

Introduced by Senator Negrete McLeod

February 25, 2009

An act to add Section 2835.7 to the Business and Professions Code, relating to nurse practitioners.

LEGISLATIVE COUNSEL'S DIGEST

SB 294, as introduced, Negrete McLeod. Nurse practitioners.

Existing law, the Nursing Practice Act, provides for the certification and regulation of nurse practitioners and nurse-midwives by the Board of Registered Nursing and specifies requirements for qualification or certification as a nurse practitioner. Under the act, the practice of nursing is defined, in part, as providing direct and indirect patient care services, as specified, including the dispensing of drugs or devices under specified circumstances. The practice of nursing is also described as the implementation, based on observed abnormalities, of standardized procedures, defined as policies and protocols developed by specified facilities in collaboration with administrators and health professionals, including physicians and surgeons and nurses.

This bill would authorize the implementation of standardized procedures that would expand the duties of a nurse practitioner in the scope of his or her practice, as enumerated. The bill would make specified findings and declarations in that regard.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the
- 2 following:

1 (a) Nurse practitioners play a vital and cost-effective role in the
2 delivery of health care services both independently and in
3 collaboration with physicians and surgeons and other health care
4 providers. Nurse practitioners are involved in almost every setting
5 in which health care services are delivered, and, in collaboration
6 with physicians and surgeons, directly provide a wide range of
7 services and care.

8 (b) Under current law, nurse practitioners have the same
9 statutory authority to provide services and care as do registered
10 nurses. However, the law allows those registered nurses that meet
11 the education requirements for certification as nurse practitioners
12 to provide care and services beyond those specified in statute for
13 registered nurses pursuant to standardized procedures and protocols
14 adopted by each entity delivering health care services in which a
15 nurse practitioner practices.

16 (c) The Legislature reiterates its intention to allow each health
17 care setting in which a nurse practitioner practices to select and
18 control the services nurse practitioners may perform and provide
19 pursuant to Section 2725 of the Business and Professions Code,
20 and that it is not the intention of the Legislature to grant nurse
21 practitioners the authority to independently perform services
22 beyond the level set forth in statute for registered nurses outside
23 of the standardized procedures.

24 (d) Notwithstanding the foregoing, the Legislature finds that
25 there is ambiguity in current law regarding what services and
26 functions to be performed by nurse practitioners may be included
27 in standardized procedures and protocols. This ambiguity results
28 in disruptions and delays in care, disputes over billings, and
29 duplication of services.

30 (e) Therefore, it is the intent of the Legislature to provide
31 clarification that standardized procedures and protocols may
32 include the specified services and functions set forth in this act so
33 that health care entities may allow nurse practitioners to engage
34 in those activities if the entities choose to do so, and that third-party
35 payors understand that those services and functions can be
36 performed by nurse practitioners if they are included in an entity's
37 standardized procedures and protocols.

38 SEC. 2. Section 2835.7 is added to the Business and Professions
39 Code, to read:

1 2835.7. (a) Notwithstanding any other provision of law, in
2 addition to any other practices that meet the general criteria set
3 forth in statute or regulation for inclusion in standardized
4 procedures developed through collaboration among administrators
5 and health professionals, including physicians and surgeons and
6 nurses, standardized procedures may be implemented that authorize
7 a nurse practitioner to do any of the following:
8 (1) Admit patients to a hospital, provided all admissions policies
9 are followed by the nurse practitioner.
10 (2) Order durable medical equipment, subject to any limitations
11 set forth in the standardized procedures. Notwithstanding that
12 authority, nothing in this paragraph shall operate to limit the ability
13 of a third-party payor to require prior approval.
14 (3) After performance of a physical examination by the nurse
15 practitioner and collaboration with a physician and surgeon, certify
16 disability pursuant to Section 2708 of the Unemployment Insurance
17 Code.
18 (4) Permit a nurse practitioner to be designated by the nurse
19 practitioner's supervising physician and surgeon as the primary
20 care provider of record for an individual enrolled in a health care
21 service plan. Notwithstanding that authority, nothing in this
22 paragraph shall be construed to allow a nurse practitioner to operate
23 independently of a standardized procedure.
24 (5) For individuals receiving home health services under
25 Medicare or Medi-Cal, or personal care services, approve, sign,
26 modify, or add to a plan of treatment or plan of care.
27 (b) Nothing in this section shall be construed to affect the
28 validity of any standardized procedures in effect prior to the
29 enactment of this section or those adopted subsequent to enactment.