

HOUSE BILL No. 1392

DIGEST OF HB 1392 (Updated January 27, 2020 3:32 pm - DI 77)

Citations Affected: IC 16-37; IC 25-23; IC 25-27.5; noncode.

Synopsis: Physician assistants and nurses. Allows a physician assistant who: (1) performs under a collaborative agreement that allows the physician assistant to certify the cause of death and submit death records as delegated by the collaborating physician; and (2) is last in attendance upon the deceased; and (3) certifies the cause of death of a deceased individual; to enter or sign a record on a death into the Indiana death registration system. Allows an advanced practice registered nurse who is last in attendance upon the deceased to certify the cause of death of a deceased individual and to enter or sign a record on a death into the Indiana death registration system. Provides that two of the registered nurses appointed to the Indiana state board of nursing (board) must be advanced practice registered nurses, and provides that one of the advanced practice registered nurses must have prescriptive authority. Amends the qualifications of registered nurse members and practical nurse members of the board.

Effective: July 1, 2020.

Smaltz, Mayfield

January 15, 2020, read first time and referred to Committee on Public Health. January 28, 2020, amended, reported — Do Pass.



Second Regular Session of the 121st General Assembly (2020)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2019 Regular Session of the General Assembly.

HOUSE BILL No. 1392

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

CECTION 1 IC 1/ 27 1 2 1 AC AMENDED DV DI 120 2010

1	SECTION 1. IC 16-3/-1-3.1, AS AMENDED BY P.L.138-2019,
2	SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2020]: Sec. 3.1. (a) The state department shall establish the
4	Indiana birth registration system (IBRS) for recording in an electronic
5	format live births in Indiana.
6	(b) The state department shall establish the Indiana death
7	registration system (IDRS) for recording in an electronic format deaths
8	in Indiana.
9	(c) Submission of records on births and deaths shall be entered by:
10	(1) funeral directors;
11	(2) physicians;
12	(3) coroners;
13	(4) medical examiners;
14	(5) persons in attendance at birth; and
15	(6) local health departments; and
16	(7) for purposes of records on death:
17	(A) physician assistants; or



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1	(B) advanced practice registered nurses;
2	using the electronic system created by the state department under this
3	section.
4	(d) A person in attendance at a live birth shall report a birth to the
5	local health officer in accordance with IC 16-37-2-2.
6	(e) Except as provided in subsection (f), death records shall be
7	submitted as follows, using the Indiana death registration system:
8	(1) The:
9	(A) physician last in attendance upon the deceased; or
10	(B) physician assistant last in attendance upon the
11	deceased;
12	(C) advanced practice registered nurse last in attendance
13	upon the deceased; or
14	(B) (D) person in charge of interment;
15	shall initiate the document process. If the person in charge of
16	interment initiates the process, the person in charge of interment
17	shall electronically submit the certificate required under
18	IC 16-37-3-5 to the physician, the physician assistant, or the
19	advanced practice registered nurse; last in attendance upon the
20	deceased not later than five (5) days after the death.
21	(2) The physician, the physician assistant, or the advanced
22	practice registered nurse last in attendance upon the deceased
23	shall electronically certify to the local health department the cause
24	of death on the certificate of death not later than five (5) days
25	after:
26	(A) initiating the document process; or
27	(B) receiving under IC 16-37-3-5 the electronic notification
28	from the person in charge of interment.
29	(3) The local health officer shall submit the reports required under
30	IC 16-37-1-5 to the state department not later than five (5) days
31	after electronically receiving under IC 16-37-3-5 the completed
32	certificate of death from the physician, the physician assistant,
33	or the advanced practice registered nurse last in attendance.
34	(f) If the IBRS or IDRS is unavailable for more than forty-eight (48)
35	hours, the state registrar may issue a notice permitting the filing of a
36	paper record of a live birth, a death, or both, subject to the following:
37	(1) The notice issued by the state registrar must contain a time
38	frame for which the notice is in effect and when the notice
39	expires. However, the notice automatically expires if the state
40	department notifies the local health officers that the IBRS or
41	IDRS is available, the notice has expired, and that all future
	is available, the notice has expired, and that all future



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submissions must use the IBRS or IDRS.

- (2) Paper records may not be accepted by the local health department or the state department of health on the earlier of the following:
 - (A) The expiration date listed in the notice or the expiration listed in a renewal notice described in subdivision (3).
 - (B) The state department notifies the local health officers when the IBRS or IDRS becomes available.
 - (3) The notice may be renewed by the state registrar until the IBRS or IDRS becomes available.
 - (4) Once the IBRS or IDRS becomes available, the local health officer shall enter the information contained in the paper record into the IBRS or IDRS.

SECTION 2. IC 16-37-3-3, AS AMENDED BY P.L.138-2019, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. Except as provided in IC 16-37-1-3.1(f), the physician, **the physician assistant, or the advanced practice registered nurse** last in attendance upon the deceased, or the person in charge of interment shall use the Indiana death registration system established under IC 16-37-1-3.1 to file a certificate of death with the local health officer of the jurisdiction in which the death occurred.

SECTION 3. IC 16-37-3-4, AS AMENDED BY P.L.156-2011, SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. The physician, **the physician assistant, or the advanced practice registered nurse** last in attendance upon the deceased, or the person in charge of interment shall secure the personal data required by the state department by rules adopted under IC 4-22-2 for preparation of the certificate of death or of stillbirth from the persons best qualified to give the information.

SECTION 4. IC 16-37-3-5, AS AMENDED BY P.L.138-2019, SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. Except as provided in IC 16-37-1-3.1(f), if the person in charge of interment initiates the process, the person in charge of interment shall electronically provide a certificate of death to the physician, **the physician assistant, or the advanced practice registered nurse** last in attendance upon the deceased. The physician, **the physician assistant, or the advanced practice registered nurse** last in attendance upon the deceased shall electronically certify to the local health department the cause of death on the certificate of death, using the Indiana death registration system.

SECTION 5. IC 16-37-3-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. (a) If:

(1) a death or stillbirth occurred without medical attendance; or



1	(2) the physician, the physician assistant, or the advanced
2	practice registered nurse last in attendance is physically or
3	mentally unable to sign the certificate of death or stillbirth;
4	the local health officer shall inquire into the cause of death from
5	anyone having knowledge of the facts regarding the cause of death.
6	(b) The local health officer may issue a subpoena to obtain
7	information and to employ a qualified pathologist to perform an
8	autopsy when, in the judgment of the local health officer, those
9	procedures are required to complete the inquiry. The local health
10	officer shall then certify the cause of death on the basis of the
11	information.
12	SECTION 6. IC 25-23-1-2, AS AMENDED BY P.L.249-2019,
13	SECTION 99, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
14	JULY 1, 2020]: Sec. 2. (a) There is established the Indiana state board
15	of nursing consisting of nine (9) members appointed by the governor
16	as follows, each to serve a term under IC 25-1-6.5:
17	(b) (1) Subject to IC 25-1-6.5-3, six (6) of the board members
18	must be registered nurses who are committed to advancing and
19	safeguarding the nursing profession as a whole. Two (2) of the
20	members appointed under this subdivision must be advanced
21	practice registered nurses, at least one (1) of whom has
22	prescriptive authority.
23	(2) Two (2) of the board's members must be licensed practical
24	nurses.
25	(3) One (1) member of the board, to represent the general public,
26	must be a resident of this state and not be associated with nursing
27	in any way other than as a consumer.
28	(e) (b) A member of the board may be removed under
29	IC 25-1-6.5-4.
30	SECTION 7. IC 25-23-1-4 IS AMENDED TO READ AS
31	FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. (a) Each registered
32	nurse member of the board required by section 2 of this chapter must:
33	(1) be a citizen of the United States;
34	(2) be a resident of Indiana; and
35	(3) have:
36	(A) graduated from an accredited educational program for the
37	preparation of practitioners of professional nursing;
38	(B) been licensed as a registered nurse in Indiana;
39	(C) had at least five (5) years successful experience since
40	graduation in administering, teaching, or practicing in an
41	educational program to prepare practitioners of nursing or in
42	administering or practicing in nursing service; and



1	(D) been actively engaged in the activities described in clause
2	(C) for at least three (3) at any time during the five (5) years
3	immediately preceding the member's initial appointment or
4	reappointment; and to the board.
5	(4) be actively engaged in the activities described in subdivision
6	(3)(C) throughout the member's term of office.
7	(b) Each licensed practical nurse member of the board required by
8	section 2 of this chapter must:
9	(1) be a citizen of the United States;
10	(2) be a resident of Indiana; and
11	(3) have:
12	(A) graduated from an accredited educational program for the
13	preparation of practitioners of practical nursing;
14	(B) been licensed as a licensed practical nurse in Indiana;
15	(C) had at least five (5) years successful experience as a
16	practitioner of practical nursing since graduation; and
17	(D) been actively engaged in practical nursing for at least three
18	(3) at any time during the five (5) years immediately
19	preceding the member's initial appointment to the board. and
20	(4) be actively engaged in practice throughout the member's term
21	of office.
22	(c) Before entering upon the discharge of official duties, each
23	member of the board shall file the constitutional oath of office in the
24	office of the secretary of state.
25	SECTION 8. IC 25-27.5-5-2, AS AMENDED BY P.L.247-2019,
26	SECTION 13, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
27	JULY 1, 2020]: Sec. 2. (a) A physician assistant:
28	(1) must engage in a dependent practice with a collaborating
29	physician; and
30	(2) may not be independent from the collaborating physician,
31	including any of the activities of other health care providers set
32	forth under IC 25-22.5-1-2(a)(1) through IC 25-22.5-1-2(a)(19).
33	A physician assistant may perform, under a collaborative agreement,
34	the duties and responsibilities that are delegated by the collaborating
35	physician and that are within the collaborating physician's scope of
36	practice, including prescribing and dispensing drugs and medical
37	devices or duties related to death records under section 3 of this
38	chapter. A patient may elect to be seen, examined, and treated by the
39	collaborating physician.
40	(b) If a physician assistant determines that a patient needs to be
41	examined by a physician, the physician assistant shall immediately
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notify the collaborating physician or physician designee.



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1	(c) If a physician assistant notifies the collaborating physician that
2	the physician should examine a patient, the collaborating physician
3	shall:
4	(1) schedule an examination of the patient unless the patien
5	declines; or
6	(2) arrange for another physician to examine the patient.
7	(d) A collaborating physician or physician assistant who does no
8	comply with subsections (b) and (c) is subject to discipline under
9	IC 25-1-9.
10	(e) A physician assistant's collaborative agreement with a
11	collaborating physician must:
12	(1) be in writing;
13	(2) include all the tasks delegated to the physician assistant by the
14	collaborating physician;
15	(3) set forth the collaborative agreement for the physician
16	assistant, including the emergency procedures that the physician
17	assistant must follow; and
18	(4) specify the protocol the physician assistant shall follow in
19	prescribing a drug.
20	(f) The physician shall submit the collaborative agreement to the
21	board. The physician assistant may prescribe a drug under the
22	collaborative agreement unless the board denies the collaborative
23	agreement. Any amendment to the collaborative agreement must be
24	resubmitted to the board, and the physician assistant may operate under
25	any new prescriptive authority under the amended collaborative
26	agreement unless the agreement has been denied by the board.
27	(g) A physician or a physician assistant who violates the
28	collaborative agreement described in this section may be disciplined
29	under IC 25-1-9.
30	SECTION 9. IC 25-27.5-5-3, AS AMENDED BY P.L.247-2019
31	SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
32	JULY 1, 2020]: Sec. 3. (a) A physician assistant is the agent of the
33	collaborating physician in the performance of all practice related
34	activities, including the ordering of diagnostic, therapeutic, and other
35	medical services.
36	(b) A physician assistant may:
37	(1) pronounce death: and
38	(2) authenticate and submit any form under IC 16-37-3;
39	only if the physician assistant has been delegated the duty or
40	responsibility under a collaborative agreement with a collaborating
41	physician.

(c) A physician assistant that does not comply the requirements



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l	under this section may be disciplined under IC 25-1-9.
2	SECTION 10. [EFFECTIVE JULY 1, 2020] (a) Notwithstanding
3	IC 25-23-1-2, as amended by this act, a member of the Indiana
1	state board of nursing serving on June 30, 2020, may serve the
5	remainder of the member's unexpired term under the membership
5	requirements of IC 25-23-1-2, before its amendment by this act.
7	(b) This SECTION expires December 31, 2024.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1392, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 17, delete "advanced practice registered nurses licensed under" and insert "physician assistants; or

(B) advanced practice registered nurses;".

Page 2, delete lines 1 through 3.

Page 2, line 12, delete "under a collaborative agreement;" and insert "last in attendance upon the deceased;".

Page 2, line 13, delete "nurse;" and insert "nurse last in attendance upon the deceased;".

Page 2, line 18, after "physician" insert ", the physician assistant, or the advanced practice registered nurse;".

Page 2, line 19, delete ", the physician assistant under a collaborative".

Page 2, line 20, delete "agreement, or the advanced practice registered nurse".

Page 2, line 22, after "physician" insert ", the physician assistant, or the advanced practice registered nurse".

Page 2, line 22, delete "deceased, the" and insert "deceased".

Page 2, line 23, delete "physician assistant under a collaborative agreement, or the".

Page 2, line 24, delete "advanced practice registered nurse".

Page 2, line 33, after "physician" insert ", the physician assistant, or the advanced practice registered nurse".

Page 2, line 33, delete "attendance, the" and insert "attendance.".

Page 2, delete lines 34 through 35.

Page 3, delete lines 15 through 27.

Page 3, line 31, after "physician" insert ", the physician assistant, or the advanced practice registered nurse".

Page 3, line 31, delete "the physician assistant".

Page 3, delete line 32.

Page 3, line 33, delete "the advanced practice registered nurse,".

Page 3, line 39, after "physician" insert ", the physician assistant, or the advanced practice registered nurse".

Page 3, line 40, delete "the physician assistant under a collaborative agreement".

Page 3, delete line 41.

Page 3, line 42, delete "nurse,".



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- Page 4, line 9, delete "physician last" and insert "physician, the physician assistant, or the advanced practice registered nurse last".
- Page 4, line 9, delete "deceased, the physician assistant" and insert "deceased.".
 - Page 4, delete line 10.
 - Page 4, line 11, delete "or the advanced practice registered nurse.".
- Page 4, line 11, after "physician" insert ", the physician assistant, or the advanced practice registered nurse".
 - Page 4, line 12, delete ", the physician assistant under a".
 - Page 4, delete line 13.
 - Page 4, line 14, delete "advanced practice registered nurse".
- Page 4, line 20, after "(2) the physician" insert ", the physician assistant, or the advanced practice registered nurse".
 - Page 4, line 20, delete ", the physician assistant".
 - Page 4, delete line 21.
- Page 4, line 22, delete "IC 25-27.5-5-3), or the advanced practice registered nurse".
- Page 4, between lines 32 and 33, begin a new paragraph and insert: "SECTION 7. IC 25-23-1-2, AS AMENDED BY P.L.249-2019, SECTION 99, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) There is established the Indiana state board of nursing consisting of nine (9) members appointed by the governor **as follows,** each to serve a term under IC 25-1-6.5:
 - (b) (1) Subject to IC 25-1-6.5-3, six (6) of the board members must be registered nurses who are committed to advancing and safeguarding the nursing profession as a whole. Two (2) of the members appointed under this subdivision must be advanced practice registered nurses, at least one (1) of whom has prescriptive authority.
 - **(2)** Two (2) of the board's members must be licensed practical nurses.
 - (3) One (1) member of the board, to represent the general public, must be a resident of this state and not be associated with nursing in any way other than as a consumer.
- (c) (b) A member of the board may be removed under IC 25-1-6.5-4.
- SECTION 7. IC 25-23-1-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. (a) Each registered nurse member of the board required by section 2 of this chapter must:
 - (1) be a citizen of the United States;
 - (2) be a resident of Indiana; and
 - (3) have:



- (A) graduated from an accredited educational program for the preparation of practitioners of professional nursing;
- (B) been licensed as a registered nurse in Indiana;
- (C) had at least five (5) years successful experience since graduation in administering, teaching, or practicing in an educational program to prepare practitioners of nursing or in administering or practicing in nursing service; and
- (D) been actively engaged in the activities described in clause
- (C) for at least three (3) at any time during the five (5) years immediately preceding the member's initial appointment or reappointment; and to the board.
- (4) be actively engaged in the activities described in subdivision
- (3)(C) throughout the member's term of office.
- (b) Each licensed practical nurse member of the board required by section 2 of this chapter must:
 - (1) be a citizen of the United States;
 - (2) be a resident of Indiana; and
 - (3) have:
 - (A) graduated from an accredited educational program for the preparation of practitioners of practical nursing;
 - (B) been licensed as a licensed practical nurse in Indiana;
 - (C) had at least five (5) years successful experience as a practitioner of practical nursing since graduation; and
 - (D) been actively engaged in practical nursing for at least three
 - (3) at any time during the five (5) years immediately preceding the member's initial appointment to the board. and
 - (4) be actively engaged in practice throughout the member's term of office.
- (c) Before entering upon the discharge of official duties, each member of the board shall file the constitutional oath of office in the office of the secretary of state.".

Page 6, line 5, delete "if" and insert "only if".

Page 6, after line 7, begin a new paragraph and insert:

"(c) A physician assistant that does not comply the requirements under this section may be disciplined under IC 25-1-9.

SECTION 11. [EFFECTIVE JULY 1, 2020] (a) Notwithstanding IC 25-23-1-2, as amended by this act, a member of the Indiana state board of nursing serving on June 30, 2020, may serve the remainder of the member's unexpired term under the membership requirements of IC 25-23-1-2, before its amendment by this act.

(b) This SECTION expires December 31, 2024.".



Renumber all SECTIONS consecutively. and when so amended that said bill do pass.

(Reference is to HB 1392 as introduced.)

KIRCHHOFER

Committee Vote: yeas 9, nays 0.

