

By: Senator(s) Hill

To: Public Health and Welfare

SENATE BILL NO. 2416

1 AN ACT TO AMEND SECTIONS 73-15-5 AND 73-15-20, MISSISSIPPI  
2 CODE OF 1972, TO PROVIDE THAT CERTIFIED REGISTERED NURSE  
3 ANESTHETISTS (CRNA) WITH TWO YEARS OF PRACTICE IN GOOD STANDING  
4 SHALL NOT BE REQUIRED TO HAVE A WRITTEN COLLABORATIVE AGREEMENT  
5 WITH A PHYSICIAN OR BE REQUIRED TO SUBMIT PATIENT CHARTS TO A  
6 PHYSICIAN FOR REVIEW; AND FOR RELATED PURPOSES.

7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

8 **SECTION 1.** Section 73-15-5, Mississippi Code of 1972, is  
9 amended as follows:

10 73-15-5. (1) "Board" means the Mississippi Board of  
11 Nursing.

12 (2) The "practice of nursing" by a registered nurse means  
13 the performance for compensation of services which requires  
14 substantial knowledge of the biological, physical, behavioral,  
15 psychological and sociological sciences and of nursing theory as  
16 the basis for assessment, diagnosis, planning, intervention and  
17 evaluation in the promotion and maintenance of health; management  
18 of individuals' responses to illness, injury or infirmity; the  
19 restoration of optimum function; or the achievement of a dignified  
20 death. "Nursing practice" includes, but is not limited to,



21 administration, teaching, counseling, delegation and supervision  
22 of nursing, and execution of the medical regimen, including the  
23 administration of medications and treatments prescribed by any  
24 licensed or legally authorized physician or dentist. The  
25 foregoing shall not be deemed to include acts of medical diagnosis  
26 or prescriptions of medical, therapeutic or corrective measures,  
27 except as may be set forth by rules and regulations promulgated  
28 and implemented by the Mississippi Board of Nursing.

29 (3) "Clinical nurse specialist practice" by a certified  
30 clinical nurse specialist means the delivery of advanced practice  
31 nursing care to individuals or groups using advanced diagnostic  
32 and assessment skills to manage and improve the health status of  
33 individuals and families; diagnose human responses to actual or  
34 potential health problems; plan for health promotion, disease  
35 prevention, and therapeutic intervention in collaboration with the  
36 patient or client; implement therapeutic interventions based on  
37 the nurse specialist's area of expertise and within the scope of  
38 advanced nursing practice, including, but not limited to, direct  
39 patient care, counseling, teaching, collaboration with other  
40 licensed health care providers; and, coordination of health care  
41 as necessary and appropriate and evaluation of the effectiveness  
42 of care.

43 (4) "Advanced nursing practice" means, in addition to the  
44 practice of professional nursing, the performance of  
45 advanced-level nursing approved by the board which, by virtue of



46 graduate education and experience are appropriately performed by  
47 an advanced practice registered nurse. The advanced practice  
48 registered nurse may diagnose, treat and manage medical  
49 conditions. This may include prescriptive authority as identified  
50 by the board. Advanced practice registered nurses must practice  
51 in a collaborative/consultative relationship with a physician or  
52 dentist with an unrestricted license to practice in the State of  
53 Mississippi and advanced nursing must be performed within the  
54 framework of a standing protocol or practice guidelines, as  
55 appropriate.

56 Provided, however, that a certified registered nurse  
57 anesthetist (CRNA) who has been certified and practicing in good  
58 standing for more than fifteen hundred (1500) hours, as certified  
59 by the Board of Nursing, shall not be required to have a written  
60 collaborative agreement with a physician or be required to submit  
61 patient charts to a physician for review. This paragraph shall be  
62 fully applicable to protocols in hospitals, critical access  
63 hospitals and ambulatory surgical centers in the State of  
64 Mississippi in order to improve access to critical services.

65 (5) The "practice of nursing" by a licensed practical nurse  
66 means the performance for compensation of services requiring basic  
67 knowledge of the biological, physical, behavioral, psychological  
68 and sociological sciences and of nursing procedures which do not  
69 require the substantial skill, judgment and knowledge required of  
70 a registered nurse. These services are performed under the



71 direction of a registered nurse or a licensed physician or  
72 licensed dentist and utilize standardized procedures in the  
73 observation and care of the ill, injured and infirm; in the  
74 maintenance of health; in action to safeguard life and health; and  
75 in the administration of medications and treatments prescribed by  
76 any licensed physician or licensed dentist authorized by state law  
77 to prescribe. On a selected basis, and within safe limits, the  
78 role of the licensed practical nurse shall be expanded by the  
79 board under its rule-making authority to more complex procedures  
80 and settings commensurate with additional preparation and  
81 experience.

82 (6) A "license" means an authorization to practice nursing  
83 as a registered nurse or a licensed practical nurse designated  
84 herein.

85 (7) A "registered nurse" is a person who is licensed or  
86 holds the privilege to practice under the provisions of this  
87 article and who practices nursing as defined herein. "RN" is the  
88 abbreviation for the title of Registered Nurse.

89 (8) A "licensed practical nurse" is a person who is licensed  
90 or holds the privilege to practice under this article and who  
91 practices practical nursing as defined herein. "LPN" is the  
92 abbreviation for the title of Licensed Practical Nurse.

93 (9) A "registered nurse in clinical practice" is one who  
94 functions in any health care delivery system which provides  
95 nursing services.



96 (10) A "clinical nurse specialist" is a person who is  
97 licensed or holds the privilege to practice under this article in  
98 this state to practice professional nursing and who in this state  
99 practices advanced nursing as defined herein. "CNS" is the  
100 abbreviation for the title of Clinical Nurse Specialist.

101 (11) An "advanced practice registered nurse" is a person who  
102 is licensed or holds the privilege to practice under this article  
103 and who is certified in advanced practice registered nurse or  
104 specialized nursing practice and includes certified registered  
105 nurse midwives, certified registered nurse anesthetists and  
106 certified nurse practitioners. "CNM" is the abbreviation for the  
107 title of Certified Nurse Midwife, "CRNA" is the abbreviation for  
108 the title of Certified Registered Nurse Anesthetist. "CNP" is the  
109 abbreviation for the title of Certified Nurse Practitioner.

110 (12) A "nurse educator" is a registered nurse who meets the  
111 criteria for faculty as set forth in a state-accredited program of  
112 nursing for registered nurses, or a state-approved program of  
113 nursing for licensed practical nurses, and who functions as a  
114 faculty member.

115 (13) A "consumer representative" is a person representing  
116 the interests of the general public, who may use services of a  
117 health agency or health professional organization or its members  
118 but who is neither a provider of health services, nor employed in  
119 the health services field, nor holds a vested interest in the  
120 provision of health services at any level, nor has an immediate



121 family member who holds vested interests in the provision of  
122 health services at any level.

123 (14) "Privilege to practice" means the multistate licensure  
124 privilege to practice nursing in the state as described in the  
125 Nurse Licensure Compact provided for in Section 73-15-201.

126 (15) "Licensee" is a person who has been issued a license to  
127 practice nursing in the state or who holds the privilege to  
128 practice nursing in the state.

129 **SECTION 2.** Section 73-15-20, Mississippi Code of 1972, is  
130 amended as follows:

131 73-15-20. (1) **Advanced practice registered nurses.** Any  
132 nurse desiring to be certified as an advanced practice registered  
133 nurse shall apply to the board and submit proof that he or she  
134 holds a current license to practice professional nursing and that  
135 he or she meets one or more of the following requirements:

136 (a) Satisfactory completion of a formal post-basic  
137 educational program of at least one (1) academic year, the primary  
138 purpose of which is to prepare nurses for advanced or specialized  
139 practice.

140 (b) Certification by a board-approved certifying body.  
141 Such certification shall be required for initial state  
142 certification and any recertification as a registered nurse  
143 anesthetist, nurse practitioner or nurse midwife. The board may  
144 by rule provide for provisional or temporary state certification  
145 of graduate nurse practitioners for a period of time determined to



146 be appropriate for preparing and passing the National  
147 Certification Examination. Those with provisional or temporary  
148 certifications must practice under the direct supervision of a  
149 licensed physician or a certified nurse practitioner or certified  
150 nurse midwife with at least five (5) years of experience.

151 (c) Graduation from a program leading to a master's or  
152 post-master's degree in a nursing clinical specialty area with  
153 preparation in specialized practitioner skills.

154 (2) **Rulemaking.** The board shall provide by rule the  
155 appropriate requirements for advanced practice registered nurses  
156 in the categories of certified registered nurse anesthetist,  
157 certified nurse midwife and advancedu practice registered nurse.

158 (3) **Collaboration.** An advanced practice registered nurse  
159 shall perform those functions authorized in this section within a  
160 collaborative/consultative relationship with a dentist or  
161 physician with an unrestricted license to practice dentistry or  
162 medicine in this state and within an established protocol or  
163 practice guidelines, as appropriate, that is filed with the board  
164 upon license application, license renewal, after entering into a  
165 new collaborative/consultative relationship or making changes to  
166 the protocol or practice guidelines or practice site. The board  
167 shall review and approve the protocol to ensure compliance with  
168 applicable regulatory standards. The advanced practice registered  
169 nurse may not practice as an APRN if there is no



170 collaborative/consultative relationship with a physician or  
171 dentist and a board-approved protocol or practice guidelines.

172 Provided, however, that a certified registered nurse  
173 anesthetist (CRNA) who has been certified and practicing in good  
174 standing for more than fifteen hundred (1500) hours, as certified  
175 by the Board of Nursing, shall not be required to have a written  
176 collaborative agreement with a physician or be required to submit  
177 patient charts to a physician for review. This paragraph shall be  
178 fully applicable to protocols in hospitals, critical access  
179 hospitals and ambulatory surgical centers in the State of  
180 Mississippi in order to improve access to critical services.

181 (4) **Renewal.** The board shall renew a license for an  
182 advanced practice registered nurse upon receipt of the renewal  
183 application, fees and protocol or practice guidelines. The board  
184 shall adopt rules establishing procedures for license renewals.  
185 The board shall by rule prescribe continuing education  
186 requirements for advanced practice nurses not to exceed forty (40)  
187 hours biennially as a condition for renewal of a license or  
188 certificate.

189 (5) **Reinstatement.** Advanced practice registered nurses may  
190 reinstate a lapsed privilege to practice upon submitting  
191 documentation of a current active license to practice professional  
192 nursing, a reinstatement application and fee, a protocol or  
193 practice guidelines, documentation of current certification as an  
194 advanced practice nurse in a designated area of practice by a





195 national certification organization recognized by the board and  
196 documentation of at least forty (40) hours of continuing education  
197 related to the advanced clinical practice of the nurse  
198 practitioner within the previous two-year period. The board shall  
199 adopt rules establishing the procedure for reinstatement.

200 (6) **Changes in status.** The advanced practice registered  
201 nurse shall notify the board immediately regarding changes in the  
202 collaborative/consultative relationship with a licensed physician  
203 or dentist. If changes leave the advanced practice registered  
204 nurse without a board-approved collaborative/consultative  
205 relationship with a physician or dentist, the advanced practice  
206 nurse may not practice as an advanced practice registered nurse.

207 (7) **Practice requirements.** The advanced practice registered  
208 nurse shall practice:

209 (a) According to standards and guidelines of the  
210 National Certification Organization.

211 (b) In a collaborative/consultative relationship with a  
212 licensed physician whose practice is compatible with that of the  
213 nurse practitioner. Certified registered nurse anesthetists may  
214 collaborate/consult with licensed dentists. The advanced practice  
215 nurse must be able to communicate reliably with a  
216 collaborating/consulting physician or dentist while practicing.

217 (c) According to a board-approved protocol or practice  
218 guidelines.



219 (d) Advanced practice registered nurses practicing as  
220 nurse anesthetists must practice according to board-approved  
221 practice guidelines that address pre-anesthesia preparation and  
222 evaluation; anesthesia induction, maintenance, and emergence;  
223 post-anesthesia care; peri-anesthetic and clinical support  
224 functions.

225 (e) Advanced practice registered nurses practicing in  
226 other specialty areas must practice according to a board-approved  
227 protocol that has been mutually agreed upon by the nurse  
228 practitioner and a Mississippi licensed physician or dentist whose  
229 practice or prescriptive authority is not limited as a result of  
230 voluntary surrender or legal/regulatory order.

231 (f) Each collaborative/consultative relationship shall  
232 include and implement a formal quality assurance/quality  
233 improvement program which shall be maintained on site and shall be  
234 available for inspection by representatives of the board. This  
235 quality assurance/quality improvement program must be sufficient  
236 to provide a valid evaluation of the practice and be a valid basis  
237 for change, if any.

238 (g) Nurse practitioners may not write prescriptions  
239 for, dispense or order the use of or administration of any  
240 schedule of controlled substances except as contained in this  
241 chapter.

242 (8) **Prescribing controlled substances and medications.**  
243 Certified nurse midwives and certified nurse practitioners may



244 apply for controlled substance prescriptive authority after  
245 completing a board-approved educational program. Certified nurse  
246 midwives and certified nurse practitioners who have completed the  
247 program and received prescription authority from the board may  
248 prescribe Schedules II-V. The words "administer," "controlled  
249 substances" and "ultimate user," shall have the same meaning as  
250 set forth in Section 41-29-105, unless the context otherwise  
251 requires. The board shall promulgate rules governing prescribing  
252 of controlled substances, including distribution, record keeping,  
253 drug maintenance, labeling and distribution requirements and  
254 prescription guidelines for controlled substances and all  
255 medications. Prescribing any controlled substance in violation of  
256 the rules promulgated by the board shall constitute a violation of  
257 Section 73-15-29(1) (f), (k) and (l) and shall be grounds for  
258 disciplinary action. The prescribing, administering or  
259 distributing of any legend drug or other medication in violation  
260 of the rules promulgated by the board shall constitute a violation  
261 of Section 73-15-29(1) (f), (k) and (l) and shall be grounds for  
262 disciplinary action.

263       **SECTION 3.** This act shall take effect and be in force from  
264 and after July 1, 2018.

