



Reprinted
April 5, 2019

ENGROSSED SENATE BILL No. 394

DIGEST OF SB 394 (Updated April 4, 2019 12:32 pm - DI 104)

Citations Affected: IC 12-15; IC 16-37; IC 25-23; noncode.

Synopsis: Advanced practice registered nurses. Allows an advanced practice registered nurse who: (1) had primary responsibility for the treatment and care of a deceased individual for a period longer than six months; and (2) pronounced the time of death for the deceased individual; to certify a record on a death and enter the record into the Indiana death registration system. Specifies that at least two of the six registered nurse board members of the Indiana state board of nursing
(Continued next page)

Effective: Upon passage; July 1, 2019.

**Charbonneau, Crider, Becker,
Stoops, Rogers, Breaux, Melton,
Leising, Raatz**

(HOUSE SPONSORS — BACON, KIRCHHOFFER, AUSTIN)

January 14, 2019, read first time and referred to Committee on Health and Provider Services.

February 7, 2019, amended, reported favorably — Do Pass.

February 11, 2019, read second time, ordered engrossed. Engrossed.

February 12, 2019, read third time, passed. Yeas 43, nays 5.

HOUSE ACTION

March 7, 2019, read first time and referred to Committee on Public Health.

March 28, 2019, amended, reported — Do Pass.

April 4, 2019, read second time, amended, ordered engrossed.

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Digest Continued

(board) be advanced practice registered nurses with at least one of these members having prescriptive authority. Specifies requirements of certain board members. Provides that an advanced practice registered nurse with prescriptive authority and who has operated under a practice agreement with a practitioner for at least three years may operate without a practice agreement if certain conditions are met. Amends the hospital governing board requirements for the manner in which an advanced practice registered nurse who operates in the hospital will interact with other practitioners. Requires the Indiana state board of nursing to prepare a report to the general assembly concerning advance practice registered nurses who practice without a practice agreement. Makes a conforming change.

ES 394—LS 6552/DI 77



Reprinted
April 5, 2019

First Regular Session of the 121st General Assembly (2019)

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 2018 Regular and Special Session of the General Assembly.

ENGROSSED SENATE BILL No. 394

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:

- 1 SECTION 1. IC 12-15-5-14, AS AMENDED BY P.L.129-2018,
2 SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2019]: Sec. 14. (a) As used in this section, "advanced practice
4 registered nurse" means:
5 (1) a nurse practitioner; or
6 (2) a clinical nurse specialist;
7 who is a registered nurse licensed under IC 25-23 and qualified to
8 practice nursing in a specialty role based upon the additional
9 knowledge and skill gained through a formal organized program of
10 study and clinical experience, or the equivalent as determined by the
11 Indiana state board of nursing.
12 (b) As used in this section, "office" includes the following:
13 (1) The office of the secretary of family and social services.
14 (2) A managed care organization that has contracted with the
15 office of Medicaid policy and planning under this article.
16 (3) A person that has contracted with a managed care organization
17 described in subdivision (2).

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1 (c) The office shall reimburse eligible Medicaid claims for the
 2 following services provided by an advanced practice registered nurse
 3 employed by a community mental health center if the services are part
 4 of the advanced practice registered nurse's scope of practice:

- 5 (1) Mental health services.
 6 (2) Behavioral health services.
 7 (3) Substance abuse treatment.
 8 (4) Primary care services.
 9 (5) Evaluation and management services for inpatient or
 10 outpatient psychiatric treatment.
 11 (6) Prescription drugs.

12 (d) The office shall include an advanced practice registered nurse
 13 as an eligible provider for the supervision of a plan of treatment for a
 14 patient's outpatient mental health or substance abuse treatment
 15 services, if the supervision is in the advanced practice registered
 16 nurse's scope of practice, education, and training.

17 (e) This section:

- 18 (1) may not be construed to expand an advanced practice
 19 registered nurse's scope of practice; and
 20 (2) is subject to IC 25-23-1-19.4(c). ~~and applies only if the service~~
 21 ~~is included in the advanced practice registered nurse's practice~~
 22 ~~agreement with a collaborating physician.~~

23 SECTION 2. IC 16-37-1-3.1, AS AMENDED BY P.L.156-2011,
 24 SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 25 JULY 1, 2019]: Sec. 3.1. (a) Beginning January 1, 2011, the state
 26 department shall establish the Indiana birth registration system (IBRS)
 27 for recording in an electronic format live births in Indiana.

28 (b) Beginning January 1, 2011, the state department shall establish
 29 the Indiana death registration system (IDRS) for recording in an
 30 electronic format deaths in Indiana.

31 (c) Submission of records on births and deaths shall be entered by:

- 32 (1) funeral directors;
 33 (2) physicians;
 34 (3) coroners;
 35 (4) medical examiners;
 36 (5) persons in attendance at birth; ~~and~~
 37 (6) local health departments; **and**
 38 **(7) for purposes of records on deaths, advanced practice**
 39 **registered nurses providing primary care (as described in**
 40 **IC 16-37-3-0.5);**

41 using the electronic system created by the state department under this
 42 section.



1 (d) A person in attendance at a live birth shall report a birth to the
2 local health officer in accordance with IC 16-37-2-2.

3 (e) Death records shall be submitted as follows, using the Indiana
4 death registration system:

5 (1) The:

6 (A) physician last in attendance upon the deceased; ~~or~~

7 **(B) advanced practice registered nurse providing primary
8 care to the deceased; or**

9 ~~(B)~~ (C) person in charge of interment;

10 shall initiate the document process. If the person in charge of
11 interment initiates the process, the person in charge of interment
12 shall electronically submit the certificate required under
13 IC 16-37-3-5 to the physician last in attendance upon the
14 deceased **or the advanced practice registered nurse providing
15 primary care to the deceased** not later than five (5) days after
16 the death.

17 (2) The physician last in attendance upon the deceased **or the
18 advanced practice registered nurse providing primary care to
19 the deceased** shall electronically certify to the local health
20 department the cause of death on the certificate of death not later
21 than five (5) days after:

22 (A) initiating the document process; or

23 (B) receiving under IC 16-37-3-5 the electronic notification
24 from the person in charge of interment.

25 (3) The local health officer shall submit the reports required under
26 IC 16-37-1-5 to the state department not later than five (5) days
27 after electronically receiving under IC 16-37-3-5 the completed
28 certificate of death from the physician last in attendance **or the
29 advanced practice registered nurse providing primary care.**

30 SECTION 3. IC 16-37-3-0.5 IS ADDED TO THE INDIANA CODE
31 AS A **NEW SECTION** TO READ AS FOLLOWS [EFFECTIVE JULY
32 1, 2019]: **Sec. 0.5. This chapter applies to an advanced practice
33 registered nurse licensed under IC 25-23 if the advanced practice
34 registered nurse:**

35 **(1) had primary responsibility for the treatment and care of
36 the deceased individual for a period longer than six (6)
37 months; and**

38 **(2) pronounced the time of death for the deceased individual.**

39 SECTION 4. IC 16-37-3-3, AS AMENDED BY P.L.122-2012,
40 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
41 JULY 1, 2019]: Sec. 3. (a) The physician last in attendance upon the
42 deceased, **the advanced practice registered nurse who provided**



1 **primary care as described in section 0.5 of this chapter**, or the
 2 person in charge of interment shall file a certificate of death or of
 3 stillbirth with the local health officer of the jurisdiction in which the
 4 death or stillbirth occurred. The local health officer shall retain a copy
 5 of the certificate of death.

6 (b) Notwithstanding subsection (a), beginning January 1, 2011, for
 7 a death occurring after December 31, 2010, the physician last in
 8 attendance upon the deceased, **the advanced practice registered**
 9 **nurse who provided primary care as described in section 0.5 of this**
 10 **chapter**, or the person in charge of interment shall use the Indiana
 11 death registration system established under IC 16-37-1-3.1 to file a
 12 certificate of death with the local health officer of the jurisdiction in
 13 which the death occurred.

14 SECTION 5. IC 16-37-3-4, AS AMENDED BY P.L.156-2011,
 15 SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 16 JULY 1, 2019]: Sec. 4. The physician last in attendance upon the
 17 deceased, **the advanced practice registered nurse who provided**
 18 **primary care as described in section 0.5 of this chapter**, or the
 19 person in charge of interment shall secure the personal data required by
 20 the state department by rules adopted under IC 4-22-2 for preparation
 21 of the certificate of death or of stillbirth from the persons best qualified
 22 to give the information.

23 SECTION 6. IC 16-37-3-5, AS AMENDED BY P.L.122-2012,
 24 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 25 JULY 1, 2019]: Sec. 5. (a) If the person in charge of interment initiates
 26 the process, the person in charge of interment shall present a certificate
 27 of death to the physician last in attendance upon the deceased **or the**
 28 **advanced practice registered nurse who provided primary care as**
 29 **described in section 0.5 of this chapter**, who shall certify the cause
 30 of death upon the certificate of death or of stillbirth.

31 (b) Notwithstanding subsection (a), beginning January 1, 2011, for
 32 a death occurring after December 31, 2010, using the Indiana death
 33 registration system established under IC 16-37-1-3.1, if the person in
 34 charge of interment initiates the process, the person in charge of
 35 interment shall electronically provide a certificate of death to the
 36 physician last in attendance upon the deceased **or the advanced**
 37 **practice registered nurse who provided primary care as described**
 38 **in section 0.5 of this chapter**. The physician last in attendance upon
 39 the deceased **or the advanced practice registered nurse who**
 40 **provided primary care as described in section 0.5 of this chapter**
 41 shall electronically certify to the local health department the cause of
 42 death on the certificate of death, using the Indiana death registration



1 system.

2 SECTION 7. IC 16-37-3-6 IS AMENDED TO READ AS

3 FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 6. (a) If:

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

5 (2) the physician last in attendance **or the advanced practice**

6 **registered nurse who provided primary care as described in**

7 **section 0.5 of this chapter** is physically or mentally unable to

8 sign the certificate of death or stillbirth;

9 the local health officer shall inquire into the cause of death from

10 anyone having knowledge of the facts regarding the cause of death.

11 (b) The local health officer may issue a subpoena to obtain

12 information and to employ a qualified pathologist to perform an

13 autopsy when, in the judgment of the local health officer, those

14 procedures are required to complete the inquiry. The local health

15 officer shall then certify the cause of death on the basis of the

16 information.

17 SECTION 8. IC 25-23-1-2 IS AMENDED TO READ AS

18 FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 2. (a) There is

19 established the Indiana state board of nursing consisting of nine (9)

20 members appointed by the governor, each to serve a term of four (4)

21 years subject to death, resignation, or removal by the governor.

22 (b) Six (6) of the board members must be registered nurses who are

23 committed to advancing and safeguarding the nursing profession as a

24 whole, **at least two (2) of whom are advanced practice registered**

25 **nurses and at least one (1) of the advanced practice registered**

26 **nurse members having prescriptive authority.** Two (2) of the board's

27 members must be licensed practical nurses. One (1) member of the

28 board, to represent the general public, must be a resident of this state

29 and not be associated with nursing in any way other than as a

30 consumer.

31 (c) Each appointed board member may serve until the member's

32 successor has been appointed and qualified. Any vacancy occurring in

33 the membership of the board for any cause shall be filled by

34 appointment by the governor for the unexpired term. Members of the

35 board may be appointed for more than one (1) term. However, no

36 person who has served as a member of the board for more than six (6)

37 consecutive years may be reappointed. Reappointments of persons who

38 have served six (6) consecutive years as a member of the board may be

39 made after three (3) years have elapsed.

40 SECTION 9. IC 25-23-1-4 IS AMENDED TO READ AS

41 FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 4. (a) Each registered

42 nurse member of the board required by section 2 of this chapter must:



- 1 (1) be a citizen of the United States;
 2 (2) be a resident of Indiana; **and**
 3 (3) have:
 4 (A) graduated from an accredited educational program for the
 5 preparation of practitioners of professional nursing;
 6 (B) been licensed as a registered nurse in Indiana;
 7 (C) had at least five (5) years successful experience since
 8 graduation in administering, teaching, or practicing in an
 9 educational program to prepare practitioners of nursing or in
 10 administering or practicing in nursing service; and
 11 (D) been actively engaged in the activities described in clause
 12 (C) **for at least three (3) years at any time during the five (5)**
 13 **years** immediately preceding **the initial** appointment. **or**
 14 **reappointment; and**
 15 ~~(4) be actively engaged in the activities described in subdivision~~
 16 ~~(3)(C) throughout the member's term of office.~~
 17 (b) Each licensed practical nurse member of the board required by
 18 section 2 of this chapter must:
 19 (1) be a citizen of the United States;
 20 (2) be a resident of Indiana; **and**
 21 (3) have:
 22 (A) graduated from an accredited educational program for the
 23 preparation of practitioners of practical nursing;
 24 (B) been licensed as a licensed practical nurse in Indiana;
 25 (C) had at least five (5) years successful experience as a
 26 practitioner of practical nursing since graduation; and
 27 (D) been actively engaged in practical nursing ~~for at least three~~
 28 ~~(3) years at any time during the five (5) years~~ immediately
 29 preceding **the initial** appointment to the board. **and**
 30 ~~(4) be actively engaged in practice throughout the member's term~~
 31 ~~of office.~~
 32 (c) Before entering upon the discharge of official duties, each
 33 member of the board shall file the constitutional oath of office in the
 34 office of the secretary of state.
 35 SECTION 10. IC 25-23-1-19.4, AS AMENDED BY P.L.129-2018,
 36 SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 37 JULY 1, 2019]: Sec. 19.4. (a) This section does not apply to certified
 38 registered nurse anesthetists.
 39 (b) As used in this section, "practitioner" has the meaning set forth
 40 in IC 16-42-19-5. However, the term does not include the following:
 41 (1) A veterinarian.
 42 (2) An advanced practice registered nurse.



- 1 (3) A physician assistant.
 2 (4) **Beginning July 1, 2022:**
 3 (A) a podiatrist;
 4 (B) an optometrist; or
 5 (C) a dentist.
- 6 (c) **Except as provided in subsection (d),** an advanced practice
 7 registered nurse shall ~~operate:~~ **practice:**
 8 (1) ~~in collaboration~~ with a licensed practitioner as evidenced by
 9 a practice agreement;
 10 (2) by privileges granted by the governing board of a hospital
 11 licensed under IC 16-21 with the advice of the medical staff of the
 12 hospital that sets forth the manner in which an advanced practice
 13 registered nurse ~~and a licensed practitioner~~ will cooperate,
 14 coordinate, and consult with ~~each other practitioners~~ in the
 15 provision of health care to their patients; or
 16 (3) by privileges granted by the governing body of a hospital
 17 operated under IC 12-24-1 that sets forth the manner in which an
 18 advanced practice registered nurse ~~and a licensed practitioner~~ will
 19 cooperate, coordinate, and consult with ~~each other practitioners~~
 20 in the provision of health care to their patients.
- 21 (d) **An advanced practice registered nurse with prescriptive**
 22 **authority may practice without a practice agreement if the**
 23 **following conditions are met:**
 24 (1) **The advanced practice registered nurse has practiced**
 25 **under a practice agreement with a practitioner for the full**
 26 **time equivalent of at least three (3) years.**
 27 (2) **The practitioner described in subdivision (1) has been**
 28 **licensed in Indiana for a minimum of five (5) years with the**
 29 **practitioner's respective governing board.**
 30 (3) **The practitioner has reviewed at least five percent (5%) of**
 31 **the advanced practice registered nurse's prescriptive charts**
 32 **during the practice agreement period.**
 33 (4) **The advanced practice registered nurse has submitted an**
 34 **attestation to the board to the completion of the required**
 35 **three (3) year practice agreement.**
 36 (5) **The advanced practice registered nurse practices in the**
 37 **same practice area in which the advanced practice registered**
 38 **nurse practiced with the practitioner under a practice**
 39 **agreement.**
 40 (6) **The advanced practice registered nurse establishes a**
 41 **referral plan to other appropriate practitioners for complex**
 42 **medical cases, emergencies, and cases that are beyond the**



1 **advanced practice registered nurse's scope of practice.**
 2 **The board shall designate on the advanced practice registered**
 3 **nurse's prescriptive authority license, in a manner determined by**
 4 **the board, that the advanced practice registered nurse has**
 5 **completed the requirements of this subsection.**

6 **(e) If an advanced practice registered nurse practices**
 7 **independently without a practice agreement, the advanced practice**
 8 **registered nurse shall notify patients, through posting in a**
 9 **prominent and conspicuous place in the patient waiting area, that**
 10 **the advanced practice registered nurse is practicing independently.**

11 SECTION 11. IC 25-23-1-19.6, AS AMENDED BY P.L.129-2018,
 12 SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 13 JULY 1, 2019]: Sec. 19.6. (a) When the board grants authority to an
 14 advanced practice registered nurse to prescribe legend drugs under this
 15 chapter, the board shall assign an identification number to the
 16 advanced practice registered nurse.

17 (b) An advanced practice registered nurse who is granted authority
 18 by the board to prescribe legend drugs must do the following:

19 (1) Enter on each prescription form that the advanced practice
 20 registered nurse uses to prescribe a legend drug:

21 (A) the signature of the advanced practice registered nurse;

22 (B) initials indicating the credentials awarded to the advanced
 23 practice registered nurse under this chapter; and

24 (C) the identification number assigned to the advanced
 25 practice registered nurse under subsection (a).

26 (2) Comply with all applicable state and federal laws concerning
 27 prescriptions for legend drugs.

28 (c) An advanced practice registered nurse may be granted authority
 29 to prescribe legend drugs under this chapter only within the scope of
 30 practice of the advanced practice registered nurse and, **if applicable,**
 31 the scope of the licensed collaborating health practitioner.

32 SECTION 12. [EFFECTIVE UPON PASSAGE] **(a) Before July 1,**
 33 **2023, the Indiana state board of nursing shall report to the general**
 34 **assembly in an electronic format under IC 5-14-6 the following**
 35 **information concerning advanced practice registered nurses who**
 36 **practice without a practice agreement:**

37 **(1) The number who have been authorized to practice without**
 38 **a practice agreement.**

39 **(2) The geographic practice areas.**

40 **(3) The medical population practice areas.**

41 **(4) A summary of disciplinary actions taken.**

42 **(b) This SECTION expires December 31, 2023.**



1 **SECTION 13. An emergency is declared for this act.**



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 394, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 2, reset in roman line 30.

Page 2, line 31, reset in roman "(3)".

Page 2, line 31, delete "(2)".

Page 2, between lines 31 and 32, begin a new line block indented and insert:

"(4) Beginning July 1, 2022:

(A) a podiatrist;

(B) an optometrist; or

(C) a dentist."

Page 2, line 33, strike "operate:" and insert "**practice:**".

Page 3, line 6, delete "operate" and insert "**practice**".

Page 3, line 8, delete "operated" and insert "**practiced**".

Page 3, line 9, after "for" insert "**the full time equivalent of**".

Page 3, line 9, delete "one" and insert "**three (3) years.**".

Page 3, delete line 10.

Page 3, line 18, delete "one" and insert "**three (3)**".

Page 3, line 19, delete "(1)".

Page 3, between lines 19 and 20, begin a new line block indented and insert:

"(5) The advanced practice registered nurse practices in the same practice area in which the advanced practice registered nurse practiced with the practitioner under a practice agreement.

(6) The advanced practice registered nurse establishes a referral plan to other appropriate practitioners for complex medical case, emergencies, and cases that are beyond the advanced practice registered nurse's scope of practice."

Page 3, line 20, delete "include an "I" after the prescriptive authority" and insert "**designate on the advanced practice registered nurse's prescriptive authority license, in a manner determined by the board, that the advanced practice registered nurse has completed the requirements of this subsection.**

(e) If an advanced practice registered nurse practices independently without a practice agreement, the advanced practice registered nurse shall notify patients, through posting in a



prominent and conspicuous place in the patient waiting area, that the advanced practice registered nurse is practicing independently."

Page 3, delete lines 21 and 22, begin a new paragraph and insert:

"SECTION 3. IC 25-23-1-19.6, AS AMENDED BY P.L.129-2018, SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 19.6. (a) When the board grants authority to an advanced practice registered nurse to prescribe legend drugs under this chapter, the board shall assign an identification number to the advanced practice registered nurse.

(b) An advanced practice registered nurse who is granted authority by the board to prescribe legend drugs must do the following:

(1) Enter on each prescription form that the advanced practice registered nurse uses to prescribe a legend drug:

- (A) the signature of the advanced practice registered nurse;
- (B) initials indicating the credentials awarded to the advanced practice registered nurse under this chapter; and
- (C) the identification number assigned to the advanced practice registered nurse under subsection (a).

(2) Comply with all applicable state and federal laws concerning prescriptions for legend drugs.

(c) An advanced practice registered nurse may be granted authority to prescribe legend drugs under this chapter only within the scope of practice of the advanced practice registered nurse and, **if applicable**, the scope of the licensed collaborating health practitioner.

SECTION 4 [EFFECTIVE UPON PASSAGE] (a) Before October 1, 2019, the Indiana state board of nursing shall study and report to the general assembly in an electronic format under IC 5-14-6 the following information concerning advanced practice registered nurses:

(1) The clinical training required for an advanced practice registered nurse in Indiana.

(2) Information concerning the implementation of this act concerning allowing advanced practice registered nurses to operate without a practice agreement with a practitioner, as specified in this act.



(b) This SECTION expires December 31, 2019.
SECTION 5. An emergency is declared for this act."
Re-number all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 394 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 8, Nays 1.

COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 394, 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 2, between lines 22 and 23, begin a new paragraph and insert:
"SECTION 2. IC 16-37-1-3.1, AS AMENDED BY P.L.156-2011, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 3.1. (a) Beginning January 1, 2011, the state department shall establish the Indiana birth registration system (IBRS) for recording in an electronic format live births in Indiana.

(b) Beginning January 1, 2011, the state department shall establish the Indiana death registration system (IDRS) for recording in an electronic format deaths in Indiana.

(c) Submission of records on births and deaths shall be entered by:

- (1) funeral directors;
- (2) physicians;
- (3) coroners;
- (4) medical examiners;
- (5) persons in attendance at birth; ~~and~~
- (6) local health departments; **and**
- (7) for purposes of records on deaths, advanced practice registered nurses providing primary care (as described in IC 16-37-3-0.5);**

using the electronic system created by the state department under this section.

(d) A person in attendance at a live birth shall report a birth to the local health officer in accordance with IC 16-37-2-2.

(e) Death records shall be submitted as follows, using the Indiana

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death registration system:

(1) The:

(A) physician last in attendance upon the deceased; ~~or~~

(B) advanced practice registered nurse providing primary care to the deceased; or

~~(B)~~ (C) person in charge of interment;

shall initiate the document process. If the person in charge of interment initiates the process, the person in charge of interment shall electronically submit the certificate required under IC 16-37-3-5 to the physician last in attendance upon the deceased **or the advanced practice registered nurse providing primary care to the deceased** not later than five (5) days after the death.

(2) The physician last in attendance upon the deceased **or the advanced practice registered nurse providing primary care to the deceased** shall electronically certify to the local health department the cause of death on the certificate of death not later than five (5) days after:

(A) initiating the document process; or

(B) receiving under IC 16-37-3-5 the electronic notification from the person in charge of interment.

(3) The local health officer shall submit the reports required under IC 16-37-1-5 to the state department not later than five (5) days after electronically receiving under IC 16-37-3-5 the completed certificate of death from the physician last in attendance **or the advanced practice registered nurse providing primary care.**

SECTION 3. IC 16-37-3-0.5 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE JULY 1, 2019]: **Sec. 0.5. This chapter applies to an advanced practice registered nurse licensed under IC 25-23 if the advanced practice registered nurse:**

(1) had primary responsibility for the treatment and care of the deceased individual for a period longer than six (6) months; and

(2) pronounced the time of death for the deceased individual.

SECTION 4. IC 16-37-3-3, AS AMENDED BY P.L.122-2012, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 3. (a) The physician last in attendance upon the deceased, **the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter**, or the person in charge of interment shall file a certificate of death or of stillbirth with the local health officer of the jurisdiction in which the



death or stillbirth occurred. The local health officer shall retain a copy of the certificate of death.

(b) Notwithstanding subsection (a), beginning January 1, 2011, for a death occurring after December 31, 2010, the physician last in attendance upon the deceased, **the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter**, 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 5. IC 16-37-3-4, AS AMENDED BY P.L.156-2011, SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 4. The physician last in attendance upon the deceased, **the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter**, 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 6. IC 16-37-3-5, AS AMENDED BY P.L.122-2012, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 5. (a) If the person in charge of interment initiates the process, the person in charge of interment shall present a certificate of death to the physician last in attendance upon the deceased **or the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter**, who shall certify the cause of death upon the certificate of death or of stillbirth.

(b) Notwithstanding subsection (a), beginning January 1, 2011, for a death occurring after December 31, 2010, using the Indiana death registration system established under IC 16-37-1-3.1, 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 last in attendance upon the deceased **or the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter**. The physician last in attendance upon the deceased **or the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter** shall electronically certify to the local health department the cause of death on the certificate of death, using the Indiana death registration system.

SECTION 7. IC 16-37-3-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 6. (a) If:

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- (1) a death or stillbirth occurred without medical attendance; or
- (2) the physician last in attendance **or the advanced practice registered nurse who provided primary care as described in section 0.5 of this chapter** is physically or mentally unable to sign the certificate of death or stillbirth;

the local health officer shall inquire into the cause of death from anyone having knowledge of the facts regarding the cause of death.

(b) The local health officer may issue a subpoena to obtain information and to employ a qualified pathologist to perform an autopsy when, in the judgment of the local health officer, those procedures are required to complete the inquiry. The local health officer shall then certify the cause of death on the basis of the information."

Page 3, line 30, delete "case," and insert "**cases**,".

Page 4, line 20, delete "October" and insert "**July**".

Page 4, line 21, delete "2019," and insert "**2023**,".

Page 4, line 21, delete "study and".

Page 4, line 24, delete "nurses:" and insert "**nurses who practice without a practice agreement**:".

Page 4, delete lines 25 through 30, begin a new line block indented and insert:

"(1) The number who have been authorized to practice without a practice agreement.

(2) The geographic practice areas.

(3) The medical population practice areas.

(4) A summary of disciplinary actions taken."

Page 4, line 31, delete "2019." and insert "**2023**,".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 394 as printed February 8, 2019.)

KIRCHHOFER

Committee Vote: yeas 8, nays 4.



HOUSE MOTION

Mr. Speaker: I move that Engrossed Senate Bill 394 be amended to read as follows:

Page 5, between lines 16 and 17, begin a new paragraph and insert:
 "SECTION 8. IC 25-23-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 2. (a) There is established the Indiana state board of nursing consisting of nine (9) members appointed by the governor, each to serve a term of four (4) years subject to death, resignation, or removal by the governor.

(b) Six (6) of the board members must be registered nurses who are committed to advancing and safeguarding the nursing profession as a whole, **at least two (2) of whom are advanced practice registered nurses and at least one (1) of the advanced practice registered nurse members having prescriptive authority.** Two (2) of the board's members must be licensed practical nurses. 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) Each appointed board member may serve until the member's successor has been appointed and qualified. Any vacancy occurring in the membership of the board for any cause shall be filled by appointment by the governor for the unexpired term. Members of the board may be appointed for more than one (1) term. However, no person who has served as a member of the board for more than six (6) consecutive years may be reappointed. Reappointments of persons who have served six (6) consecutive years as a member of the board may be made after three (3) years have elapsed.

SECTION 9. IC 25-23-1-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: 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) years at any time during the five (5) years immediately preceding the initial appointment. or reappointment; and

(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) years at any time during the five (5) years immediately preceding the 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."

Renumber all SECTIONS consecutively.

(Reference is to ESB 394 as printed March 29, 2019.)

MAYFIELD

