



Reprinted
January 26, 2000

HOUSE BILL No. 1115

DIGEST OF HB 1115 (Updated January 25, 2000 4:53 PM - DI 100)

Citations Affected: IC 25-1; IC 25-22.5; IC 25-23.

Synopsis: Licensure of physicians and nurses. Adds as a prohibited action to the health professions standards the act of engaging in or soliciting sexual contact with a patient who is not the practitioner's spouse. Requires the medical licensing board of Indiana to adopt rules requiring physicians to report on license renewal forms any continuing education hours completed during the license renewal period. Requires the Indiana state board of nursing to adopt rules requiring nurses to report on license renewal forms any continuing education hours completed during the license renewal period. Allows for random audits for verification of continuing education hours reported by physicians and nurses. Amends the continuing education requirements for the renewal of the authority of an advanced practice nurse to prescribe legend drugs.

Effective: July 1, 2000.

Dillon, Brown C

January 10, 2000, read first time and referred to Committee on Public Health.
January 19, 2000, reported — Do Pass.
January 25, 2000, read second time, amended, ordered engrossed.

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HB 1115—LS 6445/DI 100+



Reprinted
January 26, 2000

Second Regular Session 111th General Assembly (2000)

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 1999 General Assembly.

HOUSE BILL No. 1115

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 25-1-9-4, AS AMENDED BY P.L.22-1999,
2 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2000]: Sec. 4. (a) A practitioner shall conduct the
4 practitioner's practice in accordance with the standards established by
5 the board regulating the profession in question and is subject to the
6 exercise of the disciplinary sanctions under section 9 of this chapter if,
7 after a hearing, the board finds:
8 (1) a practitioner has:
9 (A) engaged in or knowingly cooperated in fraud or material
10 deception in order to obtain a license to practice;
11 (B) engaged in fraud or material deception in the course of
12 professional services or activities; or
13 (C) advertised services in a false or misleading manner;
14 (2) a practitioner has been convicted of a crime that has a direct
15 bearing on the practitioner's ability to continue to practice
16 competently;
17 (3) a practitioner has knowingly violated any state statute or rule,

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- 1 or federal statute or regulation, regulating the profession in
 2 question;
 3 (4) a practitioner has continued to practice although the
 4 practitioner has become unfit to practice due to:
 5 (A) professional incompetence that:
 6 (i) may include the undertaking of professional activities
 7 that the practitioner is not qualified by training or experience
 8 to undertake; and
 9 (ii) does not include activities performed under
 10 IC 16-21-2-9;
 11 (B) failure to keep abreast of current professional theory or
 12 practice;
 13 (C) physical or mental disability; or
 14 (D) addiction to, abuse of, or severe dependency upon alcohol
 15 or other drugs that endanger the public by impairing a
 16 practitioner's ability to practice safely;
 17 (5) a practitioner has engaged in a course of lewd or immoral
 18 conduct in connection with the delivery of services to the public;
 19 (6) a practitioner has allowed the practitioner's name or a license
 20 issued under this chapter to be used in connection with an
 21 individual who renders services beyond the scope of that
 22 individual's training, experience, or competence;
 23 (7) a practitioner has had disciplinary action taken against the
 24 practitioner or the practitioner's license to practice in any other
 25 state or jurisdiction on grounds similar to those under this
 26 chapter;
 27 (8) a practitioner has diverted:
 28 (A) a legend drug (as defined in IC 16-18-2-199); or
 29 (B) any other drug or device issued under a drug order (as
 30 defined in IC 16-42-19-3) for another person;
 31 (9) a practitioner, except as otherwise provided by law, has
 32 knowingly prescribed, sold, or administered any drug classified
 33 as a narcotic, addicting, or dangerous drug to a habitue or addict;
 34 **or**
 35 (10) a practitioner has failed to comply with an order imposing a
 36 sanction under section 9 of this chapter; **or**
 37 **(11) a practitioner has engaged in sexual contact with a**
 38 **patient under the practitioner's care or has used the**
 39 **practitioner-patient relationship to solicit sexual contact with**
 40 **a patient under the practitioner's care.**
 41 (b) A certified copy of the record of disciplinary action is conclusive
 42 evidence of the other jurisdiction's disciplinary action under subsection



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(a)(7).

(c) A practitioner who provides health care services to the practitioner's spouse is not subject to disciplinary action under subsection (a)(11).

SECTION 2. IC 25-22.5-2-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 7. The board shall do the following:

(1) Adopt rules and forms necessary to implement this article that concern, but are not limited to, the following areas:

(A) Qualification by education, residence, citizenship, training, and character for admission to an examination for licensure or by endorsement for licensure.

(B) The examination for licensure.

(C) The license or permit.

(D) Fees for examination, permit, licensure, and registration.

(E) Reinstatement of licenses and permits.

(F) Payment of costs in disciplinary proceedings conducted by the board.

(G) Establishment of continuing education reporting requirements on license renewal forms. The rules adopted under this clause must require a practitioner who seeks to renew a license under this article to sign a statement, on a license renewal form prescribed by the board, indicating the number of hours of continuing education completed during the license renewal period. The renewal form prescribed by the board must contain a statement recommending that a practitioner retain, for two (2) years following renewal of the practitioner's license, verification of the number of continuing education hours reported on the form.

(2) Administer oaths in matters relating to the discharge of its official duties.

(3) Enforce this article and assign service bureau personnel duties as may be necessary in the discharge of the board's duty.

(4) Maintain, through the service bureau, full and complete records of all applicants for licensure or permit and of all licenses and permits issued.

(5) Make available, upon request, the complete schedule of minimum requirements for licensure or permit.

(6) Issue, at the board's discretion, a temporary permit to an applicant for the interim from the date of application until the next regular meeting of the board.

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1 (7) Issue an unlimited license, a limited license, or a temporary
 2 medical permit, depending upon the qualifications of the
 3 applicant, to any applicant who successfully fulfills all of the
 4 requirements of this article.

5 (8) Adopt rules establishing standards for the competent practice
 6 of medicine, osteopathic medicine, or any other form of practice
 7 regulated by a limited license or permit issued under this article.

8 (9) Adopt rules regarding the appropriate prescribing of Schedule
 9 III or Schedule IV controlled substances for the purpose of weight
 10 reduction or to control obesity.

11 SECTION 3. IC 25-22.5-7-1 IS AMENDED TO READ AS
 12 FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 1. (a) A license issued
 13 under this article expires on June 30 of each odd-numbered year.
 14 Before June 30 of an odd-numbered year, an applicant for renewal shall
 15 pay the biennial renewal fee set by the board under IC 25-22.5-2-7.

16 (b) If the holder of a license does not renew the license by June 30
 17 of each odd-numbered year, the license expires and becomes invalid
 18 without any action taken by the board. A license that becomes invalid
 19 under this subsection may be reinstated by the board up to three (3)
 20 years after the invalidation if the holder of the invalid license pays:

- 21 (1) the penalty fee set by the board under IC 25-22.5-2-7; and
 22 (2) the renewal fee for the biennium.

23 (c) If a license that becomes invalid under this section is not
 24 reinstated by the board within three (3) years of its invalidation, the
 25 holder of the invalid license may be required by the board to take an
 26 examination for competence before the board will reinstate the holder's
 27 license.

28 (d) The board may adopt rules under IC 25-22.5-2-7 establishing
 29 requirements for the reinstatement of a lapsed license.

30 (e) **Every two (2) years, the board may randomly audit, for the**
 31 **purpose of verifying continuing education hours, at least one**
 32 **percent (1%) but not more than ten percent (10%) of the**
 33 **practitioners who report continuing education hours on the license**
 34 **renewal form under IC 25-22.5-2-7(1)(G).**

35 SECTION 4. IC 25-23-1-7 IS AMENDED TO READ AS
 36 FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 7. (a) The board shall
 37 do the following:

- 38 (1) Adopt under IC 4-22-2 rules necessary to enable it to carry
 39 into effect this chapter.
 40 (2) Prescribe standards and approve curricula for nursing
 41 education programs preparing persons for licensure under this
 42 chapter.

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- 1 (3) Provide for surveys of such programs at such times as it
 2 considers necessary.
- 3 (4) Accredite such programs as meet the requirements of this
 4 chapter and of the board.
- 5 (5) Deny or withdraw accreditation from nursing education
 6 programs for failure to meet prescribed curricula or other
 7 standards.
- 8 (6) Examine, license, and renew the license of qualified
 9 applicants.
- 10 (7) Issue subpoenas, compel the attendance of witnesses, and
 11 administer oaths to persons giving testimony at hearings.
- 12 (8) Cause the prosecution of all persons violating this chapter and
 13 have power to incur necessary expenses for these prosecutions.
- 14 (9) Adopt rules under IC 4-22-2 that do the following:
- 15 (A) Prescribe standards for the competent practice of
 16 registered, practical, and advanced practice nursing.
- 17 (B) Establish with the approval of the medical licensing board
 18 created by IC 25-22.5-2-1 requirements that advanced practice
 19 nurses must meet to be granted authority to prescribe legend
 20 drugs and to retain that authority.
- 21 **(C) Establish continuing education reporting requirements**
 22 **on license renewal forms. The rules adopted under this**
 23 **clause must require a nurse who seeks to renew a license**
 24 **under this article to sign a statement, on a license renewal**
 25 **form prescribed by the board, indicating the number of**
 26 **hours of continuing education completed during the license**
 27 **renewal period. The renewal form prescribed by the board**
 28 **must contain a statement recommending that a nurse**
 29 **retain, for two (2) years following renewal of the nurse's**
 30 **license, verification of the number of continuing education**
 31 **hours reported on the form.**
- 32 (10) Keep a record of all its proceedings.
- 33 (11) Collect and distribute annually demographic information on
 34 the number and type of registered nurses and licensed practical
 35 nurses employed in Indiana.
- 36 (12) Notify each registered nurse and licensed practical nurse
 37 residing in Indiana when final rules concerning the practice of
 38 nursing are published in the Indiana register.
- 39 (b) The board may do the following:
- 40 (1) Create ad hoc subcommittees representing the various nursing
 41 specialties and interests of the profession of nursing. Persons
 42 appointed to a subcommittee serve for terms as determined by the

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- 1 board.
- 2 (2) Utilize the appropriate subcommittees so as to assist the board
- 3 with its responsibilities. The assistance provided by the
- 4 subcommittees may include the following:
- 5 (A) Recommendation of rules necessary to carry out the duties
- 6 of the board.
- 7 (B) Recommendations concerning educational programs and
- 8 requirements.
- 9 (C) Recommendations regarding examinations and licensure
- 10 of applicants.
- 11 (3) Appoint nurses to serve on each of the ad hoc subcommittees.
- 12 (c) Nurses appointed under subsection (b) must:
- 13 (1) be committed to advancing and safeguarding the nursing
- 14 profession as a whole; and
- 15 (2) represent nurses who practice in the field directly affected by
- 16 a subcommittee's actions.
- 17 SECTION 5. IC 25-23-1-16.1 IS AMENDED TO READ AS
- 18 FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 16.1. (a) A license to
- 19 practice as a registered nurse expires on October 31 in each
- 20 odd-numbered year. Failure to renew the license on or before the
- 21 expiration date will automatically render the license invalid without
- 22 any action by the board.
- 23 (b) A license to practice as a licensed practical nurse expires on
- 24 October 31 in each even-numbered year. Failure to renew the license
- 25 on or before the expiration date will automatically render the license
- 26 invalid without any action by the board.
- 27 (c) The procedures and fee for renewal shall be set by the board.
- 28 (d) At the time of license renewal, each registered nurse and each
- 29 licensed practical nurse shall pay an additional three dollar (\$3) fee.
- 30 The lesser of the following amounts from fees collected under this
- 31 subsection shall be deposited in the impaired nurses account of the
- 32 state general fund established by section 34 of this chapter:
- 33 (1) Three dollars (\$3) per license renewed under this section.
- 34 (2) The cost per license to operate the impaired nurses program,
- 35 as determined by the health professions bureau.
- 36 **(e) Every two (2) years, the board may randomly audit, for the**
- 37 **purpose of verifying continuing education hours, at least one**
- 38 **percent (1%) but not more than ten percent (10%) of the nurses**
- 39 **who report continuing education hours on the license renewal form**
- 40 **under section 7(a)(9)(C) of this chapter.**
- 41 SECTION 6. IC 25-23-1-19.5 IS AMENDED TO READ AS
- 42 FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 19.5. (a) The board

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1 shall establish a program under which advanced practice nurses who
 2 meet the requirements established by the board are authorized to
 3 prescribe legend drugs, including controlled substances (as defined in
 4 IC 35-48-1).

5 (b) The authority granted by the board under this section:

- 6 (1) shall be granted initially to an advanced practice nurse for two
 7 (2) years; and
 8 (2) is subject to renewal indefinitely for successive periods of two
 9 (2) years.

10 (c) The rules adopted under section 7 of this chapter concerning the
 11 authority of advanced practice nurses to prescribe legend drugs must
 12 do the following:

13 (1) Require an advanced practice nurse or a prospective advanced
 14 practice nurse who seeks the authority to submit an application to
 15 the board.

16 (2) Require, as a prerequisite to the initial granting of the
 17 authority, the successful completion by the applicant of a graduate
 18 level course in pharmacology providing at least two (2) semester
 19 hours of academic credit.

20 (3) Require, as a condition of the renewal of the authority, the
 21 completion by the advanced practice nurse ~~during the two (2)~~
 22 ~~years immediately preceding the renewal of the authority of at~~
 23 ~~least thirty (30) hours of continuing education; at least (8) hours~~
 24 ~~of which must be in pharmacology of the following continuing~~
 25 ~~education requirements:~~

26 (A) **An applicant for renewal who initially received**
 27 **prescriptive authority less than twelve (12) months before**
 28 **the expiration date of the prescriptive authority is not**
 29 **required to complete a continuing education requirement**
 30 **before the renewal.**

31 (B) **An applicant for renewal who initially received**
 32 **prescriptive authority at least twelve (12) months but less**
 33 **than twenty-four (24) months before the expiration date of**
 34 **the prescriptive authority shall submit proof to the board**
 35 **that the applicant has successfully completed at least**
 36 **fifteen (15) contact hours of continuing education. The**
 37 **hours must:**

38 (i) **be obtained after the date the applicant initially**
 39 **received prescriptive authority but before the expiration**
 40 **date of the prescriptive authority;**

41 (ii) **include at least four (4) contact hours of**
 42 **pharmacology; and**



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(iii) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and listed by the health professions bureau as approved hours.

(C) An applicant for renewal who initially received prescriptive authority at least twenty-four (24) months before the expiration date of the prescriptive authority shall submit proof to the board that the applicant has successfully completed at least thirty (30) contact hours of continuing education. The hours must:

- (i) be obtained within the two (2) years immediately preceding the renewal;
- (ii) include at least eight (8) contact hours of pharmacology; and
- (iii) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and listed by the health professions bureau as approved hours.

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COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1115, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

BROWN C, Chair

Committee Vote: yeas 14, nays 0.

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HOUSE MOTION

Mr. Speaker: I move that House Bill 1115 be amended to read as follows:

Page 3, line 27, delete “one (1) year” and insert “**two (2) years**”.
Page 5, line 29, delete “one (1) year” and insert “**two (2) years**”.

(Reference is to HB1115 as printed January 20, 2000.)

DILLON

HOUSE MOTION

Mr. Speaker: I move that House Bill 1115 be amended to read as follows:

Page 6, after line 40 , begin a new paragraph and insert:

"SECTION 6. IC 25-23-1-19.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2000]: Sec. 19.5. (a) The board shall establish a program under which advanced practice nurses who meet the requirements established by the board are authorized to prescribe legend drugs, including controlled substances (as defined in IC 35-48-1).

(b) The authority granted by the board under this section:

- (1) shall be granted initially to an advanced practice nurse for two (2) years; and
- (2) is subject to renewal indefinitely for successive periods of two (2) years.

(c) The rules adopted under section 7 of this chapter concerning the authority of advanced practice nurses to prescribe legend drugs must do the following:

- (1) Require an advanced practice nurse or a prospective advanced practice nurse who seeks the authority to submit an application to the board.
- (2) Require, as a prerequisite to the initial granting of the authority, the successful completion by the applicant of a graduate level course in pharmacology providing at least two (2) semester hours of academic credit.
- (3) Require, as a condition of the renewal of the authority, the completion by the advanced practice nurse ~~during the two (2) years immediately preceding the renewal of the authority of at least thirty (30) hours of continuing education, at least (8) hours of which must be in pharmacology of the following continuing~~

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education requirements:

(A) An applicant for renewal who initially received prescriptive authority less than twelve (12) months before the expiration date of the prescriptive authority is not required to complete a continuing education requirement before the renewal.

(B) An applicant for renewal who initially received prescriptive authority at least twelve (12) months but less than twenty-four (24) months before the expiration date of the prescriptive authority shall submit proof to the board that the applicant has successfully completed at least fifteen (15) contact hours of continuing education. The hours must:

- (i) be obtained after the date the applicant initially received prescriptive authority but before the expiration date of the prescriptive authority;**
- (ii) include at least four (4) contact hours of pharmacology; and**
- (iii) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and listed by the health professions bureau as approved hours.**

(C) An applicant for renewal who initially received prescriptive authority at least twenty-four (24) months before the expiration date of the prescriptive authority shall submit proof to the board that the applicant has successfully completed at least thirty (30) contact hours of continuing education. The hours must:

- (i) be obtained within the two (2) years immediately preceding the renewal;**
- (ii) include at least eight (8) contact hours of pharmacology; and**
- (iii) be approved by a nationally approved sponsor of continuing education for nurses, approved by the board, and listed by the health professions bureau as approved hours."**

(Reference is to HB 1115 as printed January 20, 2000.)

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