts for such equipment;

(c) Home medical supplies means supplies primarily and customarily used to serve a medical purpose which are appropriate for use in the home and are generally not useful to a person in the absence of illness or injury;

(d) Mobility enhancing equipment means equipment which is primarily and customarily used to provide or increase the ability to move from one place

to another, which is not generally used by persons with normal mobility, and which is appropriate for use either in a home or a motor vehicle. Mobility enhancing equipment includes repair and replacement parts for such equipment. Mobility enhancing equipment does not include any motor vehicle or equipment on a motor vehicle normally provided by a motor vehicle manufacturer;

(e) Over-the-counter drug means a drug that contains a label that identifies the product as a drug as required by 21 C.F.R. 201.66, as such regulation existed on January 1, 2003. The over-the-counter drug label includes a drug facts panel or a statement of the active ingredients with a list of those ingredients contained in the compound, substance, or preparation;

(f) Oxygen equipment means oxygen cylinders, cylinder transport devices including sheaths and carts, cylinder studs and support devices, regulators, flowmeters, tank wrenches, oxygen concentrators, liquid oxygen base dispensers, liquid oxygen portable dispensers, oxygen tubing, nasal cannulas, face masks, oxygen humidifiers, and oxygen fittings and accessories;

(g) Prescription means an order, formula, or recipe issued in any form of oral, written, electronic, or other means of transmission by a duly licensed practitioner authorized under the Advanced Practice Registered Certified Registered Nurse Anesthetist Act, the Nebraska Certified Nurse Midwifery Practice Act, or the Nurse Practitioner Act, Chapter 71, article 1, or sections 71-4701 to 71-4719; and

(h) Prosthetic devices means a replacement, corrective, or supportive device worn on or in the body to artificially replace a missing portion of the body, prevent or correct physical deformity or malfunction, or support a weak or deformed portion of the body, and includes any supplies used with such device and repair and replacement parts.

Sec. 96. Section 79-214, Reissue Revised Statutes of Nebraska, is amended to read:

79-214. (1) Except as provided in subsection (2) of this section, the school board of any school district shall not admit any child into the kindergarten or beginner grade of any school of such school district unless such child has reached the age of five years or will reach such age on or before October 15 of the current year.

(2) The board may admit a child who will reach the age of five between October 16 and February 1 of the current school year if the parent or guardian requests such entrance and provides an affidavit stating that (a) the child attended kindergarten in another jurisdiction in the current school year, (b) the family anticipates relocation to another jurisdiction that would allow admission within the current year, or (c) the child has demonstrated through recognized assessment procedures approved by the board that he or she is capable of carrying the work of kindergarten or the beginner grade.

(3) The board shall comply with the requirements of subsection (2) of section 43-2007 and shall require evidence of a physical examination by a physician, a physician assistant, or an advanced practice registered nurse, practicing under and in accordance with his or her respective certification act, within six months prior to the entrance of a child into the beginner grade and the seventh grade or, in the case of a transfer from out of state, to any other grade of the local school, except that no such physical examination shall be required of any child whose parent or guardian objects in writing. The cost of such physical examination shall be borne by the parent or guardian of each child who is examined.

Sec. 97. Section 79-221, Reissue Revised Statutes of Nebraska, is amended to read:

79-221. Immunization shall not be required for a student's enrollment in any school in this state if he or she submits to the admitting official either of the following:

(1) A statement signed by a physician, a physician assistant, or an advanced practice registered nurse practicing under and in accordance with his or her respective certification act, stating that, in the health care provider's opinion, the immunizations required would be injurious to the health and well-being of the student or any member of the student's family or household; or

(2) An affidavit signed by the student or, if he or she is a minor, by a legally authorized representative of the student, stating that the immunization conflicts with the tenets and practice of a recognized religious denomination of which the student is an adherent or member or that immunization conflicts with the personal and sincerely followed religious beliefs of the student.

Sec. 98. Section 83-4,157, Revised Statutes Supplement, 2004, is amended to read:

83-4,157. The medical director shall:

- (1) Coordinate all clinical services;
- (2) Participate in the selection and supervision of all clinical staff employed by or under contract with the department, including medical doctors, physician assistants, pharmacists, pharmacy technicians, registered nurses, licensed practical nurses, advanced practice registered nurses practicing under and in accordance with their respective certification acts, mental health practitioners, alcohol and drug counselors, laboratory technicians, physical therapists, optometrists, audiologists, dentists, dental assistants, and dental hygienists;
- (3) Maintain and preserve the medical records of health care services;
- (4) Approve the purchasing of all necessary medical supplies and medical equipment for the department;
- (5) Recommend all necessary programs for the preservice, inservice, and continuing medical training and education of the health care staff and other relevant staff of the department, including training specifically designed to promote prompt and effective responses by all staff of the department to medical emergencies;
- (6) Develop and implement condition-specific medical treatment protocols that ensure compatibility with a community standard of health care, including protocols addressing the: (a) Treatment of gastrointestinal bleeds; (b) detection and treatment of all communicable diseases; (c) treatment of gender-specific problems; (d) treatment of diabetes; (e) treatment of hypertension; (f) treatment of headaches; (g) utilization of surgical procedures; (h) control of infection; (i) provision of dental care; (j) provision of age-specific and gender-specific routine health maintenance; (k) means by which inmates obtain access to health care services; (l) use of prescribed drugs, devices, or biologicals for the purpose of pain management; (m) referral of patients to medical specialists not in the employ of the department; and (n) initiation, observance, and termination of do not resuscitate orders initiated pursuant to the Rights of the Terminally Ill Act;
- (7) Develop and implement a system of general discharge planning for the health care services to be received by inmates who are soon to be released from the custody of the department and who have chronic health care problems;
- (8) Develop and implement a comprehensive health care services plan;
- (9) Develop and implement an internal credentialing program for the employment and retention of the health care staff of the department based on a community standard of health care; and
- (10) Develop and implement an internal peer review and quality assurance program based upon a community standard of health care.

Sec. 99. Section 83-4,159, Revised Statutes Supplement, 2004, is amended to read:

83-4,159. (1) In assigning health care staff to the correctional facilities under the control of the department, the medical director shall ensure that each facility has at least one designated medical doctor on call at all times and that each facility housing more than five hundred inmates has at least one full-time medical doctor assigned to that facility as his or her primary employment location.

(2) The medical director shall establish an acute care clinic in each of the correctional facilities and ensure that each clinic is staffed by at least one medical doctor, physician assistant, or advanced practice registered nurse practicing under and in accordance with his or her respective certification act.

(3) The medical director shall establish chronic care clinics to provide health care services to inmates with chronic disease conditions, including diabetes and hypertension.

(4) The medical director shall establish a human immunodeficiency virus infection and acquired immunodeficiency syndrome chronic care clinic which shall provide for the relevant treatment, counseling, and education of inmates who are known to be infected with the human immunodeficiency virus.

Sec. 100. Sections 33, 100, and 101 of this act become operative three calendar months after the adjournment of this legislative session. The other sections of this act become operative on July 1, 2007, except that necessary actions preparatory to their implementation may be taken prior to such date.

Sec. 101. Original section 71-3,106, Revised Statutes Supplement, 2004, is repealed.

Sec. 102. Original sections 44-2803, 44-2824, 44-2827, 71-121.01, 71-168, 71-168.02, 71-1,103, 71-1,132.05, 71-1,132.07, 71-1,132.08, 71-1,132.11, 71-1,132.18, 71-1,143, 71-1,198, 71-1,339, 71-541, 71-1405, 71-1704, 71-1706, 71-1707, 71-1709.02, 71-1714, 71-1716, 71-1716.02, 71-1716.03, 71-1716.05, 71-1717, 71-1718.01, 71-1718.02, 71-1721, 71-1721.07

to 71-1726.02, 71-1729 to 71-1731, 71-1735, 71-1737, 71-1738, 71-1743, 71-1747, 71-1749, 71-1750, 71-1753 to 71-1755, 71-1757, 71-1913.01, 71-2610.01, 71-5191, 77-2704.09, 79-214, and 79-221, Reissue Revised Statutes of Nebraska, and sections 18-1738, 28-401, 71-1,142, 83-4,157, and 83-4,159, Revised Statutes Supplement, 2004, are repealed.

Sec. 103. The following sections are outright repealed: Sections 71-1705 and 71-1736, Reissue Revised Statutes of Nebraska.