

By: Representatives Creekmore IV, Mansell,
Karriem, Eubanks

To: Public Health and Human
Services

HOUSE BILL NO. 849

1 AN ACT TO AMEND SECTION 73-15-3, MISSISSIPPI CODE OF 1972, TO
2 INCLUDE ADVANCED PRACTICE REGISTERED NURSES IN THE STATEMENT OF
3 PURPOSE OF THE MISSISSIPPI NURSING PRACTICE LAW; TO AMEND SECTION
4 73-15-5, MISSISSIPPI CODE OF 1972, TO DELETE CERTAIN DEFINITIONS
5 AND REVISE CERTAIN DEFINITIONS IN THE NURSING PRACTICE LAW
6 REGARDING ADVANCED NURSING PRACTICE; TO AMEND SECTION 73-15-9,
7 MISSISSIPPI CODE OF 1972, TO REVISE THE COMPOSITION OF THE
8 MISSISSIPPI BOARD OF NURSING TO INCLUDE A CERTIFIED REGISTERED
9 NURSE ANESTHETIST AS A MEMBER; TO AMEND SECTION 73-15-20,
10 MISSISSIPPI CODE OF 1972, TO REVISE CERTAIN PROVISIONS RELATING TO
11 THE PRACTICE OF ADVANCED NURSING PRACTICE NURSES; TO PROVIDE THAT
12 CERTIFIED REGISTERED NURSE ANESTHETISTS WHO HAVE COMPLETED NOT
13 LESS THAN 8,000 CLINICAL PRACTICE HOURS ARE EXEMPT FROM
14 MAINTAINING A COLLABORATIVE/CONSULTATIVE RELATIONSHIP WITH A
15 LICENSED PHYSICIAN OR DENTIST; TO PROVIDE THAT CERTIFIED
16 REGISTERED NURSE ANESTHETISTS MAY APPLY HOURS WORKED BEFORE THE
17 EFFECTIVE DATE OF THIS ACT TO FULFILL THE CLINICAL PRACTICE HOUR
18 REQUIREMENT; TO CONFORM CERTAIN PROVISIONS WITH THE MISSISSIPPI
19 MEDICAL CANNABIS ACT; TO AMEND SECTION 73-15-29, MISSISSIPPI CODE
20 OF 1972, TO INCLUDE ADVANCED PRACTICE REGISTERED NURSES IN THE
21 PROVISIONS RELATING TO GROUNDS FOR DISCIPLINARY ACTIONS AGAINST
22 NURSES; TO AMEND SECTION 41-21-131, MISSISSIPPI CODE OF 1972, TO
23 CONFORM TO THE PROVISIONS OF THE ACT; TO PROVIDE FOR THE LICENSURE
24 AND REGULATION OF ANESTHESIOLOGIST ASSISTANTS BY THE STATE BOARD
25 OF MEDICAL LICENSURE; TO DEFINE CERTAIN TERMS; TO PROVIDE THAT THE
26 BOARD SHALL REVIEW AND DETERMINE THE QUALIFICATIONS OF PERSONS
27 APPLYING FOR A LICENSE TO PRACTICE AS AN ANESTHESIOLOGIST
28 ASSISTANT; TO PROVIDE THE POWERS OF THE BOARD REGARDING LICENSURE
29 OF ANESTHESIOLOGIST ASSISTANTS AND PRESCRIBE THE QUALIFICATIONS
30 FOR LICENSURE; TO AUTHORIZE THE BOARD TO ISSUE TEMPORARY LICENSES;
31 TO PROVIDE THAT ANESTHESIOLOGIST ASSISTANTS MAY ASSIST IN THE
32 PRACTICE OF MEDICINE ONLY UNDER THE SUPERVISION OF AN
33 ANESTHESIOLOGIST; TO PROVIDE THAT ANESTHESIOLOGIST ASSISTANTS MAY
34 PERFORM ONLY THOSE DUTIES DELEGATED TO THEM BY A SUPERVISING



ANESTHESIOLOGIST; TO PROVIDE THAT A SUPERVISING ANESTHESIOLOGIST SHALL DELEGATE TO AN ANESTHESIOLOGIST ASSISTANT ANY DUTIES REQUIRED TO DEVELOP AND IMPLEMENT A COMPREHENSIVE ANESTHESIA CARE PLAN FOR A PATIENT; TO AUTHORIZE THE BOARD TO REVOKE LICENSES AND TAKE OTHER DISCIPLINARY ACTION AGAINST LICENSEES AND TO REINSTATE LICENSES AFTER REVOCATION; TO PROHIBIT PRACTICING AS AN ANESTHESIOLOGIST ASSISTANT WITHOUT A LICENSE, AND PROVIDE A CRIMINAL PENALTY FOR PERSONS CONVICTED OF UNAUTHORIZED PRACTICE; AND FOR RELATED PURPOSES.

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

SECTION 1. Section 73-15-3, Mississippi Code of 1972, is amended as follows:

73-15-3. In order to safeguard life and health, any person practicing or offering to practice as a registered nurse, an advanced practice registered nurse or a licensed practical nurse in Mississippi for compensation shall hereafter be required to submit evidence of qualifications to practice and shall be licensed or hold the privilege to practice as hereinafter provided. It shall be unlawful for any person not licensed or holding the privilege to practice under the provisions of this article:

(a) To practice or offer to practice as a registered nurse, an advanced practice registered nurse or a licensed practical nurse;

(b) To use a sign, card or device to indicate that such person is a registered nurse, an advanced practice registered nurse or a licensed practical nurse.

Any person offering to practice nursing in Mississippi must be licensed or otherwise authorized to practice as provided in this article.



65 **SECTION 2.** Section 73-15-5, Mississippi Code of 1972, is
66 amended as follows:

67 73-15-5. (1) "Board" means the Mississippi Board of
68 Nursing.

69 (2) The "practice of nursing" by a registered nurse means
70 the performance for compensation of services which requires
71 substantial knowledge of the biological, physical, behavioral,
72 psychological and sociological sciences and of nursing theory as
73 the basis for assessment, diagnosis, planning, intervention and
74 evaluation in the promotion and maintenance of health; management
75 of individuals' responses to illness, injury or infirmity; the
76 restoration of optimum function; or the achievement of a dignified
77 death. "Nursing practice" includes, but is not limited to,
78 administration, teaching, counseling, delegation and supervision
79 of nursing, and execution of the medical regimen, including the
80 administration of medications and treatments prescribed by any
81 licensed or legally authorized physician, advanced practice
82 registered nurse or dentist. The foregoing shall not be deemed to
83 include acts of medical diagnosis or prescriptions of medical,
84 therapeutic or corrective measures, except as may be set forth by
85 rules and regulations promulgated and implemented by the
86 Mississippi Board of Nursing.

87 * * *

88 (* * *3) "Advanced * * * practice registered nursing"
89 means, in addition to the practice of professional nursing, the



90 performance of advanced-level nursing approved by the board which,
91 by virtue of graduate education and experience are appropriately
92 performed by an advanced practice registered nurse. The advanced
93 practice registered nurse may diagnose, treat and manage medical
94 conditions. This may include prescriptive authority as identified
95 by the board. Except as otherwise authorized in Section
96 73-15-20(3), advanced practice registered nurses must practice in
97 a collaborative/consultative relationship with a physician or
98 dentist with an unrestricted license to practice in the State of
99 Mississippi and advanced nursing must be performed within the
100 framework of a standing protocol or practice guidelines, as
101 appropriate.

102 (* * *4) The "practice of nursing" by a licensed practical
103 nurse means the performance for compensation of services requiring
104 basic knowledge of the biological, physical, behavioral,
105 psychological and sociological sciences and of nursing procedures
106 which do not require the substantial skill, judgment and knowledge
107 required of a registered nurse. These services are performed
108 under the direction of a registered nurse or a licensed physician
109 or licensed dentist and utilize standardized procedures in the
110 observation and care of the ill, injured and infirm; in the
111 maintenance of health; in action to safeguard life and health; and
112 in the administration of medications and treatments prescribed by
113 any licensed physician * * *, licensed dentist or advanced
114 practice registered nurse authorized by state law to prescribe.



On a selected basis, and within safe limits, the role of the licensed practical nurse shall be expanded by the board under its rule-making authority to more complex procedures and settings commensurate with additional preparation and experience.

(* * *5) A "license" means an authorization to practice nursing as a registered nurse, an advanced practice registered nurse or a licensed practical nurse designated herein.

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

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

(* * *8) A "registered nurse in clinical practice" is one who functions in any health care delivery system which provides nursing services.

* * *

(9) "Collaboration" or "collaborate" means the act of communicating pertinent information or consulting with a licensed physician or other licensed health care provider with each provider contributing the provider's respective expertise to optimize the overall care delivered to the patient.



(* * * 10) An "advanced practice registered nurse" is a person who is licensed or holds the privilege to practice under this article as a professional nurse and who is * * * licensed as an advanced practice registered nurse or specialized nursing practice and includes certified registered nurse midwives, certified registered nurse anesthetists and certified nurse practitioners. "APRN" is the abbreviation for the title of advanced practice registered nurse. As used in this subsection (10):

(a) "Certified registered nurse midwife" means a registered nurse who holds certification as a certified registered nurse midwife by a nationally recognized certifying body approved by the board and is licensed by the board to engage in advanced practice nursing in this state. "CNM" is the abbreviation for the title of Certified Nurse Midwife * * * .

(b) "Certified registered nurse anesthetist" means a registered nurse who holds certification as a certified registered nurse anesthetist by a nationally recognized certifying body approved by the board and is licensed by the board to engage in advanced practice nursing in this state. "CRNA" is the abbreviation for the title of Certified Registered Nurse Anesthetist.

(c) "Certified nurse practitioner" means a registered nurse who holds certification as a certified nurse practitioner by a nationally recognized certifying body approved by the board and



164 is licensed by the board to engage in advanced practice nursing in
165 this state. "CNP" is the abbreviation for the title of Certified
166 Nurse Practitioner.

167 (* * *11) A "nurse educator" is a registered nurse who
168 meets the criteria for faculty as set forth in a state-accredited
169 program of nursing for registered nurses, or a state-approved
170 program of nursing for licensed practical nurses, and who
171 functions as a faculty member.

172 (* * *12) A "consumer representative" is a person
173 representing the interests of the general public, who may use
174 services of a health agency or health professional organization or
175 its members but who is neither a provider of health services, nor
176 employed in the health services field, nor holds a vested interest
177 in the provision of health services at any level, nor has an
178 immediate family member who holds vested interests in the
179 provision of health services at any level.

180 (* * *13) "Privilege to practice" means the multistate
181 licensure privilege to practice nursing in the state as described
182 in the Nurse Licensure Compact provided for in Section 73-15-201.

183 (* * *14) "Licensee" is a person who has been issued a
184 license to practice nursing or advanced practice nursing in the
185 state or who holds the privilege to practice nursing in the state.

186 (15) "Clinical practice hours" include, but are not limited
187 to: clinical practice hours completed in an APRN program, CRNA



critical care nursing hours and practice hours completed as an
authorized APRN in this state or any other state.

(16) "Critical care nursing hours" means any nursing hours
received by a CRNA in a critical care setting required as a
prerequisite for admission to a Nurse Anesthesia program.

SECTION 3. Section 73-15-9, Mississippi Code of 1972, is
amended as follows:

73-15-9. (1) There is * * * created a board to be known as
the Mississippi Board of Nursing, composed of thirteen (13)
members, two (2) of whom shall be nurse educators; three (3) of
whom shall be registered nurses in clinical practice, two (2) to
have as basic nursing preparation an associate degree or diploma
and one (1) to have as basic nursing preparation a baccalaureate
degree; one (1) of whom shall be a registered nurse at large; one
(1) of whom shall be a registered nurse practitioner; * * * three
(3) of whom shall be licensed practical nurses; one (1) of whom
shall be a certified registered nurse anesthetist; one (1) of whom
shall be a licensed physician who shall always be a member of the
State Board of Medical Licensure; and one (1) of whom shall
represent consumers of health services. There shall be at least
one (1) board member from each congressional district in the
state; * * * however, * * * the physician member, the consumer
representative member and one (1) registered nurse member shall be
at large always.



212 (2) Members of the Mississippi Board of Nursing, excepting
213 the member of the State Board of Medical Licensure, shall be
214 appointed by the Governor, with the advice and consent of the
215 Senate, from lists of nominees submitted by any Mississippi
216 registered nurse organization and/or association chartered by the
217 State of Mississippi whose board of directors is elected by the
218 membership and whose membership includes registered nurses
219 statewide, for the nomination of registered nurses, and by the
220 Mississippi Federation of Licensed Practical Nurses and the
221 Mississippi Licensed Practical Nurses' Association for the
222 nomination of a licensed practical nurse. Nominations submitted
223 by any such registered nurse organization or association to fill
224 vacancies on the board shall be made and voted on by registered
225 nurses only. Each list of nominees shall contain a minimum of
226 three (3) names for each vacancy to be filled. The list of names
227 shall be submitted at least thirty (30) days before the expiration
228 of the term for each position. If such list is not submitted, the
229 Governor is authorized to make an appointment from the group
230 affected and without nominations. Appointments made to fill
231 vacancies for unexpired terms shall be for the duration of such
232 terms and until a successor is duly appointed.

233 (3) Members of the board shall be appointed in staggered
234 terms for four (4) years or until a successor shall be duly
235 qualified. No member may serve more than two (2) consecutive full



terms. Members of the board serving on July 1, 1988, shall continue to serve for their appointed terms.

(4) Vacancies occurring by reason of resignation, death or otherwise shall be filled by appointment of the Governor upon nominations from a list of nominees from the affected group to be submitted within not more than thirty (30) days after such a vacancy occurs. In the absence of such list, the Governor is authorized to fill such vacancy in accordance with the provisions for making full-term appointments. All vacancy appointments shall be for the unexpired terms.

(5) Any member may be removed from the board by the Governor after a hearing by the board and provided such removal is recommended by the executive committee of the affected group.

SECTION 4. Section 73-15-20, Mississippi Code of 1972, is amended as follows:

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

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



(b) Certification by a board-approved certifying body. Such certification shall be required for initial state * * * licensure and any * * * license renewal as a certified registered nurse anesthetist, certified nurse practitioner or certified registered nurse midwife. The board may by rule provide for provisional or temporary state * * * licensure of graduate * * * advanced practice registered nurses for a period of time determined to be appropriate for preparing and passing the National Certification Examination. Those with provisional or temporary * * * licenses must practice under the direct supervision of a licensed physician or * * * an advanced practice registered nurse with at least five (5) years of experience.

(c) Graduation from a program leading to a master's or post-master's degree in a * * * program of study preparing for one (1) of the described advanced practice registered nurse roles.

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

(3) **Collaboration.** (a) Except as otherwise authorized in paragraph (b) of this subsection (3), an advanced practice registered nurse shall perform those functions authorized in this section within a collaborative/consultative relationship with a dentist or physician with an unrestricted license to practice



dentistry or medicine in this state and within an established protocol or practice guidelines, as appropriate, that is filed with the board upon license application, license renewal, after entering into a new collaborative/consultative relationship or making changes to the protocol or practice guidelines or practice site. The board shall review and approve the protocol to ensure compliance with applicable regulatory standards. * * *

(b) Certified registered nurse anesthetists who have completed not less than eight thousand (8,000) clinical practice hours are exempt from maintaining a collaborative/consultative relationship with a licensed physician or dentist as required by paragraph (a) of this subsection (3).

(c) Certified registered nurse anesthetists may apply hours worked before July 1, 2025, to fulfill the clinical practice hour requirements under paragraph (b) of this subsection (3).

(4) **Renewal.** The board shall renew a license for an advanced practice registered nurse upon receipt of the renewal application, fees and any required protocol or practice guidelines. The board shall adopt rules establishing procedures for license renewals. The board shall by rule prescribe continuing education requirements for advanced practice registered nurses * * * as a condition for renewal of * * * licensure.

(5) **Reinstatement.** Advanced practice registered nurses may reinstate a lapsed privilege to practice upon submitting documentation of a current active license to practice professional



nursing, a reinstatement application and fee, * * * any required
protocol or practice guidelines, documentation of current
certification as an advanced practice registered nurse in a
designated area of practice by a national certification
organization recognized by the board and documentation of at least
forty (40) hours of continuing education related to the advanced
clinical practice of the * * * advanced practice registered nurse
within the previous two-year period. The board shall adopt rules
establishing the procedure for reinstatement.

(6) **Changes in status.** * * * An advanced practice
registered nurse who is required to have a
collaborative/consultative relationship with a licensed physician
or dentist shall notify the board immediately regarding changes in
the collaborative/consultative relationship * * *. If changes
leave the advanced practice registered nurse without a
board-approved collaborative/consultative relationship with a
physician or dentist, the advanced practice registered nurse may
not practice as an advanced practice registered nurse.

(7) **Practice requirements.** The advanced practice registered
nurse shall practice as follows:

(a) According to standards and guidelines of their
respective professional organization and the National
Certification Organization.

(b) Except as otherwise authorized in subsection (3) of
this section, in a collaborative/consultative relationship with a



335 licensed physician whose practice is compatible with that of
336 the * * * advanced practice registered nurse. However, certified
337 registered nurse anesthetists may collaborate/consult with any
338 physician or licensed * * * dentist. The advanced practice
339 registered nurse must be able to communicate reliably with a
340 collaborating/consulting physician or dentist while practicing.
341 Advanced practice registered nurses who are not required to have a
342 collaborative/consultative relationship with a licensed physician
343 or dentist shall collaborate with other health care providers and
344 refer or transfer patients as appropriate.

345 (c) According to a board-approved protocol or practice
346 guidelines, except as otherwise authorized in subsection (3) of
347 this section.

348 (d) Advanced practice registered nurses practicing as
349 certified registered nurse anesthetists must practice according to
350 board-approved practice guidelines that address pre-anesthesia
351 preparation and evaluation; anesthesia induction, maintenance, and
352 emergence; post-anesthesia care; peri-anesthetic * * *, clinical
353 support functions, and additional advanced nursing functions
354 outside of the peri-operative area as described by their national
355 professional nursing organization.

356 (e) Except as otherwise authorized in subsection (3) of
357 this section, advanced practice registered nurses practicing in
358 other specialty areas must practice according to a board-approved
359 protocol that has been mutually agreed upon by the nurse



practitioner and a Mississippi licensed physician or dentist whose practice or prescriptive authority is not limited as a result of voluntary surrender or legal/regulatory order.

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

(g) * * * Advanced practice registered nurses may not write prescriptions for, dispense or order the use of or administration of any schedule of controlled substances except as contained in this chapter.

(8) **Prescribing controlled substances and medications. * * ***
Advanced practice registered nurses may apply for controlled substance prescriptive authority after completing a board-approved educational program. * * * Advanced practice registered nurses who have completed the program and received prescription authority from the board may prescribe Schedules II-V. The words "administer," "controlled substances" and "ultimate user," shall have the same meaning as set forth in Section 41-29-105, unless the context otherwise requires. The board shall promulgate rules governing prescribing of controlled substances, including distribution, record keeping, drug maintenance, labeling and



distribution requirements and prescription guidelines for controlled substances and all medications. Prescribing any controlled substance in violation of the rules promulgated by the board shall constitute a violation of Section 73-15-29(1)(f), (k) and (l) and shall be grounds for disciplinary action. The prescribing, administering or distributing of any legend drug or other medication in violation of the rules promulgated by the board shall constitute a violation of Section 73-15-29(1)(f), (k) and (l) and shall be grounds for disciplinary action. Advanced practice registered nurses may issue written certifications for medical cannabis in accordance with the provisions of the Mississippi Medical Cannabis Act.

SECTION 5. Section 73-15-29, Mississippi Code of 1972, is amended as follows:

73-15-29. (1) The board shall have power to revoke, suspend or refuse to renew any license issued by the board, or to revoke or suspend any privilege to practice, or to deny an application for a license, or to fine, place on probation and/or discipline a licensee, in any manner specified in this article, upon proof that such person:

(a) Has committed fraud or deceit in securing or attempting to secure such license;

(b) Has been convicted of a felony, or a crime involving moral turpitude or has had accepted by a court a plea of nolo contendere to a felony or a crime involving moral turpitude



(a certified copy of the judgment of the court of competent jurisdiction of such conviction or pleas shall be prima facie evidence of such conviction);

(c) Has negligently or willfully acted in a manner inconsistent with the health or safety of the persons under the licensee's care;

(d) Has had a license or privilege to practice as a registered nurse, an advanced practice registered nurse or a licensed practical nurse suspended or revoked in any jurisdiction, has voluntarily surrendered such license or privilege to practice in any jurisdiction, has been placed on probation as a registered nurse, an advanced practice registered nurse or a licensed practical nurse in any jurisdiction or has been placed under a disciplinary order(s) in any manner as a registered nurse, an advanced practice registered nurse or a licensed practical nurse in any jurisdiction, (a certified copy of the order of suspension, revocation, probation or disciplinary action shall be prima facie evidence of such action);

(e) Has negligently or willfully practiced nursing in a manner that fails to meet generally accepted standards of such nursing practice;

(f) Has negligently or willfully violated any order, rule or regulation of the board pertaining to nursing practice or licensure;



434 (g) Has falsified or in a repeatedly negligent manner
435 made incorrect entries or failed to make essential entries on
436 records;

437 (h) Is addicted to or dependent on alcohol or other
438 habit-forming drugs or is a habitual user of narcotics,
439 barbiturates, amphetamines, hallucinogens, or other drugs having
440 similar effect, or has misappropriated any medication;

441 (i) Has a physical, mental or emotional condition that
442 renders the licensee unable to perform nursing services or duties
443 with reasonable skill and safety;

444 (j) Has engaged in any other conduct, whether of the
445 same or of a different character from that specified in this
446 article, that would constitute a crime as defined in Title 97 of
447 the Mississippi Code of 1972, as now or hereafter amended, and
448 that relates to such person's employment as a registered nurse, an
449 advanced practice registered nurse or a licensed practical nurse;

450 (k) Engages in conduct likely to deceive, defraud or
451 harm the public;

452 (l) Engages in any unprofessional conduct as identified
453 by the board in its rules;

454 (m) Has violated any provision of this article;

455 (n) Violation(s) of the provisions of Sections 41-121-1
456 through 41-121-9 relating to deceptive advertisement by health
457 care practitioners. This paragraph shall stand repealed on July
458 1, 2025; or



(o) Violation(s) of any provision of Title 41, Chapter 141, Mississippi Code of 1972.

(2) When the board finds any person unqualified because of any of the grounds set forth in subsection (1) of this section, it may enter an order imposing one or more of the following penalties:

(a) Denying application for a license or other authorization to practice nursing or practical nursing;

(b) Administering a reprimand;

(c) Suspending or restricting the license or other authorization to practice as a registered nurse, an advanced practice registered nurse or a licensed practical nurse for up to two (2) years without review;

(d) Revoking the license or other authorization to practice nursing, advanced practice registered nursing or practical nursing;

(e) Requiring the disciplinee to submit to care, counseling or treatment by persons and/or agencies approved or designated by the board as a condition for initial, continued or renewed licensure or other authorization to practice nursing, advanced practice registered nursing or practical nursing;

(f) Requiring the disciplinee to participate in a program of education prescribed by the board as a condition for initial, continued or renewed licensure or other authorization to practice;



(g) Requiring the discipline to practice under the supervision of a registered nurse or an advanced practice registered nurse for a specified period of time; or

(h) Imposing a fine not to exceed Five Hundred Dollars (\$500.00).

(3) In addition to the grounds specified in subsection (1) of this section, the board shall be authorized to suspend the license or privilege to practice of any licensee for being out of compliance with an order for support, as defined in Section 93-11-153. The procedure for suspension of a license or privilege to practice for being out of compliance with an order for support, and the procedure for the reissuance or reinstatement of a license or privilege to practice suspended for that purpose, and the payment of any fees for the reissuance or reinstatement of a license or privilege to practice suspended for that purpose, shall be governed by Section 93-11-157 or 93-11-163, as the case may be. If there is any conflict between any provision of Section 93-11-157 or 93-11-163 and any provision of this article, the provisions of Section 93-11-157 or 93-11-163, as the case may be, shall control.

(4) If the public health, safety or welfare imperatively requires emergency action and the board incorporates a finding to that effect in an order, the board may order summary suspension of a license pending proceedings for revocation or other action.



These proceedings shall be promptly instituted and determined by the board.

(5) The board may establish by rule an alternative to discipline program for licensees who have an impairment as a result of substance abuse or a mental health condition, which program shall include at least the following components:

(a) Participation in the program is voluntary with the licensee, and the licensee must enter the program before the board holds a disciplinary action hearing regarding the licensee;

(b) The full cost of participation in the program, including the cost of any care, counseling, treatment and/or education received by the licensee, shall be borne by the licensee;

(c) All of the procedures and records regarding the licensee's participation in the program shall be confidential, shall not be disclosed and shall be exempt from the provisions of the Mississippi Public Records Act of 1983; and

(d) A licensee may not participate in the program more often than one (1) time during any period of five (5) years or such longer period as set by the board.

(6) * * * An advance practice registered nurse who provides a written certification as authorized under the Mississippi Medical Cannabis Act and in compliance with rules and regulations adopted thereunder shall not be subject to any disciplinary action



under this section solely due to providing the written certification.

SECTION 6. Section 41-21-131, Mississippi Code of 1972, is amended as follows:

41-21-131. As used in Sections 41-21-131 through 41-21-143, the following terms shall have the meanings as defined in this section:

(a) "Crisis Intervention Team" means a community partnership among a law enforcement agency, a community mental health center, a hospital, other mental health providers, consumers and family members of consumers.

(b) "Participating partner" means a law enforcement agency, a community mental health center or a hospital that has each entered into collaborative agreements needed to implement a Crisis Intervention Team.

(c) "Catchment area" means a geographical area in which a Crisis Intervention Team operates and is defined by the jurisdictional boundaries of the law enforcement agency that is the participating partner.

(d) "Crisis Intervention Team officer" or "CIT officer" means a law enforcement officer who is authorized to make arrests under Section 99-3-1 and who is trained and certified in crisis intervention and who is working for a law enforcement agency that is a participating partner in a Crisis Intervention Team.

(e) "Substantial likelihood of bodily harm" means that:



557 (i) The person has threatened or attempted suicide
558 or to inflict serious bodily harm to himself; or
559 (ii) The person has threatened or attempted
560 homicide or other violent behavior; or
561 (iii) The person has placed others in reasonable
562 fear of violent behavior and serious physical harm to them; or
563 (iv) The person is unable to avoid severe
564 impairment or injury from specific risks; and
565 (v) There is substantial likelihood that serious
566 harm will occur unless the person is placed under emergency
567 treatment.
568 (f) "Single point of entry" means a specific hospital
569 that is the participating partner in a Crisis Intervention Team
570 and that has agreed to provide psychiatric emergency services and
571 triage and referral services.
572 (g) "Psychiatric emergency services" means services
573 designed to reduce the acute psychiatric symptoms of a person who
574 is mentally ill or a person who has an impairment caused by drugs
575 or alcohol and, when possible, to stabilize that person so that
576 continuing treatment can be provided in the local community.
577 (h) "Triage and referral services" means services
578 designed to provide evaluation of a person with mental illness or
579 a person who has an impairment caused by drugs or alcohol in order
580 to direct that person to a mental health facility or other mental
581 health provider that can provide appropriate treatment.



(i) "Comprehensive psychiatric emergency service" means a specialized psychiatric service operated by the single point of entry and located in or near the hospital emergency department that can provide psychiatric emergency services for a period of time greater than can be provided in the hospital emergency department.

(j) "Extended observation bed" means a hospital bed that is used by a comprehensive psychiatric emergency service and is licensed by the State Department of Health for that purpose.

(k) "Psychiatric nurse practitioner" means a registered nurse who has completed the educational requirements specified by the State Board of Nursing, has successfully passed either the adult or family psychiatric nurse practitioner examination and is licensed by the State Board of Nursing * * *.

(l) "Psychiatric physician assistant" means a physician assistant who has completed the educational requirements and passed the certification examination as specified in Section 73-26-3, is licensed by the State Board of Medical Licensure, has had at least one (1) year of practice as a physician assistant employed by a community mental health center, and is working under the supervision of a physician at a single point of entry.

SECTION 7. Definitions. As used in Sections 7 through 13 of this act, unless the context otherwise requires:

(a) "Anesthesiologist" means a physician who is licensed under Section 73-25-1 et seq. and who has completed a



residency in anesthesiology approved by the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology.

(b) "Anesthesiologist assistant" means a person who meets the requirements of Section 9 of this act and is board-approved to assist in the practice of medicine under the delegation of an anesthesiologist.

(c) "Assists" means the anesthesiologist assistant personally performs those duties and responsibilities delegated by the anesthesiologist.

(d) "Board" means the State Board of Medical Licensure.

(e) "Supervision" means the availability of a physician anesthesiologist who can delegate, coordinate, direct or consult, and oversee the implementation of the anesthesiologist's intentions.

(f) "Certification examination" means the initial certifying examination approved by the board for the certification of anesthesiologist assistants, including the examination administered by the National Commission for the Certification of Anesthesiologist Assistants or another national anesthesiologist assistant certifying agency that has been reviewed and approved by the board.

SECTION 8. **Board; powers and duties.** (1) The board shall review and determine the qualifications and fitness of all persons



631 applying for a license to practice as an anesthesiologist
632 assistant.

633 (2) The board shall:

634 (a) Grant, deny, revoke and reinstate licenses of
635 anesthesiologist assistants;

636 (b) Investigate allegations that an anesthesiologist
637 assistant or the supervising anesthesiologist has engaged in
638 conduct constituting a ground for revocation;

639 (c) Conduct informal interviews and hearings;

640 (d) Adopt rules governing the practice of
641 anesthesiologist assistants; and

642 (e) Retain jurisdiction over only those licensees to
643 whom temporary or full licenses are granted under Sections 7
644 through 13 of this act, regardless of whether the license has
645 expired, has lapsed or was relinquished during or after any
646 alleged occurrence of conduct.

647 (3) The board shall establish a position to be filled by an
648 anesthesiologist assistant licensed under Sections 7 through 13 of
649 this act.

650 **SECTION 9. Licensure; use of title; temporary license;**

651 **temporary licensure; fees.** (1) A person may not practice in this
652 state as an anesthesiologist assistant or use the title or
653 represent that the person is a certified anesthesiologist
654 assistant, anesthesiologist assistant or use the abbreviation



655 "C.A.A." or "A.A." without having a license granted by the board
656 under Sections 7 through 13 of this act.

657 (2) The board may grant an anesthesiologist assistant
658 license to an applicant who:

659 (a) Graduated from an anesthesiologist assistant
660 program accredited by the Commission on Accreditation of Allied
661 Health Education Programs or its predecessor or successor
662 organization;

663 (b) Satisfactorily completed a certification
664 examination administered by the National Commission for the
665 Certification of Anesthesiologist Assistants or another national
666 certifying agency that has been reviewed and approved by the board
667 and that is currently certified;

668 (c) Completes an application form; and

669 (d) Pays the required application and licensure fees as
670 prescribed by the board in rule.

671 (3) A license issued under Sections 7 through 13 of this
672 act, other than a temporary license, is valid for a period of one
673 (1) year. A licensee shall renew the license every other year on
674 or before June 30 by completing and submitting to the board a
675 renewal application form as prescribed by the board and the
676 prescribed renewal fee before the current license expires. The
677 board shall provide renewal notices to licensees at least one (1)
678 month before the expiration date.



679 (4) The board may reinstate a lapsed license if the
680 applicant pays a reinstatement fee as prescribed by the board in
681 rule and meets the requirements for initial licensure.

682 (5) The board may issue a temporary license to any person
683 who:

684 (a) Completes a temporary license application;

685 (b) Pays the required temporary license fee as
686 prescribed by the board in rule; and

687 (c) Successfully completes a Commission on
688 Accreditation of Allied Health Education program or another
689 board-approved program for educating and training anesthesiologist
690 assistants but who has not passed a certification examination.

691 The person shall take the next available certification
692 examination after receiving a temporary license. A temporary
693 license may not be issued for a period of more than six (6) months
694 and is subject to any other requirements that the board adopts by
695 rule.

696 **SECTION 10. Scope of practice.** (1) This section does not
697 apply to persons who are enrolled in an anesthesiologist assistant
698 education program approved by the board.

699 (2) An anesthesiologist assistant may assist in the practice
700 of medicine only under the supervision of an anesthesiologist.
701 The anesthesiologist assistant may perform only those duties and
702 responsibilities delegated to the anesthesiologist assistant by
703 the supervising anesthesiologist.



(3) The supervising anesthesiologist shall be allowed to supervise anesthesiologist assistants in a manner consistent with federal rules or regulations for reimbursement for anesthesia services.

(4) The supervising anesthesiologist shall be immediately available to the anesthesiologist assistant who assists in the delivery of medical care such that the supervising anesthesiologist is able to intervene if needed.

(5) An anesthesiologist assistant's practice may not exceed his or her education and training, and the scope of practice of the supervising anesthesiologist. A medical care task assigned by the supervising anesthesiologist to the anesthesiologist assistant may not be delegated by the anesthesiologist assistant to another person.

(6) A supervising anesthesiologist shall delegate to an anesthesiologist assistant any duties required to develop and implement a comprehensive anesthesia care plan for a patient.

(7) Sections 7 through 13 of this act do not prevent an anesthesiologist assistant from having access to and being able to obtain prescription drugs as directed by the supervising anesthesiologist.

SECTION 11. **Regulation of licensure.** (1) The board may refuse to renew and may revoke, suspend or restrict a license or take other disciplinary action, including imposing conditions or



restrictions on a license under Sections 7 through 13 of this act and the rules adopted under Sections 7 through 13 of this act.

(2) If the board determines that a person is ineligible for licensure, that an application for licensure should be denied, that a license should be suspended or that any other action should be taken on a current license, the board shall adopt and enter its written order and findings.

SECTION 12. Reinstatement of license; requirements. (1)

The board may issue a new license to an anesthesiologist assistant whose license was previously revoked by the board if the applicant applies in writing to the board and demonstrates to the board's satisfaction that the applicant is completely rehabilitated with respect to the conduct that was the basis for the revocation. In making its decision, the board shall determine:

(a) That the applicant has not engaged in any conduct during the revocation period that would constitute a basis for revocation under rules adopted by the board;

(b) If a criminal conviction was a basis of the revocation, that the applicant's civil rights have been fully restored pursuant to statute or any other applicable recognized judicial or gubernatorial order;

(c) That the applicant has made restitution to any aggrieved person as ordered by a court of competent jurisdiction; and



(d) That the applicant demonstrates any other standard of rehabilitation the board determines is appropriate.

(2) Except as provided in subsection (3) of this section, a person may not apply for license reinstatement earlier than one (1) year after the date of revocation.

(3) If a license revocation was based on a conviction of a felony or an offense involving moral turpitude and that conviction has been reversed on appeal, the board shall vacate its previous order to revoke the license and the anesthesiologist assistant may apply for reinstatement as soon as the court enters the reversal.

(4) An applicant for reinstatement shall comply with all initial licensure requirements prescribed by Sections 7 through 13 of this act and rules adopted by the board under Sections 7 through 13 of this act.

SECTION 13. Unauthorized practice; violation; penalties.

Any person practicing as an anesthesiologist assistant or representing that he or she is an anesthesiologist assistant without a license, or any person employing an unlicensed person to practice as an anesthesiologist assistant, is guilty of a misdemeanor and, upon conviction, shall be punished by a fine of not more than One Thousand Dollars (\$1,000.00) or by imprisonment in the county jail for not more than one (1) year, or both. Each violation constitutes a separate offense for which the penalty in this section may be assessed.



776 **SECTION 14.** This act shall take effect and be in force from
777 and after July 1, 2025.

