

FIRST REGULAR SESSION
HOUSE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 271
102ND GENERAL ASSEMBLY

0512H.02C

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal sections 195.070, 334.104, 335.016, 335.019, 335.036, 335.046, 335.051, 335.056, 335.076, 335.086, and 335.175, RSMo, and to enact in lieu thereof twelve new sections relating to nurses.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 195.070, 334.104, 335.016, 335.019, 335.036, 335.046, 335.051, 2 335.056, 335.076, 335.086, and 335.175, RSMo, are repealed and twelve new sections 3 enacted in lieu thereof, to be known as sections 195.070, 334.104, 335.016, 335.019, 335.036, 4 335.046, 335.049, 335.051, 335.056, 335.076, 335.086, and 335.175, to read as follows:

195.070. 1. A physician, podiatrist, dentist, a registered optometrist certified to 2 administer pharmaceutical agents as provided in section 336.220, or an assistant physician in 3 accordance with section 334.037 or a physician assistant in accordance with section 334.747 4 in good faith and in the course of his or her professional practice only, may prescribe, 5 administer, and dispense controlled substances or he or she may cause the same to be 6 administered or dispensed by an individual as authorized by statute.

7 2. An advanced practice registered nurse, as defined in section 335.016, but not a 8 certified registered nurse anesthetist as defined in subdivision (8) of section 335.016, who 9 holds a certificate of controlled substance prescriptive authority from the board of nursing 10 under section 335.019 and who is delegated the authority to prescribe controlled substances 11 under a collaborative practice arrangement under section 334.104 may prescribe any 12 controlled substances listed in Schedules III, IV, and V of section 195.017, and may have 13 restricted authority in Schedule II. Prescriptions for Schedule II medications prescribed by an 14 advanced practice registered nurse who has a certificate of controlled substance prescriptive 15 authority are restricted to only those medications containing hydrocodone **and Schedule II**

EXPLANATION — Matter enclosed in bold-faced brackets ~~thus~~ in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

16 **controlled substances for hospice patients pursuant to the provisions of section 334.104.**

17 However, no such certified advanced practice registered nurse shall prescribe controlled
18 substance for his or her own self or family. Schedule III narcotic controlled substance and
19 Schedule II - hydrocodone prescriptions shall be limited to a one hundred twenty-hour supply
20 without refill.

21 3. A veterinarian, in good faith and in the course of the veterinarian's professional
22 practice only, and not for use by a human being, may prescribe, administer, and dispense
23 controlled substances and the veterinarian may cause them to be administered by an assistant
24 or orderly under his or her direction and supervision.

25 4. A practitioner shall not accept any portion of a controlled substance unused by a
26 patient, for any reason, if such practitioner did not originally dispense the drug, except:

27 (1) When the controlled substance is delivered to the practitioner to administer to the
28 patient for whom the medication is prescribed as authorized by federal law. Practitioners
29 shall maintain records and secure the medication as required by this chapter and regulations
30 promulgated pursuant to this chapter; or

31 (2) As provided in section 195.265.

32 5. An individual practitioner shall not prescribe or dispense a controlled substance for
33 such practitioner's personal use except in a medical emergency.

334.104. 1. A physician may enter into collaborative practice arrangements with
2 registered professional nurses. Collaborative practice arrangements shall be in the form of
3 written agreements, jointly agreed-upon protocols, or standing orders for the delivery of
4 health care services. Collaborative practice arrangements, which shall be in writing, may
5 delegate to a registered professional nurse the authority to administer or dispense drugs and
6 provide treatment as long as the delivery of such health care services is within the scope of
7 practice of the registered professional nurse and is consistent with that nurse's skill, training
8 and competence.

9 2. (1) Collaborative practice arrangements, which shall be in writing, may delegate to
10 a registered professional nurse the authority to administer, dispense or prescribe drugs and
11 provide treatment if the registered professional nurse is an advanced practice registered nurse
12 as defined in subdivision (2) of section 335.016. Collaborative practice arrangements may
13 delegate to an advanced practice registered nurse, as defined in section 335.016, the authority
14 to administer, dispense, or prescribe controlled substances listed in Schedules III, IV, and V of
15 section 195.017, and Schedule II - hydrocodone; except that, the collaborative practice
16 arrangement shall not delegate the authority to administer any controlled substances listed in
17 Schedules III, IV, and V of section 195.017, or Schedule II - hydrocodone for the purpose of
18 inducing sedation or general anesthesia for therapeutic, diagnostic, or surgical procedures.

19 Schedule III narcotic controlled substance and Schedule II - hydrocodone prescriptions shall
20 be limited to a one hundred twenty-hour supply without refill.

21 **(2) Notwithstanding any other provision of this section to the contrary, a**
22 **collaborative practice arrangement may delegate to an advanced practice registered**
23 **nurse the authority to administer, dispense, or prescribe Schedule II controlled**
24 **substances for hospice patients; provided, that the advanced practice registered nurse is**
25 **employed by a hospice provider certified pursuant to chapter 197 and the advanced**
26 **practice registered nurse is providing care to hospice patients pursuant to a**
27 **collaborative practice arrangement that designates the certified hospice as a location**
28 **where the advanced practice registered nurse is authorized to practice and prescribe.**

29 **(3)** Such collaborative practice arrangements shall be in the form of written
30 agreements, jointly agreed-upon protocols or standing orders for the delivery of health care
31 services.

32 **(4)** An advanced practice registered nurse may prescribe buprenorphine for up to a
33 thirty-day supply without refill for patients receiving medication-assisted treatment for
34 substance use disorders under the direction of the collaborating physician.

35 3. The written collaborative practice arrangement shall contain at least the following
36 provisions:

37 (1) Complete names, home and business addresses, zip codes, and telephone numbers
38 of the collaborating physician and the advanced practice registered nurse;

39 (2) A list of all other offices or locations besides those listed in subdivision (1) of this
40 subsection where the collaborating physician authorized the advanced practice registered
41 nurse to prescribe;

42 (3) A requirement that there shall be posted at every office where the advanced
43 practice registered nurse is authorized to prescribe, in collaboration with a physician, a
44 prominently displayed disclosure statement informing patients that they may be seen by an
45 advanced practice registered nurse and have the right to see the collaborating physician;

46 (4) All specialty or board certifications of the collaborating physician and all
47 certifications of the advanced practice registered nurse;

48 (5) The manner of collaboration between the collaborating physician and the
49 advanced practice registered nurse, including how the collaborating physician and the
50 advanced practice registered nurse will:

51 (a) Engage in collaborative practice consistent with each professional's skill, training,
52 education, and competence;

53 (b) Maintain geographic proximity, except the collaborative practice arrangement
54 may allow for geographic proximity to be waived for a maximum of twenty-eight days per
55 calendar year for rural health clinics as defined by P.L. 95-210, as long as the collaborative

56 practice arrangement includes alternative plans as required in paragraph (c) of this
57 subdivision. This exception to geographic proximity shall apply only to independent rural
58 health clinics, provider-based rural health clinics where the provider is a critical access
59 hospital as provided in 42 U.S.C. Section 1395i-4, and provider-based rural health clinics
60 where the main location of the hospital sponsor is greater than fifty miles from the clinic.
61 **The collaborative practice arrangement may allow for geographic proximity to be**
62 **waived when the arrangement outlines the use of telecommunications, as described in**
63 **section 191.1145.** The collaborating physician is required to maintain documentation related
64 to this requirement and to present it to the state board of registration for the healing arts when
65 requested; and

66 (c) Provide coverage during absence, incapacity, infirmity, or emergency by the
67 collaborating physician;

68 (6) A description of the advanced practice registered nurse's controlled substance
69 prescriptive authority in collaboration with the physician, including a list of the controlled
70 substances the physician authorizes the nurse to prescribe and documentation that it is
71 consistent with each professional's education, knowledge, skill, and competence;

72 (7) A list of all other written practice agreements of the collaborating physician and
73 the advanced practice registered nurse;

74 (8) The duration of the written practice agreement between the collaborating
75 physician and the advanced practice registered nurse;

76 (9) A description of the time and manner of the collaborating physician's review of
77 the advanced practice registered nurse's delivery of health care services. The description shall
78 include provisions that the advanced practice registered nurse shall submit a minimum of ten
79 percent of the charts documenting the advanced practice registered nurse's delivery of health
80 care services to the collaborating physician for review by the collaborating physician, or any
81 other physician designated in the collaborative practice arrangement, every fourteen days; and

82 (10) The collaborating physician, or any other physician designated in the
83 collaborative practice arrangement, shall review every fourteen days a minimum of twenty
84 percent of the charts in which the advanced practice registered nurse prescribes controlled
85 substances. The charts reviewed under this subdivision may be counted in the number of
86 charts required to be reviewed under subdivision (9) of this subsection.

87 4. The state board of registration for the healing arts pursuant to section 334.125 and
88 the board of nursing pursuant to section 335.036 may jointly promulgate rules regulating the
89 use of collaborative practice arrangements. Such rules shall be limited to specifying
90 geographic areas to be covered, the methods of treatment that may be covered by
91 collaborative practice arrangements and the requirements for review of services provided
92 pursuant to collaborative practice arrangements including delegating authority to prescribe

93 controlled substances. Any rules relating to dispensing or distribution of medications or
94 devices by prescription or prescription drug orders under this section shall be subject to the
95 approval of the state board of pharmacy. Any rules relating to dispensing or distribution of
96 controlled substances by prescription or prescription drug orders under this section shall be
97 subject to the approval of the department of health and senior services and the state board of
98 pharmacy. In order to take effect, such rules shall be approved by a majority vote of a
99 quorum of each board. Neither the state board of registration for the healing arts nor the
100 board of nursing may separately promulgate rules relating to collaborative practice
101 arrangements. Such jointly promulgated rules shall be consistent with guidelines for
102 federally funded clinics. The rulemaking authority granted in this subsection shall not extend
103 to collaborative practice arrangements of hospital employees providing inpatient care within
104 hospitals as defined pursuant to chapter 197 or population-based public health services as
105 defined by 20 CSR 2150-5.100 as of April 30, 2008.

106 5. The state board of registration for the healing arts shall not deny, revoke, suspend
107 or otherwise take disciplinary action against a physician for health care services delegated to a
108 registered professional nurse provided the provisions of this section and the rules
109 promulgated thereunder are satisfied. Upon the written request of a physician subject to a
110 disciplinary action imposed as a result of an agreement between a physician and a registered
111 professional nurse or registered physician assistant, whether written or not, prior to August
112 28, 1993, all records of such disciplinary licensure action and all records pertaining to the
113 filing, investigation or review of an alleged violation of this chapter incurred as a result of
114 such an agreement shall be removed from the records of the state board of registration for the
115 healing arts and the division of professional registration and shall not be disclosed to any
116 public or private entity seeking such information from the board or the division. The state
117 board of registration for the healing arts shall take action to correct reports of alleged
118 violations and disciplinary actions as described in this section which have been submitted to
119 the National Practitioner Data Bank. In subsequent applications or representations relating to
120 his **or her** medical practice, a physician completing forms or documents shall not be required
121 to report any actions of the state board of registration for the healing arts for which the
122 records are subject to removal under this section.

123 6. Within thirty days of any change and on each renewal, the state board of
124 registration for the healing arts shall require every physician to identify whether the physician
125 is engaged in any collaborative practice ~~[agreement]~~ **arrangement**, including collaborative
126 practice ~~[agreements]~~ **arrangements** delegating the authority to prescribe controlled
127 substances, or physician assistant ~~[agreement]~~ **collaborative practice arrangement** and
128 also report to the board the name of each licensed professional with whom the physician has
129 entered into such ~~[agreement]~~ **arrangement**. The board ~~[may]~~ **shall** make this information

130 available to the public. The board shall track the reported information and may routinely
131 conduct random reviews of such [~~agreements~~] **arrangements** to ensure that [~~agreements~~]
132 **arrangements** are carried out for compliance under this chapter.

133 7. Notwithstanding any law to the contrary, a certified registered nurse anesthetist as
134 defined in subdivision (8) of section 335.016 shall be permitted to provide anesthesia services
135 without a collaborative practice arrangement provided that he or she is under the supervision
136 of an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if
137 needed. Nothing in this subsection shall be construed to prohibit or prevent a certified
138 registered nurse anesthetist as defined in subdivision (8) of section 335.016 from entering into
139 a collaborative practice arrangement under this section, except that the collaborative practice
140 arrangement may not delegate the authority to prescribe any controlled substances listed in
141 Schedules III, IV, and V of section 195.017, or Schedule II - hydrocodone.

142 8. A collaborating physician shall not enter into a collaborative practice arrangement
143 with more than six full-time equivalent advanced practice registered nurses, full-time
144 equivalent licensed physician assistants, or full-time equivalent assistant physicians, or any
145 combination thereof. This limitation shall not apply to collaborative arrangements of hospital
146 employees providing inpatient care service in hospitals as defined in chapter 197 or
147 population-based public health services as defined by 20 CSR 2150-5.100 as of April 30,
148 2008, or to a certified registered nurse anesthetist providing anesthesia services under the
149 supervision of an anesthesiologist or other physician, dentist, or podiatrist who is immediately
150 available if needed as set out in subsection 7 of this section.

151 9. It is the responsibility of the collaborating physician to determine and document
152 the completion of at least a one-month period of time during which the advanced practice
153 registered nurse shall practice with the collaborating physician continuously present before
154 practicing in a setting where the collaborating physician is not continuously present. This
155 limitation shall not apply to collaborative arrangements of providers of population-based
156 public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008, **or to**
157 **collaborative practice arrangements between a primary care physician and a primary**
158 **care advanced practice registered nurse, where the collaborating physician is new to a**
159 **patient population to which the advanced practice registered nurse is familiar.**

160 10. No agreement made under this section shall supersede current hospital licensing
161 regulations governing hospital medication orders under protocols or standing orders for the
162 purpose of delivering inpatient or emergency care within a hospital as defined in section
163 197.020 if such protocols or standing orders have been approved by the hospital's medical
164 staff and pharmaceutical therapeutics committee.

165 11. No contract or other [~~agreement~~] **arrangement** shall require a physician to act as
166 a collaborating physician for an advanced practice registered nurse against the physician's

167 will. A physician shall have the right to refuse to act as a collaborating physician, without
168 penalty, for a particular advanced practice registered nurse. No contract or other agreement
169 shall limit the collaborating physician's ultimate authority over any protocols or standing
170 orders or in the delegation of the physician's authority to any advanced practice registered
171 nurse, but this requirement shall not authorize a physician in implementing such protocols,
172 standing orders, or delegation to violate applicable standards for safe medical practice
173 established by hospital's medical staff.

174 12. No contract or other ~~[agreement]~~ **arrangement** shall require any ~~[advanced~~
175 ~~practice]~~ registered nurse to serve as a collaborating ~~[advanced practice]~~ registered nurse for
176 any collaborating physician against the ~~[advanced practice]~~ registered nurse's will. ~~[An~~
177 ~~advanced practice]~~ **A** registered nurse shall have the right to refuse to collaborate, without
178 penalty, with a particular physician.

335.016. As used in this chapter, unless the context clearly requires otherwise, the
2 following words and terms mean:

3 (1) "Accredited", the official authorization or status granted by an agency for a
4 program through a voluntary process;

5 (2) "Advanced practice registered nurse" **or "APRN"**, a ~~[nurse who has education~~
6 ~~beyond the basic nursing education and is certified by a nationally recognized professional~~
7 ~~organization as a certified nurse practitioner, certified nurse midwife, certified registered~~
8 ~~nurse anesthetist, or a certified clinical nurse specialist. The board shall promulgate rules~~
9 ~~specifying which nationally recognized professional organization certifications are to be~~
10 ~~recognized for the purposes of this section. Advanced practice nurses and only such~~
11 ~~individuals may use the title "Advanced Practice Registered Nurse" and the abbreviation~~
12 ~~"APRN"]~~ **person who is licensed under the provisions of this chapter to engage in the**
13 **practice of advanced practice nursing as a certified clinical nurse specialist, certified**
14 **nurse midwife, certified nurse practitioner, or certified registered nurse anesthetist;**

15 (3) "Approval", official recognition of nursing education programs which meet
16 standards established by the board of nursing;

17 (4) "Board" or "state board", the state board of nursing;

18 (5) "Certified clinical nurse specialist", a registered nurse who is currently certified as
19 a clinical nurse specialist by a nationally recognized certifying board approved by the board
20 of nursing;

21 (6) "Certified nurse midwife", a registered nurse who is currently certified as a nurse
22 midwife by the American ~~[College of Nurse-Midwives]~~ **Midwifery Certification Board**, or
23 other nationally recognized certifying body approved by the board of nursing;

24 (7) "Certified nurse practitioner", a registered nurse who is currently certified as a
25 nurse practitioner by a nationally recognized certifying body approved by the board of
26 nursing;

27 (8) "Certified registered nurse anesthetist", a registered nurse who is currently
28 certified as a nurse anesthetist by the Council on Certification of Nurse Anesthetists, the
29 ~~[Council on Recertification of Nurse Anesthetists]~~ **National Board of Certification and**
30 **Recertification for Nurse Anesthetists**, or other nationally recognized certifying body
31 approved by the board of nursing;

32 (9) "Executive director", a qualified individual employed by the board as executive
33 secretary or otherwise to administer the provisions of this chapter under the board's direction.
34 Such person employed as executive director shall not be a member of the board;

35 (10) "Inactive ~~[nurse]~~ **license status**", as defined by rule pursuant to section 335.061;

36 (11) "Lapsed license status", as defined by rule under section 335.061;

37 (12) "Licensed practical nurse" or "practical nurse", a person licensed pursuant to the
38 provisions of this chapter to engage in the practice of practical nursing;

39 (13) "Licensure", the issuing of a license ~~[to practice professional or practical~~
40 ~~nursing]~~ to candidates who have met the ~~[specified]~~ requirements **specified under this**
41 **chapter, authorizing the person to engage in the practice of advanced practice,**
42 **professional, or practical nursing**, and the recording of the names of those persons as
43 holders of a license to practice **advanced practice**, professional, or practical nursing;

44 (14) "**Practice of advanced practice nursing**", the performance for compensation
45 **of activities and services consistent with the required education, training, certification,**
46 **demonstrated competencies, and experiences of an advanced practice registered nurse;**

47 (15) "**Practice of practical nursing**", the performance for compensation of selected
48 acts for the promotion of health and in the care of persons who are ill, injured, or experiencing
49 alterations in normal health processes. Such performance requires substantial specialized
50 skill, judgment and knowledge. All such nursing care shall be given under the direction of a
51 person licensed by a state regulatory board to prescribe medications and treatments or under
52 the direction of a registered professional nurse. For the purposes of this chapter, the term
53 "direction" shall mean guidance or supervision provided by a person licensed by a state
54 regulatory board to prescribe medications and treatments or a registered professional nurse,
55 including, but not limited to, oral, written, or otherwise communicated orders or directives for
56 patient care. When practical nursing care is delivered pursuant to the direction of a person
57 licensed by a state regulatory board to prescribe medications and treatments or under the
58 direction of a registered professional nurse, such care may be delivered by a licensed practical
59 nurse without direct physical oversight;

60 ~~[(15)]~~ **(16) "Practice of professional nursing"**, the performance for compensation of
61 any act **or action** which requires substantial specialized education, judgment and skill based
62 on knowledge and application of principles derived from the biological, physical, social,
63 **behavioral**, and nursing sciences, including, but not limited to:

64 (a) Responsibility for the **promotion and** teaching of health care and the prevention
65 of illness to the patient and his or her family;

66 (b) Assessment, **data collection**, nursing diagnosis, nursing care, **evaluation**, and
67 counsel of persons who are ill, injured, or experiencing alterations in normal health processes;

68 (c) The administration of medications and treatments as prescribed by a person
69 licensed by a state regulatory board to prescribe medications and treatments;

70 (d) The coordination and assistance in the **determination and** delivery of a plan of
71 health care with all members of a health team;

72 (e) The teaching and supervision of other persons in the performance of any of the
73 foregoing;

74 ~~[(16)A]~~ **(17) "Registered professional nurse" or "registered nurse"**, a person licensed
75 pursuant to the provisions of this chapter to engage in the practice of professional nursing;

76 ~~[(17)]~~ **(18) "Retired license status"**, any person licensed in this state under this chapter
77 who retires from such practice. Such person shall file with the board an affidavit, on a form
78 to be furnished by the board, which states the date on which the licensee retired from such
79 practice, an intent to retire from the practice for at least two years, and such other facts as tend
80 to verify the retirement as the board may deem necessary; but if the licensee thereafter
81 reengages in the practice, the licensee shall renew his or her license with the board as
82 provided by this chapter and by rule and regulation.

335.019. **1. An advanced practice registered nurse's prescriptive authority shall
2 include authority to:**

3 **(1) Prescribe, dispense, and administer medications and nonscheduled legend
4 drugs, as defined in section 338.330, within such APRN's practice and specialty; and**

5 **(2) Notwithstanding any other provision of this chapter to the contrary, receive,
6 prescribe, administer, and provide nonscheduled legend drug samples from
7 pharmaceutical manufacturers to patients at no charge to the patient or any other party.**

8 **2.** The board of nursing may grant a certificate of controlled substance prescriptive
9 authority to an advanced practice registered nurse who:

10 (1) Submits proof of successful completion of an advanced pharmacology course that
11 shall include preceptorial experience in the prescription of drugs, medicines, and therapeutic
12 devices; and

13 (2) Provides documentation of a minimum of three hundred clock hours preceptorial
14 experience in the prescription of drugs, medicines, and therapeutic devices with a qualified
15 preceptor; and

16 (3) Provides evidence of a minimum of one thousand hours of practice in an advanced
17 practice nursing category prior to application for a certificate of prescriptive authority. The
18 one thousand hours shall not include clinical hours obtained in the advanced practice nursing
19 education program. The one thousand hours of practice in an advanced practice nursing
20 category may include transmitting a prescription order orally or telephonically or to an
21 inpatient medical record from protocols developed in collaboration with and signed by a
22 licensed physician; and

23 (4) Has a controlled substance prescribing authority delegated in the collaborative
24 practice arrangement under section 334.104 with a physician who has an unrestricted federal
25 Drug Enforcement Administration registration number and who is actively engaged in a
26 practice comparable in scope, specialty, or expertise to that of the advanced practice
27 registered nurse.

335.036. 1. The board shall:

2 (1) Elect for a one-year term a president and a secretary, who shall also be treasurer,
3 and the board may appoint, employ and fix the compensation of a legal counsel and such
4 board personnel as defined in subdivision (4) of subsection 11 of section 324.001 as are
5 necessary to administer the provisions of sections 335.011 to ~~[335.096]~~ **335.099**;

6 (2) Adopt and revise such rules and regulations as may be necessary to enable it to
7 carry into effect the provisions of sections 335.011 to ~~[335.096]~~ **335.099**;

8 (3) Prescribe minimum standards for educational programs preparing persons for
9 licensure **as a registered nurse or licensed practical nurse** pursuant to the provisions of
10 sections 335.011 to ~~[335.096]~~ **335.099**;

11 (4) Provide for surveys of such programs every five years and in addition at such
12 times as it may deem necessary;

13 (5) Designate as "approved" such programs as meet the requirements of sections
14 335.011 to ~~[335.096]~~ **335.099** and the rules and regulations enacted pursuant to such sections;
15 and the board shall annually publish a list of such programs;

16 (6) Deny or withdraw approval from educational programs for failure to meet
17 prescribed minimum standards;

18 (7) Examine, license, and cause to be renewed the licenses of duly qualified
19 applicants;

20 (8) Cause the prosecution of all persons violating provisions of sections 335.011 to
21 ~~[335.096]~~ **335.099**, and may incur such necessary expenses therefor;

22 (9) Keep a record of all the proceedings; and make an annual report to the governor
23 and to the director of the department of commerce and insurance.

24 2. The board shall set the amount of the fees which this chapter authorizes and
25 requires by rules and regulations. The fees shall be set at a level to produce revenue which
26 shall not substantially exceed the cost and expense of administering this chapter.

27 3. All fees received by the board pursuant to the provisions of sections 335.011 to
28 ~~335.096~~ **335.099** shall be deposited in the state treasury and be placed to the credit of the
29 state board of nursing fund. All administrative costs and expenses of the board shall be paid
30 from appropriations made for those purposes. The board is authorized to provide funding for
31 the nursing education incentive program established in sections 335.200 to 335.203.

32 4. The provisions of section 33.080 to the contrary notwithstanding, money in this
33 fund shall not be transferred and placed to the credit of general revenue until the amount in
34 the fund at the end of the biennium exceeds two times the amount of the appropriation from
35 the board's funds for the preceding fiscal year or, if the board requires by rule, permit renewal
36 less frequently than yearly, then three times the appropriation from the board's funds for the
37 preceding fiscal year. The amount, if any, in the fund which shall lapse is that amount in the
38 fund which exceeds the appropriate multiple of the appropriations from the board's funds for
39 the preceding fiscal year.

40 5. Any rule or portion of a rule, as that term is defined in section 536.010, that is
41 created under the authority delegated in this chapter shall become effective only if it complies
42 with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028.
43 All rulemaking authority delegated prior to August 28, 1999, is of no force and effect and
44 repealed. Nothing in this section shall be interpreted to repeal or affect the validity of any
45 rule filed or adopted prior to August 28, 1999, if it fully complied with all applicable
46 provisions of law. This section and chapter 536 are nonseverable and if any of the powers
47 vested with the general assembly pursuant to chapter 536 to review, to delay the effective date
48 or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of
49 rulemaking authority and any rule proposed or adopted after August 28, 1999, shall be invalid
50 and void.

335.046. 1. An applicant for a license to practice as a registered professional nurse
2 shall submit to the board a written application on forms furnished to the applicant. The
3 original application shall contain the applicant's statements showing the applicant's education
4 and other such pertinent information as the board may require. The applicant shall be of good
5 moral character and have completed at least the high school course of study, or the equivalent
6 thereof as determined by the state board of education, and have successfully completed the
7 basic professional curriculum in an accredited or approved school of nursing and earned a
8 professional nursing degree or diploma. Each application shall contain a statement that it is

9 made under oath or affirmation and that its representations are true and correct to the best
10 knowledge and belief of the person signing same, subject to the penalties of making a false
11 affidavit or declaration. Applicants from non-English-speaking lands shall be required to
12 submit evidence of proficiency in the English language. The applicant must be approved by
13 the board and shall pass an examination as required by the board. The board may require by
14 rule as a requirement for licensure that each applicant shall pass an oral or practical
15 examination. Upon successfully passing the examination, the board may issue to the
16 applicant a license to practice nursing as a registered professional nurse. The applicant for a
17 license to practice registered professional nursing shall pay a license fee in such amount as set
18 by the board. The fee shall be uniform for all applicants. Applicants from foreign countries
19 shall be licensed as prescribed by rule.

20 2. An applicant for license to practice as a licensed practical nurse shall submit to the
21 board a written application on forms furnished to the applicant. The original application shall
22 contain the applicant's statements showing the applicant's education and other such pertinent
23 information as the board may require. Such applicant shall be of good moral character, and
24 have completed at least two years of high school, or its equivalent as established by the state
25 board of education, and have successfully completed a basic prescribed curriculum in a state-
26 accredited or approved school of nursing, earned a nursing degree, certificate or diploma and
27 completed a course approved by the board on the role of the practical nurse. Each application
28 shall contain a statement that it is made under oath or affirmation and that its representations
29 are true and correct to the best knowledge and belief of the person signing same, subject to the
30 penalties of making a false affidavit or declaration. Applicants from non-English-speaking
31 countries shall be required to submit evidence of their proficiency in the English language.
32 The applicant must be approved by the board and shall pass an examination as required by the
33 board. The board may require by rule as a requirement for licensure that each applicant shall
34 pass an oral or practical examination. Upon successfully passing the examination, the board
35 may issue to the applicant a license to practice as a licensed practical nurse. The applicant for
36 a license to practice licensed practical nursing shall pay a fee in such amount as may be set by
37 the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall
38 be licensed as prescribed by rule.

39 3. **(1) An applicant for a license to practice as an advanced practice registered**
40 **nurse shall submit to the board a written application on forms furnished to the**
41 **applicant. The original application shall contain:**

42 **(a) Statements showing the applicant's education and other such pertinent**
43 **information as the board may require; and**

44 **(b) A statement that it is made under oath or affirmation and that its**
45 **representations are true and correct to the best knowledge and belief of the person**
46 **signing same, subject to the penalties of making a false affidavit or declaration.**

47 **(2) The applicant for a license to practice as an advanced practice registered**
48 **nurse shall pay a fee in such amount as may be set by the board. The fee shall be**
49 **uniform for all applicants.**

50 **(3) An applicant shall:**

51 **(a) Hold a current registered professional nurse license or privilege to practice,**
52 **shall not be currently subject to discipline or any restrictions, and shall not hold an**
53 **encumbered license or privilege to practice as a registered professional nurse or**
54 **advanced practice registered nurse in any state or territory;**

55 **(b) Have completed an accredited graduate-level advanced practice registered**
56 **nurse program and achieved at least one certification as a clinical nurse specialist, nurse**
57 **midwife, nurse practitioner, or registered nurse anesthetist, with at least one population**
58 **focus prescribed by rule of the board;**

59 **(c) Be currently certified by a national certifying body recognized by the**
60 **Missouri state board of nursing in the advanced practice registered nurse role; and**

61 **(d) Have a population focus on his or her certification, corresponding with his or**
62 **her educational advanced practice registered nurse program.**

63 **(4) Any person holding a document of recognition to practice nursing as an**
64 **advanced practice registered nurse in this state that is current on August 28, 2023, shall**
65 **be deemed to be licensed as an advanced practice registered nurse under the provisions**
66 **of this section and shall be eligible for renewal of such license under the conditions and**
67 **standards prescribed in this chapter and as prescribed by rule.**

68 **4.** Upon refusal of the board to allow any applicant to ~~[sit for]~~ **take** either the
69 registered professional nurses' examination or the licensed practical nurses' examination, ~~[as~~
70 ~~the case may be,]~~ **or upon refusal to issue an advanced practice registered nurse license,**
71 the board shall comply with the provisions of section 621.120 and advise the applicant of his
72 or her right to have a hearing before the administrative hearing commission. The
73 administrative hearing commission shall hear complaints taken pursuant to section 621.120.

74 ~~[4-]~~ **5.** The board shall not deny a license because of sex, religion, race, ethnic origin,
75 age or political affiliation.

335.049. 1. Any advanced practice registered nurse actively practicing in a
2 **direct or indirect patient care setting shall:**

3 **(1) Report to the board the mailing address or addresses of his or her current**
4 **practice location or locations;**

5 **(2) Notify the board within thirty days of any change in practice setting; and**

6 **(3) Notify the board within thirty days of any change in a mailing address of any**
7 **of his or her practice locations.**

8 **2. Advanced practice registered nurses shall maintain an adequate and complete**
9 **patient record for each patient that is retained on paper, microfilm, electronic media, or**
10 **other media that is capable of being printed for review by the board. An adequate and**
11 **complete patient record shall include documentation of the following information:**

12 **(1) Identification of the patient, including name, birth date, address, and**
13 **telephone number;**

14 **(2) The date or dates the patient was seen;**

15 **(3) The current status of the patient, including the reason for the visit;**

16 **(4) Observation of pertinent physical findings;**

17 **(5) Assessment and clinical impression of diagnosis;**

18 **(6) Plan for care and treatment or additional consultations or diagnostic testing,**
19 **if necessary. If treatment includes medication, the advanced practice registered nurse**
20 **shall include in the patient record the medication and dosage of any medication**
21 **prescribed, dispensed, or administered; and**

22 **(7) Any informed consent for office procedures.**

23 **3. Patient records remaining under the care, custody, and control of the**
24 **advanced practice registered nurse shall be maintained by the advanced practice**
25 **registered nurse or his or her designee for a minimum of seven years from the date on**
26 **which the last professional service was provided.**

27 **4. Any correction, addition, or change in any patient record made more than**
28 **forty-eight hours after the final entry is entered in the record and signed by the**
29 **advanced practice registered nurse shall be clearly marked and identified as such. The**
30 **date, time, and name of the person making the correction, addition, or change, as well as**
31 **the reason for the correction, addition, or change, shall be included.**

32 **5. Advanced practice registered nurses shall ensure that medical records are**
33 **completed within thirty days following each patient encounter.**

335.051. 1. The board shall issue a license to practice nursing as [~~either~~] **an**
2 **advanced practice registered nurse**, a registered professional nurse, or a licensed practical
3 nurse without examination to an applicant who has duly become licensed as [~~a~~] **an advanced**
4 **practice registered nurse**, registered nurse, or licensed practical nurse pursuant to the laws
5 of another state, territory, or foreign country if the applicant meets the qualifications required
6 of **advanced practice registered nurses**, registered nurses, or licensed practical nurses in this
7 state at the time the applicant was originally licensed in the other state, territory, or foreign
8 country.

9 2. Applicants from foreign countries shall be licensed as prescribed by rule.

10 3. Upon application, the board shall issue a temporary permit to an applicant pursuant
11 to subsection 1 of this section for a license as ~~[either]~~ **an advanced practice registered**
12 **nurse**, a registered professional nurse, or a licensed practical nurse who has made a prima
13 facie showing that the applicant meets all of the requirements for such a license. The
14 temporary permit shall be effective only until the board shall have had the opportunity to
15 investigate his **or her** qualifications for licensure pursuant to subsection 1 of this section and
16 to notify the applicant that his or her application for a license has been either granted or
17 rejected. In no event shall such temporary permit be in effect for more than twelve months
18 after the date of its issuance nor shall a permit be reissued to the same applicant. No fee shall
19 be charged for such temporary permit. The holder of a temporary permit which has not
20 expired, or been suspended or revoked, shall be deemed to be the holder of a license issued
21 pursuant to section 335.046 until such temporary permit expires, is terminated or is suspended
22 or revoked.

 335.056. 1. The license of every person licensed under the provisions of ~~[sections~~
2 ~~335.011 to 335.096]~~ **this chapter** shall be renewed as provided. An application for renewal
3 of license shall be mailed to every person to whom a license was issued or renewed during the
4 current licensing period. The applicant shall complete the application and return it to the
5 board by the renewal date with a renewal fee in an amount to be set by the board. The fee
6 shall be uniform for all applicants. The certificates of renewal shall render the holder thereof
7 a legal practitioner of nursing for the period stated in the certificate of renewal. Any person
8 who practices nursing as **an advanced practice registered nurse**, a registered professional
9 nurse, or ~~[as]~~ a licensed practical nurse during the time his **or her** license has lapsed shall be
10 considered an illegal practitioner and shall be subject to the penalties provided for violation of
11 the provisions of sections 335.011 to ~~[335.096]~~ **335.099**.

12 **2. The renewal of advanced practice registered nurse licenses and registered**
13 **professional nurse licenses shall occur at the same time, as prescribed by rule. Failure**
14 **to renew and maintain the registered professional nurse license or privilege to practice**
15 **or failure to provide the required fee and evidence of active certification or maintenance**
16 **of certification as prescribed by rules and regulations shall result in expiration of the**
17 **advanced practice registered nurse license.**

 335.076. 1. Any person who holds a license to practice professional nursing in this
2 state may use the title "Registered Professional Nurse" and the abbreviation ~~["R.N.,"]~~ **"RN"**.
3 No other person shall use the title "Registered Professional Nurse" or the abbreviation
4 ~~["R.N.,"]~~ **"RN"**. No other person shall assume any title or use any abbreviation or any other
5 words, letters, signs, or devices to indicate that the person using the same is a registered
6 professional nurse.

7 2. Any person who holds a license to practice practical nursing in this state may use
8 the title "Licensed Practical Nurse" and the abbreviation [~~"L.P.N."~~] "LPN". No other person
9 shall use the title "Licensed Practical Nurse" or the abbreviation [~~"L.P.N."~~] "LPN". No other
10 person shall assume any title or use any abbreviation or any other words, letters, signs, or
11 devices to indicate that the person using the same is a licensed practical nurse.

12 3. Any person who holds a license [~~or recognition~~] to practice advanced practice
13 nursing in this state may use the title "Advanced Practice Registered Nurse", **the**
14 **designations of "certified registered nurse anesthetist", "certified nurse midwife",**
15 **"certified clinical nurse specialist", and "certified nurse practitioner",** and the
16 [~~abbreviation~~] **abbreviations "APRN", [and any other title designations appearing on his**
17 **or her license] "CRNA", "CNM", "CNS", and "NP", respectively.** No other person shall
18 use the title "Advanced Practice Registered Nurse" or the abbreviation "APRN". No other
19 person shall assume any title or use any abbreviation or any other words, letters, signs, or
20 devices to indicate that the person using the same is an advanced practice registered nurse.

21 4. No person shall practice or offer to practice professional nursing, practical nursing,
22 or advanced practice nursing in this state or use any title, sign, abbreviation, card, or device to
23 indicate that such person is a practicing professional nurse, practical nurse, or advanced
24 practice nurse unless he or she has been duly licensed under the provisions of this chapter.

25 5. In the interest of public safety and consumer awareness, it is unlawful for any
26 person to use the title "nurse" in reference to himself or herself in any capacity, except
27 individuals who are or have been licensed as a registered nurse, licensed practical nurse, or
28 advanced practice registered nurse under this chapter.

29 6. Notwithstanding any law to the contrary, nothing in this chapter shall prohibit a
30 Christian Science nurse from using the title "Christian Science nurse", so long as such person
31 provides only religious nonmedical services when offering or providing such services to those
32 who choose to rely upon healing by spiritual means alone and does not hold his or her own
33 religious organization and does not hold himself or herself out as a registered nurse, advanced
34 practice registered nurse, nurse practitioner, licensed practical nurse, nurse midwife, clinical
35 nurse specialist, or nurse anesthetist, unless otherwise authorized by law to do so.

335.086. No person, firm, corporation or association shall:

2 (1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to furnish any
3 nursing diploma, license, renewal or record or aid or abet therein;

4 (2) Practice [~~professional or practical~~] nursing as defined by sections 335.011 to
5 [~~335.096~~] **335.099** under cover of any diploma, license, or record illegally or fraudulently
6 obtained or signed or issued unlawfully or under fraudulent representation;

7 (3) Practice [~~professional nursing or practical~~] nursing as defined by sections 335.011
8 to [~~335.096~~] **335.099** unless duly licensed to do so under the provisions of sections 335.011 to
9 [~~335.096~~] **335.099**;

10 (4) Use in connection with his **or her** name any designation tending to imply that he
11 **or she** is a licensed **advanced practice registered nurse, a licensed** registered professional
12 nurse, or a licensed practical nurse unless duly licensed so to practice under the provisions of
13 sections 335.011 to [~~335.096~~] **335.099**;

14 (5) Practice [~~professional nursing or practical~~] nursing during the time his **or her**
15 license issued under the provisions of sections 335.011 to [~~335.096~~] **335.099** shall be
16 suspended or revoked; or

17 (6) Conduct a nursing education program for the preparation of professional or
18 practical nurses unless the program has been accredited by the board.

335.175. 1. No later than January 1, 2014, there is hereby established within the state
2 board of registration for the healing arts and the state board of nursing the "Utilization of
3 Telehealth by Nurses". An advanced practice registered nurse (APRN) providing nursing
4 services under a collaborative practice arrangement under section 334.104 may provide such
5 services outside the geographic proximity requirements of section 334.104 if the
6 collaborating physician and advanced practice registered nurse utilize telehealth [~~in the~~
7 ~~care of the patient and if the services are provided in a rural area of need~~]. Telehealth
8 providers shall be required to obtain patient consent before telehealth services are initiated
9 and ensure confidentiality of medical information.

10 2. As used in this section, "telehealth" shall have the same meaning as such term is
11 defined in section 191.1145.

12 [~~3. (1) The boards shall jointly promulgate rules governing the practice of telehealth~~
13 ~~under this section. Such rules shall address, but not be limited to, appropriate standards for~~
14 ~~the use of telehealth.~~

15 [~~(2) Any rule or portion of a rule, as that term is defined in section 536.010, that is~~
16 ~~created under the authority delegated in this section shall become effective only if it complies~~
17 ~~with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028.~~
18 ~~This section and chapter 536 are nonseverable and if any of the powers vested with the~~
19 ~~general assembly pursuant to chapter 536 to review, to delay the effective date, or to~~
20 ~~disapprove and annul a rule are subsequently held unconstitutional, then the grant of~~
21 ~~rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be invalid~~
22 ~~and void.~~

23 4. ~~For purposes of this section, "rural area of need" means any rural area of this state~~
24 ~~which is located in a health professional shortage area as defined in section 354.650.]~~

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