

AN ACT concerning regulation.

**Be it enacted by the People of the State of Illinois,
represented in the General Assembly:**

Section 5. The Nurse Practice Act is amended by changing Section 65-43 as follows:

(225 ILCS 65/65-43)

(Section scheduled to be repealed on January 1, 2028)

Sec. 65-43. Full practice authority.

(a) An Illinois-licensed advanced practice registered nurse certified as a nurse practitioner, nurse midwife, or clinical nurse specialist shall be deemed by law to possess the ability to practice without a written collaborative agreement as set forth in this Section.

(b) An advanced practice registered nurse certified as a nurse midwife, clinical nurse specialist, or nurse practitioner who files with the Department a notarized attestation of completion of at least 250 hours of continuing education or training and at least 4,000 hours of clinical experience after first attaining national certification shall not require a written collaborative agreement, ~~except as specified in subsection (c)~~. Documentation of successful completion shall be provided to the Department upon request.

Continuing education or training hours required by

subsection (b) shall be in the advanced practice registered nurse's area of certification as set forth by Department rule.

The clinical experience must be in the advanced practice registered nurse's area of certification. The clinical experience shall be in collaboration with a physician or physicians. Completion of the clinical experience must be attested to by the collaborating physician or physicians or employer and the advanced practice registered nurse. If the collaborating physician or physicians or employer is unable to attest to the completion of the clinical experience, the Department may accept other evidence of clinical experience as established by rule.

(c) The scope of practice of an advanced practice registered nurse with full practice authority includes:

(1) all matters included in subsection (c) of Section 65-30 of this Act;

(2) practicing without a written collaborative agreement in all practice settings consistent with national certification;

(3) authority to prescribe both legend drugs and Schedule II through V controlled substances; this authority includes prescription of, selection of, orders for, administration of, storage of, acceptance of samples of, and dispensing over the counter medications, legend drugs, and controlled substances categorized as any Schedule II through V controlled substances, as defined in

Article II of the Illinois Controlled Substances Act, and other preparations, including, but not limited to, botanical and herbal remedies;

(4) prescribing benzodiazepines or Schedule II narcotic drugs, such as opioids, only in a consultation relationship with a physician; this consultation relationship shall be recorded in the Prescription Monitoring Program website, pursuant to Section 316 of the Illinois Controlled Substances Act, by the physician and advanced practice registered nurse with full practice authority and is not required to be filed with the Department; the specific Schedule II narcotic drug must be identified by either brand name or generic name; the specific Schedule II narcotic drug, such as an opioid, may be administered by oral dosage or topical or transdermal application; delivery by injection or other route of administration is not permitted; at least monthly, the advanced practice registered nurse and the physician must discuss the condition of any patients for whom a benzodiazepine or opioid is prescribed; nothing in this subsection shall be construed to require a prescription by an advanced practice registered nurse with full practice authority to require a physician name;

(5) authority to obtain an Illinois controlled substance license and a federal Drug Enforcement Administration number; and

(6) use of only local anesthetic.

The scope of practice of an advanced practice registered nurse does not include operative surgery. Nothing in this Section shall be construed to preclude an advanced practice registered nurse from assisting in surgery.

(d) The Department may adopt rules necessary to administer this Section, including, but not limited to, requiring the completion of forms and the payment of fees.

(e) Nothing in this Act shall be construed to authorize an advanced practice registered nurse with full practice authority to provide health care services required by law or rule to be performed by a physician.

(Source: P.A. 100-513, eff. 1-1-18; 101-13, eff. 6-12-19.)