

## CHAPTER 190

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**PROFESSIONS AND OCCUPATIONS**


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**HOUSE BILL 20-1216**

BY REPRESENTATIVE(S) Mullica, Buckner, Caraveo, Lontine, Titone, Bird, Exum, Herod, Hooton, Melton, Valdez A., Young;  
also SENATOR(S) Ginal, Fields.

**AN ACT**

**CONCERNING THE CONTINUATION OF THE STATE BOARD OF NURSING, AND, IN CONNECTION THEREWITH, IMPLEMENTING THE RECOMMENDATIONS CONTAINED IN THE 2019 SUNSET REPORT BY THE DEPARTMENT OF REGULATORY AGENCIES.**

*Be it enacted by the General Assembly of the State of Colorado:*

**SECTION 1. Legislative declaration.** The general assembly finds and determines that the experience hours for advanced practice registered nurses to obtain prescriptive authority, as specified in section 12-255-112 (4)(b), Colorado Revised Statutes, should be reduced in order to remove barriers to advanced practice registered nurses obtaining full prescriptive authority and to align with standards of the National Council of State Boards of Nursing and should not be adjusted downward again until after the next scheduled review of the state board of nursing pursuant to section 24-34-104, Colorado Revised Statutes, at which time the department of regulatory agencies should review and determine whether the experience hours require further adjustments.

**SECTION 2.** In Colorado Revised Statutes, **amend** 12-255-134 as follows:

**12-255-134. Repeal of article - subject to review.** This article 255 is repealed, effective ~~July 1, 2020~~ **SEPTEMBER 1, 2027**. Before the repeal, the board is scheduled for review in accordance with section 24-34-104.

**SECTION 3.** In Colorado Revised Statutes, 24-34-104, **repeal** (18)(a)(V); and **add** (28)(a)(III) as follows:

**24-34-104. General assembly review of regulatory agencies and functions for repeal, continuation, or reestablishment - legislative declaration - repeal.** (18) (a) The following agencies, functions, or both, are scheduled to repeal on July

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*Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.*

1, 2020:

(V) ~~The state board of nursing created in article 255 of title 12;~~

(28) (a) The following agencies, functions, or both, are scheduled for repeal on September 1, 2027:

(III) THE STATE BOARD OF NURSING CREATED IN ARTICLE 255 OF TITLE 12;

**SECTION 4.** In Colorado Revised Statutes, 12-30-108, **repeal** (4)(a)(I)(C) as follows:

**12-30-108. Confidential agreement to limit practice - violation grounds for discipline.** (4) (a) This section does not apply to:

(I) The following health care professionals:

(C) ~~Nurses regulated pursuant to article 255 of this title 12;~~

**SECTION 5.** In Colorado Revised Statutes, 12-255-120, **amend** (1)(c), (1)(f), (1)(g), (1)(i), (1)(j), (1)(z), and (1)(aa); **repeal** (1)(bb); and **add** (1)(cc), (1)(dd), (1)(ee), (1)(ff), and (1)(gg) as follows:

**12-255-120. Grounds for discipline.** (1) "Grounds for discipline", as used in this article 255, means any action by any person who:

(c) Has ~~willfully or negligently~~ acted in a manner inconsistent with the health or safety of persons under his or her care;

(f) Has ~~negligently or willfully~~ practiced nursing in a manner that fails to meet generally accepted standards for the nursing practice;

(g) Has ~~negligently or willfully~~ violated any order or rule of the board pertaining to nursing practice or licensure;

(i) ~~Excessively OR HABITUALLY uses or abuses OR HAS ENGAGED IN EXCESSIVE OR HABITUAL USE OR ABUSE OF alcohol, A habit-forming drugs DRUG, A controlled substances SUBSTANCE, as defined in section 18-18-102 (5), OR ANY other drugs DRUG having similar effects; or is diverting controlled substances, as defined in section 18-18-102 (5), or other drugs having similar effects from the licensee's place of employment; except that the board has the discretion not to discipline the licensee if the licensee is participating in good faith in a program approved by the board designed to end the excessive OR HABITUAL use or abuse;~~

(j) Has FAILED TO:

(I) NOTIFY THE BOARD, AS REQUIRED BY SECTION 12-30-108 (1), OF a physical ILLNESS, PHYSICAL CONDITION, OR BEHAVIORAL HEALTH, ~~mental disability~~ HEALTH, OR SUBSTANCE USE DISORDER ~~that renders the person unable~~ AFFECTS THE PERSON'S ABILITY to practice nursing with reasonable skill and safety to ~~the patients and~~ OR that may endanger the health or safety of ~~persons~~ INDIVIDUALS under the person's

care;

(II) ACT WITHIN THE LIMITATIONS CREATED BY A PHYSICAL ILLNESS, PHYSICAL CONDITION, OR BEHAVIORAL HEALTH, MENTAL HEALTH, OR SUBSTANCE USE DISORDER THAT RENDERS THE PERSON UNABLE TO PRACTICE NURSING WITH REASONABLE SKILL AND SAFETY TO PATIENTS OR THAT MAY ENDANGER THE HEALTH OR SAFETY OF INDIVIDUALS UNDER THE PERSON'S CARE; OR

(III) COMPLY WITH THE LIMITATIONS AGREED TO UNDER A CONFIDENTIAL AGREEMENT ENTERED INTO PURSUANT TO SECTION 12-30-108;

(z) Has failed to report to the board, within ~~forty-five~~ THIRTY days after a final conviction, that the person has been convicted of a crime, as defined in title 18;

(aa) Fails to maintain professional liability insurance in accordance with section 12-255-113; ~~or~~

~~(bb) Has verified by signature the articulated plan developed by an advanced practice nurse pursuant to sections 12-240-108 and 12-255-112 (4) if the articulated plan fails to comply with the requirements of section 12-255-112 (4)(b)(II).~~

(cc) ENGAGED IN A SEXUAL ACT WITH A PATIENT DURING THE COURSE OF PATIENT CARE OR WITHIN SIX MONTHS IMMEDIATELY FOLLOWING THE TERMINATION OF THE PERSON'S PROFESSIONAL RELATIONSHIP WITH THE PATIENT. AS USED IN THIS SUBSECTION (1)(cc), "SEXUAL ACT" MEANS SEXUAL CONTACT, SEXUAL INTRUSION, OR SEXUAL PENETRATION AS DEFINED IN SECTION 18-3-401.

(dd) HAS FAILED TO NOTIFY THE BOARD, IN WRITING AND WITHIN THIRTY DAYS AFTER A JUDGMENT OR SETTLEMENT IS ENTERED, OF A FINAL JUDGMENT BY A COURT OF COMPETENT JURISDICTION AGAINST THE LICENSEE FOR MALPRACTICE OF NURSING OR A SETTLEMENT BY THE LICENSEE IN RESPONSE TO CHARGES OR ALLEGATIONS OF MALPRACTICE OF NURSING AND, IN THE CASE OF A JUDGMENT, HAS FAILED TO INCLUDE IN THE NOTICE THE NAME OF THE COURT, THE CASE NUMBER, AND THE NAMES OF ALL PARTIES TO THE ACTION;

(ee) FAILS TO REPORT TO THE BOARD, WITHIN THIRTY DAYS AFTER AN ADVERSE ACTION, THAT AN ADVERSE ACTION HAS BEEN TAKEN AGAINST THE PERSON BY ANOTHER LICENSING AGENCY IN ANOTHER STATE OR JURISDICTION, A PEER REVIEW BODY, A HEALTH CARE INSTITUTION, A PROFESSIONAL OR NURSING SOCIETY OR ASSOCIATION, A GOVERNMENTAL AGENCY, A LAW ENFORCEMENT AGENCY, OR A COURT FOR ACTS OR CONDUCT THAT WOULD CONSTITUTE GROUNDS FOR DISCIPLINARY OR ADVERSE ACTION AS DESCRIBED IN THIS ARTICLE 255;

(ff) FAILS TO REPORT TO THE BOARD, WITHIN THIRTY DAYS, THE SURRENDER OF A LICENSE OR OTHER AUTHORIZATION TO PRACTICE NURSING IN ANOTHER STATE OR JURISDICTION OR THE SURRENDER OF MEMBERSHIP ON ANY NURSING STAFF OR IN ANY NURSING OR PROFESSIONAL ASSOCIATION OR SOCIETY WHILE UNDER INVESTIGATION BY ANY OF THOSE AUTHORITIES OR BODIES FOR ACTS OR CONDUCT SIMILAR TO ACTS OR CONDUCT THAT WOULD CONSTITUTE GROUNDS FOR ACTION AS DESCRIBED IN THIS ARTICLE 255; OR

(gg) IS DIVERTING OR HAS DIVERTED A CONTROLLED SUBSTANCE, AS DEFINED IN SECTION 18-18-102 (5), OR ANY OTHER DRUG HAVING SIMILAR EFFECTS FROM THE PERSON'S PLACE OF EMPLOYMENT.

**SECTION 6.** In Colorado Revised Statutes, **add** 12-255-135 as follows:

**12-255-135. Confidential agreement to limit practice.** (1) EXCEPT AS SPECIFIED IN SUBSECTION (2) OF THIS SECTION, SECTION 12-30-108 CONCERNING CONFIDENTIAL AGREEMENTS TO LIMIT PRACTICE APPLIES TO THIS ARTICLE 255.

(2) THIS SECTION AND SECTION 12-30-108 DO NOT APPLY TO A NURSE SUBJECT TO DISCIPLINE UNDER SECTION 12-255-120 (1)(i).

**SECTION 7.** In Colorado Revised Statutes, **add** 10-1-120.5 as follows:

**10-1-120.5. Reporting of malpractice claims against nurses.** (1) EACH INSURANCE COMPANY LICENSED TO DO BUSINESS IN THIS STATE AND ENGAGED IN WRITING MALPRACTICE INSURANCE FOR NURSES SHALL SEND TO THE STATE BOARD OF NURSING, IN THE FORM PRESCRIBED BY THE COMMISSIONER, INFORMATION RELATING TO EACH MALPRACTICE CLAIM AGAINST A LICENSED NURSE THAT IS SETTLED OR IN WHICH JUDGMENT IS RENDERED AGAINST THE INSURED.

(2) THE INFORMATION MUST INCLUDE INFORMATION DEEMED NECESSARY BY THE STATE BOARD OF NURSING TO CONDUCT A FURTHER INVESTIGATION AND HEARING.

**SECTION 8.** In Colorado Revised Statutes, **amend** 13-64-303 as follows:

**13-64-303. Judgments and settlements - reported.** Any final judgment, settlement, or arbitration award against any health care professional or health care institution for medical malpractice shall be reported within fourteen days by ~~such~~ THE professional's or institution's medical malpractice insurance carrier in accordance with section 10-1-120, **10-1-120.5**, 10-1-121, 10-1-124, or 10-1-125, ~~C.R.S.~~, or by such professional or institution if there is no commercial medical malpractice insurance coverage to the licensing agency of the health care professional or health care institution for review, investigation, and, where appropriate, disciplinary or other action. Any health care professional, health care institution, or insurance carrier that knowingly fails to report as required by this section shall be subject to a civil penalty of not more than two thousand five hundred dollars. Such penalty shall be determined and collected by the district court in the city and county of Denver. All penalties collected pursuant to this section shall be transmitted to the state treasurer, who shall credit the same to the general fund.

**SECTION 9.** In Colorado Revised Statutes, 25-51-104, **amend** (1)(c) and (1)(e) as follows:

**25-51-104. Payment and financial resolution.** (1) If a patient accepts an offer of compensation made pursuant to section 25-51-103 (5) and receives the compensation, the payment of compensation to the patient is not a payment resulting from:

(c) A malpractice claim settled or in which judgment is rendered against a professional for purposes of reporting by malpractice insurance companies under section 10-1-120, **10-1-120.5**, 10-1-121, 10-1-124, 10-1-125, or 10-1-125.5;

(e) A judgment, administrative action, settlement, or arbitration award involving malpractice under section 12-200-106 (5), 12-210-105 (5), 12-215-115 (1)(i), 12-220-130 (1)(q) or (1)(r), 12-235-111 (1)(i), 12-240-125 (4)(b)(III), 12-245-226 (8), 12-250-116, 12-255-119 (3)(b)(II), **12-255-120 (1)(dd)**, 12-275-120 (1)(p) or (1)(v), 12-275-129, 12-280-111 (1), 12-285-120 (1)(o), 12-285-127 (1)(a), 12-285-211 (1)(k), 12-285-216 (1)(a), or 12-290-113 (2)(b)(III).

**SECTION 10.** In Colorado Revised Statutes, 12-255-104, **amend** (1), (2), (7), (8)(a), (8)(b), (9), (10)(a), (10)(b) introductory portion, (10)(b)(IV), and (12); and **add** (3.5), (4.5), and (5.5) as follows:

**12-255-104. Definitions.** As used in this article 255, unless the context otherwise requires:

(1) "Advanced practice REGISTERED nurse" means ~~an advanced practice registered nurse who is~~ a REGISTERED professional nurse ~~and~~ WHO is licensed to practice pursuant to this article 255, who obtains specialized education or training as provided in ~~this section~~ SECTION 12-255-111, and who applies to and is accepted by the board for inclusion in the advanced practice registry ESTABLISHED PURSUANT TO SECTION 12-255-111.

(2) "Approved education program" means a course of ~~training~~ EDUCATION conducted by an educational or health care institution that implements the basic practical or professional nursing curriculum prescribed and approved by the board.

(3.5) "COLLABORATION" MEANS THE ACT OF LICENSED HEALTH CARE PROVIDERS WORKING COOPERATIVELY WITHIN EACH LICENSED HEALTH CARE PROVIDER'S SCOPE OF PRACTICE TO FORMULATE AND CARRY OUT THE PLAN OF PATIENT CARE.

(4.5)(a) "DELEGATION OF PATIENT CARE" MEANS ASPECTS OF PATIENT CARE THAT ARE CONSISTENT WITH A PLAN OF PATIENT CARE PRESCRIBED BY A LICENSED HEALTH CARE PROVIDER WITHIN THE SCOPE OF THE PROVIDER'S PRACTICE AND THAT MAY BE DELEGATED TO A REGISTERED NURSE OR LICENSED PRACTICAL NURSE WITHIN THE SCOPE OF THE NURSE'S PRACTICE. "DELEGATION OF PATIENT CARE" INCLUDES ASPECTS OF PATIENT CARE THAT MAY BE DELEGATED BY A LICENSED HEALTH CARE PROVIDER WITHIN THE SCOPE OF THE PROVIDER'S PRACTICE AND WITHIN THE PROVIDER'S PROFESSIONAL JUDGMENT TO A LICENSED OR AN UNLICENSED HEALTH CARE PROVIDER WITHIN THE SCOPE OF THAT PROVIDER'S PRACTICE. NOTHING IN THIS SUBSECTION (4.5) LIMITS OR EXPANDS THE SCOPE OF PRACTICE OF ANY NURSE LICENSED PURSUANT TO THIS ARTICLE 255.

(b) FOR PURPOSES OF THIS SUBSECTION (4.5), "PLAN OF PATIENT CARE" MEANS A WRITTEN PLAN, VERBAL ORDER, STANDING ORDER, OR PROTOCOL, WHETHER PATIENT SPECIFIC OR NOT, THAT AUTHORIZES SPECIFIC OR DISCRETIONARY NURSING ACTION AND THAT MAY INCLUDE THE ADMINISTRATION OF MEDICATION.

(5.5) "LICENSED HEALTH CARE PROVIDER" MEANS AN INDIVIDUAL WHO IS

LICENSED OR OTHERWISE AUTHORIZED BY THE STATE PURSUANT TO THIS TITLE 12 OR ARTICLE 3.5 OF TITLE 25 TO PROVIDE HEALTH CARE SERVICES.

(7) "Practical nurse", "trained practical nurse", "licensed vocational nurse", or "licensed practical nurse" means a person who holds a license to practice pursuant to this article 255 as a licensed practical nurse in this state or is licensed in another state and is practicing in this state pursuant to section 24-60-3802, with the right to use the title "licensed practical nurse" and its abbreviation "L.P.N." OR "LICENSED VOCATIONAL NURSE" AND ITS ABBREVIATION "L.V.N."

(8) (a) "Practice of advanced practice REGISTERED nursing" means an expanded scope of professional nursing in a scope, role, and population focus approved by the board, with or without compensation or personal profit, and includes the practice of professional nursing.

(b) "Practice of advanced practice REGISTERED nursing" includes prescribing medications as may be authorized pursuant to section 12-255-112.

(9) (a) "Practice of practical nursing" means the performance, under the supervision of a ~~dentist, physician, podiatrist, or professional nurse~~ LICENSED HEALTH CARE PROVIDER authorized to practice in this state, of those services requiring the education, training, and experience, as evidenced by knowledge, abilities, and skills required in this article 255 for licensing as a practical nurse pursuant to section 12-255-114, in:

(I) Caring for the ill, injured, or infirm;

(II) Teaching and promoting preventive health measures;

(III) Acting to safeguard life and health; ~~or~~

(IV) Administering treatments and medications prescribed by A LICENSED HEALTH CARE PROVIDER; OR

~~(A) A legally authorized dentist, podiatrist, or physician; or~~

~~(B) A physician assistant implementing a medical plan pursuant to subsection (4) of this section.~~

(V) PARTICIPATING IN THE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION OF THE DELIVERY OF PATIENT CARE SERVICES THAT IS COMMENSURATE WITH THE PRACTICAL NURSE'S EDUCATION.

(b) "Practice of practical nursing" includes:

(I) The performance of delegated medical functions AND DELEGATED PATIENT CARE FUNCTIONS;

(II) THE ASSUMPTION OF RESPONSIBILITIES AND ACCOUNTABILITIES FOR THE PERFORMANCE OF ACTS WITHIN THE PRACTICAL NURSE'S EDUCATIONAL BACKGROUND AND USING PROCEDURES LEADING TO PREDICTABLE OUTCOMES; AND

(III) THE ADMINISTRATION AND MANAGEMENT OF NURSING, INCLUDING DIRECTING AND ASSIGNING NURSING INTERVENTIONS THAT MAY BE PERFORMED BY OTHER LICENSED OR UNLICENSED HEALTH CARE PERSONNEL.

(c) Nothing in this article 255 ~~shall limit or deny~~ LIMITS OR DENIES a practical nurse from supervising other practical nurses or other LICENSED OR UNLICENSED health care personnel.

(10) (a) "Practice of professional nursing" means the ~~performance of both independent nursing functions and delegated medical functions in accordance with accepted practice standards~~ DELIVERY OF INDEPENDENT AND COLLABORATIVE NURSING CARE TO INDIVIDUALS OF ALL AGES, FAMILIES, GROUPS, AND COMMUNITIES, WHETHER SICK OR WELL, IN ALL SETTINGS. The functions include the initiation and performance of nursing care through health promotion, supportive or restorative care, disease prevention, diagnosis and treatment of human disease, ailment, pain, injury, deformity, and physical or mental condition using specialized knowledge, judgment, and skill involving the application of biological, physical, social, and behavioral science principles required for licensure as a professional nurse pursuant to section 12-255-110.

(b) The "practice of professional nursing" ~~shall include~~ INCLUDES the performance of such services as:

(IV) Executing delegated medical functions AND DELEGATED PATIENT CARE FUNCTIONS;

(12) "Treating" means the selection, recommendation, execution, and monitoring of those nursing measures essential to the effective determination and management of actual or potential human health problems and to the execution of the delegated medical functions AND DELEGATED PATIENT CARE FUNCTIONS. The ~~delegated medical functions AND DELEGATED PATIENT CARE FUNCTIONS~~ shall be performed under the responsible direction and supervision of a ~~person licensed under the laws of this state to practice medicine, podiatry, or dentistry~~ LICENSED HEALTH CARE PROVIDER. "Treatment" has a corresponding meaning.

**SECTION 11.** In Colorado Revised Statutes, 12-255-105, **amend** (1)(a) introductory portion and (1)(a)(II)(D) as follows:

**12-255-105. State board of nursing created - removal of board members - meetings of board.** (1) (a) There is hereby created the state board of nursing in the division, which board ~~shall consist~~ CONSISTS of eleven members who are residents of this state, appointed by the governor as follows:

(II) Seven members of the board shall be licensed professional nurses who are actively employed in their respective nursing professions and licensed in this state. The professional nurse members shall have been employed for at least three years in their respective categories. Members shall be as follows:

(D) One member shall be registered as an advanced practice REGISTERED nurse pursuant to section 12-255-111;

**SECTION 12.** In Colorado Revised Statutes, 12-255-107, **amend** (1)(b)(I) as follows:

**12-255-107. Powers and duties of the board - rules - definition.** (1) The board has the following powers and duties:

(b)(I) To examine, license, reactivate, and renew licenses of qualified applicants and to grant to the applicants temporary licenses and permits to engage in the practice of practical nursing and professional nursing in this state within the limitations imposed by this article 255. Licenses issued pursuant to this article 255 are subject to the renewal, expiration, reinstatement, and delinquency fee provisions specified in section 12-20-202 (1) and (2). The director may increase fees to obtain or renew a professional nurse license or advanced practice REGISTERED nurse authority consistent with section 12-30-105 (4) to fund the division's costs in administering and staffing the nurse-physician advisory task force for Colorado health care created in section 12-30-105 (1). Any person whose license has expired shall be subject to the penalties provided in this article 255 or section 12-20-202 (1).

**SECTION 13.** In Colorado Revised Statutes, 12-255-111, **amend** (1), (2), (3)(b), (3)(c), (4), (5), (6)(a) introductory portion, and (6)(b)(I) as follows:

**12-255-111. Requirements for advanced practice registered nurse registration - legislative declaration - advanced practice registry - rules.**

(1) The general assembly hereby recognizes that some ~~individuals~~ REGISTERED PROFESSIONAL NURSES practicing pursuant to this article 255 have acquired additional preparation for advanced NURSING practice and hereby determines that it is appropriate for the state to maintain a registry of those individuals. The registry shall be known as the "advanced practice registry".

(2) The board shall establish the advanced practice registry and shall require that a REGISTERED PROFESSIONAL nurse applying for registration ON THE ADVANCED PRACTICE REGISTRY identify ~~his or her~~ THE NURSE'S role and population focus. The board shall establish reasonable criteria for designation of specific role and population foci based on currently accepted professional standards. A REGISTERED PROFESSIONAL nurse who is included in the advanced practice registry has the right to use the title "advanced practice REGISTERED nurse" or, if authorized by the board, to use the title "certified nurse midwife", "clinical nurse specialist", "certified registered nurse anesthetist", or "nurse practitioner". These titles may be abbreviated as "~~A.P.N.~~" "A.P.R.N.", "C.N.M.", "C.N.S.", "C.R.N.A.", or "N.P.", respectively. It is unlawful for any person to use any of the titles or abbreviations listed in this subsection (2) unless included in the registry and authorized by the board to do so.

(3) (b) On and after July 1, 2010, in addition to the requirements of subsection (3)(a) of this section, a REGISTERED professional nurse shall obtain national certification from a nationally recognized accrediting agency, as defined by the board by rule, in the appropriate role and population focus in order to be included in the advanced practice registry; except that REGISTERED professional nurses who are included in the registry as of June 30, 2010, but have not obtained the national certification, may thereafter continue to be included in the registry and to use the appropriate title and abbreviation.

(c) A REGISTERED professional nurse may be included in the advanced practice registry by endorsement if the REGISTERED professional nurse meets one of the following qualifying standards:

(I) The REGISTERED professional nurse is recognized as an advanced practice REGISTERED nurse in another state or jurisdiction and has practiced as an advanced practice REGISTERED nurse for at least two of the last five years immediately preceding the date of application for inclusion in the advanced practice registry; or

(II) The REGISTERED professional nurse holds national certification as provided in subsection (3)(b) of this section and possesses an appropriate graduate degree as determined by the board.

(4) A nurse who meets the definition of advanced practice REGISTERED nurse and the requirements of section 12-255-112 may be granted prescriptive authority as a function in addition to those defined in section 12-255-104 (10).

(5) An advanced practice REGISTERED nurse shall practice in accordance with the standards of the appropriate national professional nursing organization and have a safe mechanism for consultation or collaboration with a physician or, when appropriate, referral to a physician. Advanced practice REGISTERED nursing also includes, when appropriate, referral to other health care providers.

(6) (a) In order to enhance the cost efficiency and continuity of care, an advanced practice REGISTERED nurse may, within ~~his or her~~ THE NURSE'S scope of practice and within the advanced practice REGISTERED nurse-patient relationship, sign an affidavit, certification, or similar document that:

(b) The affidavit, certification, or similar document may not:

(I) Be the prescription of medication unless the advanced practice REGISTERED nurse has been granted prescriptive authority pursuant to section 12-255-112; or

**SECTION 14.** In Colorado Revised Statutes, 12-255-112, **amend** (1), (3)(a), (3)(b)(I), (4)(a) introductory portion, (4)(a)(VI), (4)(b) introductory portion, (4)(b)(I), (4)(b)(III), (4)(b)(IV), (4)(c), (4)(d), (5), (6)(a), (7)(a), (7)(c)(I), (9), (10), (11), and (12); **repeal** (4)(b)(II) and (4)(e); and **add** (4)(f) as follows:

**12-255-112. Prescriptive authority - advanced practice registered nurses - limits on opioid prescriptions - rules - financial benefit for prescribing prohibited - repeal.** (1) The board may authorize an advanced practice REGISTERED nurse who is listed on the advanced practice registry, has a license in good standing without disciplinary sanctions issued pursuant to section 12-255-110, and has fulfilled requirements established by the board pursuant to this section to prescribe controlled substances or prescription drugs as defined in ~~part 1 of article 280 of this title 12~~ SECTION 12-280-103.

(3) (a) An advanced practice REGISTERED nurse may be granted authority to prescribe prescription drugs and controlled substances to provide treatment to clients within the role and population focus of the advanced practice REGISTERED nurse.

(b) (I) An advanced practice REGISTERED nurse who has been granted authority to prescribe prescription drugs and controlled substances under this article 255 may advise the nurse's patients of their option to have the symptom or purpose for which a prescription is being issued included on the prescription order.

(4) (a) An advanced practice REGISTERED nurse applying for prescriptive authority shall provide evidence to the board of the following:

(VI) A signed attestation ~~that states he or she~~ STATING THAT THE ADVANCED PRACTICE REGISTERED NURSE has completed at least three years of combined clinical work experience as a professional nurse or as an advanced practice REGISTERED nurse.

(b) Upon satisfaction of the requirements set forth in subsection (4)(a) of this section, the board may grant provisional prescriptive authority to an advanced practice REGISTERED nurse. The provisional prescriptive authority that is granted is limited to those patients and medications appropriate to the advanced practice REGISTERED nurse's role and population focus. In order to retain provisional prescriptive authority and obtain and retain full prescriptive authority pursuant to this subsection (4) for patients and medications appropriate for the advanced practice REGISTERED nurse's role and population focus, an advanced practice REGISTERED nurse shall satisfy the following requirements:

(I) (A) Once the provisional prescriptive authority is granted, the advanced practice REGISTERED nurse must obtain ~~one thousand~~ SEVEN HUNDRED FIFTY hours of documented experience in a mutually structured prescribing mentorship either with a physician or with an advanced practice REGISTERED nurse who has full prescriptive authority and experience in prescribing medications. The mentor must be practicing in Colorado and have education, training, experience, and an active practice that corresponds with the role and population focus of the advanced practice REGISTERED nurse.

(B) Remote communication with the mentor is permissible within the mentorship as long as the communication is synchronous. Synchronous communication does not include communication by e-mail.

(C) The physician or advanced practice REGISTERED nurse serving as a mentor shall not require payment or employment as a condition of entering into the mentorship relationship, but the mentor may request reimbursement of reasonable expenses and time spent as a result of the mentorship relationship.

(D) Upon successful completion of the mentorship period, the mentor shall provide ~~his or her~~ THE MENTOR's signature and attestation to verify that the advanced practice REGISTERED nurse has successfully completed the mentorship within the required period after the provisional prescriptive authority was granted.

(E) If an advanced practice REGISTERED nurse with provisional prescriptive authority fails to complete the mentorship required by this subsection (4)(b)(I) within three years or otherwise fails to demonstrate competence as determined by the board, the advanced practice REGISTERED nurse's provisional prescriptive authority expires for failure to comply with the statutory requirements.

~~(II) The advanced practice nurse with provisional prescriptive authority shall develop an articulated plan for safe prescribing that documents how the advanced practice nurse intends to maintain ongoing collaboration with physicians and other health care professionals in connection with the advanced practice nurse's practice of prescribing medication within his or her role and population focus. The articulated plan shall guide the advanced practice nurse's prescriptive practice. The physician or advanced practice nurse that serves as a mentor as described in subsection (4)(b)(I) of this section shall provide his or her signature and attestation on the articulated plan to verify that the advanced practice nurse has developed an articulated plan. The advanced practice nurse shall retain the articulated plan on file, shall review the plan annually, and shall update the plan as necessary. The articulated plan is subject to review by the board, and the advanced practice nurse shall provide the plan to the board upon request. If an advanced practice nurse with provisional prescriptive authority fails to develop the required articulated plan within three years or otherwise fails to demonstrate competence as determined by the board, the advanced practice nurse's provisional prescriptive authority expires for failure to comply with the statutory requirements. An articulated plan developed pursuant to this subsection (4)(b)(II) must include at least the following:~~

~~(A) A mechanism for consultation and referral for issues regarding prescriptive authority;~~

~~(B) A quality assurance plan;~~

~~(C) Decision support tools; and~~

~~(D) Documentation of ongoing continuing education in pharmacology and safe prescribing.~~

(III) The advanced practice REGISTERED nurse shall maintain professional liability insurance as required by section 12-255-113.

(IV) The advanced practice REGISTERED nurse shall maintain national certification, as specified in subsection (4)(a)(III) of this section, unless the board grants an exception.

(c) An advanced practice REGISTERED nurse who was granted prescriptive authority prior to July 1, 2010, shall satisfy the following requirements in order to retain prescriptive authority:

(I) ~~The advanced practice nurse shall develop an articulated plan as specified in subsection (4)(b)(II) of this section; except that to verify development of an articulated plan, the advanced practice nurse shall obtain the signature of either a physician or an advanced practice nurse who has prescriptive authority and experience in prescribing medications, is practicing in Colorado, and has education, training, experience, and active practice that corresponds with the role and population focus of the advanced practice nurse developing the plan.~~

(II) The advanced practice REGISTERED nurse shall maintain professional liability insurance as required by section 12-255-113.

(III) The advanced practice REGISTERED nurse shall maintain national certification, as specified in subsection (4)(a)(III) of this section, unless:

(A) The advanced practice REGISTERED nurse was included on the advanced practice registry prior to July 1, 2010, and has not obtained national certification;

(B) The advanced practice REGISTERED nurse was included on the advanced practice registry prior to July 1, 2008, and has not completed a graduate degree as specified in section 12-255-111 (3)(a); or

(C) The board grants an exception.

(d) In order to obtain provisional prescriptive authority and obtain and retain full prescriptive authority in this state, an advanced practice REGISTERED nurse from another state must meet the requirements of this section or substantially equivalent requirements, as determined by the board.

~~(e) The board shall conduct random audits of articulated plans to ensure that the plans satisfy the requirements of this subsection (4) and rules adopted by the board.~~

(f) ONCE AN ADVANCED PRACTICE REGISTERED NURSE OBTAINS FULL PRESCRIPTIVE AUTHORITY PURSUANT TO THIS SUBSECTION (4), THE ADVANCED PRACTICE REGISTERED NURSE IS NOT REQUIRED TO MAINTAIN OR UPDATE AN ARTICULATED PLAN AS DESCRIBED IN SUBSECTION (4)(b)(II) OR (4)(c)(I) OF THIS SECTION.

(5) An advanced practice REGISTERED nurse who obtains prescriptive authority pursuant to this section shall be assigned a specific identifier by the state board of nursing. This identifier shall be available to the Colorado medical board and the state board of pharmacy. The state board of nursing shall establish a mechanism to assure that the prescriptive authority of an advanced practice REGISTERED nurse may be readily verified.

(6) (a) An advanced practice REGISTERED nurse with prescriptive authority pursuant to this section is subject to the limitations on prescribing opioids specified in section 12-30-109.

(7) (a) The scope of practice for an advanced practice REGISTERED nurse may be determined by the board in accordance with this article 255.

(c) (I) Prescriptive authority by an advanced practice REGISTERED nurse shall be limited to those patients appropriate to the nurse's scope of practice. Prescriptive authority may be limited or withdrawn and the advanced practice REGISTERED nurse may be subject to further disciplinary action in accordance with this article 255 if the nurse has prescribed outside the nurse's scope of practice or for other than a therapeutic purpose.

(9) Nothing in this section shall be construed to permit dispensing or distribution, as defined in section 12-280-103 (14) and (15), by an advanced practice REGISTERED nurse, except for samples, under article 280 of this title 12 and the federal "Prescription Drug Marketing Act of 1987", Pub.L. 100-293, as amended.

(10) ~~No~~ AN advanced practice REGISTERED nurse registered pursuant to section 12-255-111 ~~shall be~~ IS NOT required to apply for or obtain prescriptive authority.

(11) Nothing in this section shall limit the practice of nursing by any nurse, including ~~but not limited to~~, advanced practice REGISTERED nurses.

(12) An advanced practice REGISTERED nurse shall not accept any direct or indirect benefit from a pharmaceutical manufacturer or pharmaceutical representative for prescribing a specific medication to a patient. For the purposes of this section, a direct or indirect benefit does not include a benefit offered to an advanced practice REGISTERED nurse regardless of whether the specific medication is being prescribed.

**SECTION 15.** In Colorado Revised Statutes, **amend** 12-255-113 as follows:

**12-255-113. Professional liability insurance required - advanced practice registered nurses in independent practice - rules.** (1) It is unlawful for any advanced practice REGISTERED nurse engaged in an independent practice of professional nursing to practice within the state of Colorado unless the advanced practice REGISTERED nurse purchases and maintains or is covered by professional liability insurance in an amount not less than five hundred thousand dollars per claim with an aggregate liability for all claims during the year of one million five hundred thousand dollars.

(2) Professional liability insurance required by this section shall cover all acts within the scope of practice of an advanced practice REGISTERED nurse as defined in this article 255.

(3) Notwithstanding the requirements of subsection (1) of this section, the board, by rule, may exempt or establish lesser liability insurance requirements for advanced practice REGISTERED nurses.

(4) Nothing in this section shall be construed to confer liability on an employer for the acts of an advanced practice REGISTERED nurse that are outside the scope of employment or to negate the applicability of the "Colorado Governmental Immunity Act", article 10 of title 24.

**SECTION 16.** In Colorado Revised Statutes, 12-255-127, **amend** (1)(n)(II) and (1)(o) as follows:

**12-255-127. Exclusions.** (1) No provision of this article 255 shall be construed to prohibit:

(n) (II) The issuance by an advanced practice REGISTERED nurse with prescriptive authority of standing orders and protocols for the use of epinephrine auto-injectors for emergency use in a public school or nonpublic school pursuant to a policy adopted in accordance with section 22-1-119.5; or

(o) A prescription by an advanced practice REGISTERED nurse with prescriptive authority for the use of epinephrine auto-injectors by an authorized entity in accordance with article 47 of title 25.

**SECTION 17.** In Colorado Revised Statutes, **amend** 12-255-128 as follows:

**12-255-128. Prescribing opiate antagonists.** An advanced practice REGISTERED nurse with prescriptive authority pursuant to section 12-255-112 may prescribe or dispense an opiate antagonist in accordance with section 12-30-110.

**SECTION 18.** In Colorado Revised Statutes, **add** 12-255-136 as follows:

**12-255-136. Change of name - direction to revisor - repeal.** (1) THE REVISOR OF STATUTES IS AUTHORIZED TO CHANGE ALL REFERENCES TO "ADVANCED PRACTICE NURSE", "ADVANCED PRACTICE NURSING", AND "A.P.N." THAT APPEAR IN THIS ARTICLE 255 AND ELSEWHERE IN THE COLORADO REVISED STATUTES TO "ADVANCED PRACTICE REGISTERED NURSE", "ADVANCED PRACTICE REGISTERED NURSING", AND "A.P.R.N.", RESPECTIVELY.

(2) THIS SECTION IS REPEALED, EFFECTIVE SEPTEMBER 1, 2023.

**SECTION 19.** In Colorado Revised Statutes, **amend** 12-255-115 as follows:

**12-255-115. Volunteer nurse licensure.** (1) The board may issue a license to a ~~retired~~ volunteer nurse who meets the requirements set forth in this section.

(2) A ~~retired~~ volunteer nursing license shall only be issued to an applicant who: ~~is at least fifty-five years of age and:~~

(a) Currently holds a license to practice nursing, either as a practical nurse or as a professional nurse, and the license is due to expire unless renewed; or

(b) ~~Has retired from the practice of nursing and~~ Is not currently engaged in the practice of nursing either full-time or part-time and has, prior to ~~retirement~~ CEASING PRACTICE, maintained full licensure in good standing in any state or territory of the United States.

(3) A nurse who holds a ~~retired~~ volunteer nursing license shall not accept compensation for nursing tasks that are performed while in possession of the license. A ~~retired~~ volunteer nursing license shall permit the ~~retired~~ nurse to engage in volunteer nursing tasks within the scope of the nurse's license.

(4) An applicant for a ~~retired~~ volunteer nursing license shall submit to the board an application containing the information the board may prescribe, a copy of the applicant's most recent nursing license, and a statement signed under penalty of perjury in which the applicant agrees not to receive compensation for any nursing tasks that are performed while in possession of the license.

(5) A person who possesses a ~~retired~~ volunteer nursing license ~~shall be~~ IS immune from civil liability for actions performed within the scope of the nursing license unless it is established that injury or death was caused by gross negligence or the willful and wanton misconduct of the licensee. The immunity provided in this subsection (5) ~~shall apply~~ APPLIES only to the licensee and ~~shall~~ DOES not affect the liability of any other individual or entity. Nothing in this subsection (5) ~~shall be construed to limit~~ LIMITS the ability of the board to take disciplinary action against

a licensee.

(6) The fee for a ~~retired~~ volunteer nursing license, including assessments for legal defense, peer assistance, and other programs for which licenses are assessed, ~~shall be no more than~~ MUST NOT EXCEED fifty percent of the license renewal fee, including all assessments, established by the board for an active nursing license.

(7) The board shall design a questionnaire to be sent to all ~~retired~~ volunteer nurses who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article 255 or HAS been disciplined for any action that might be considered a violation of this article 255 or might make the licensee unfit to practice nursing with reasonable care and safety. If an applicant fails to answer the questionnaire accurately, the failure ~~shall constitute~~ CONSTITUTES grounds for discipline under section 12-255-120(1)(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (6) of this section. The board may ~~refuse~~ DENY an application for license renewal that does not accompany an accurately completed questionnaire.

(8) The board shall deny an application for the reactivation of a practical or professional nurse license for a ~~retired~~ volunteer nurse if the board determines that the nurse requesting reactivation has not actively volunteered as a nurse for the two-year period immediately preceding the filing of the application for license reactivation or has not otherwise demonstrated continued competency to return to the active practice of nursing in a manner approved by the board.

**SECTION 20.** In Colorado Revised Statutes, 13-21-115.5, **amend** (3)(c)(II)(F) as follows:

**13-21-115.5. Volunteer service act - immunity - exception for operation of motor vehicles - definitions.** (3) As used in this section, unless the context otherwise requires:

(c) (II) "Volunteer" includes:

(F) A licensed ~~retired~~ volunteer nurse governed by the provisions of article 255 of title 12 performing volunteer nursing tasks within the scope of the person's nursing license, as described in section 12-255-115, as a volunteer for a nonprofit organization, a nonprofit corporation, a governmental entity, or a hospital;

**SECTION 21.** In Colorado Revised Statutes, **amend** 12-255-106 as follows:

**12-255-106. Employees - executive administrator.** ~~After consultation with the board, The director shall appoint an executive administrator for the board and other personnel deemed necessary, pursuant to section 13 of article XII of the state constitution. At least one member of the board shall serve on any panel convened by the department of personnel to interview candidates for the position of executive administrator.~~

**SECTION 22.** In Colorado Revised Statutes, 12-20-404, **add** (1)(d)(II)(J.5) as follows:

**12-20-404. Disciplinary actions - regulator powers - disposition of fines.**

(1) **General disciplinary authority.** If a regulator determines that an applicant, licensee, certificate holder, or registrant has committed an act or engaged in conduct that constitutes grounds for discipline or unprofessional conduct under a part or article of this title 12 governing the particular profession or occupation, the regulator may:

(d) (II) A regulator is not authorized under this subsection (1)(d) to refuse to renew the license, certification, or registration of a licensee, certificate holder, or registrant regulated under the following:

(J.5) ARTICLE 255 OF THIS TITLE 12 CONCERNING NURSES;

**SECTION 23.** In Colorado Revised Statutes, 12-255-110, **amend** (3) as follows:

**12-255-110. Requirements for professional nurse licensure - rules.** (3) The board shall design a questionnaire to be sent to all licensees who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article 255 or HAS been disciplined for any action that might be considered a violation of this article 255 or might make the licensee unfit to practice nursing with reasonable care and safety. The board shall include on the questionnaire a question regarding whether the licensee has complied with section 12-30-111. If an applicant fails to answer the questionnaire accurately, the failure constitutes grounds for discipline under section 12-255-120 (1)(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (1)(d) of this section. The board may ~~refuse~~ DENY an application for license renewal that does not accompany an accurately completed questionnaire.

**SECTION 24.** In Colorado Revised Statutes, 12-255-114, **amend** (3) as follows:

**12-255-114. Requirements for practical nurse licensure - rules.** (3) The board shall design a questionnaire to be sent to all licensed practical nurses who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article 255 or HAS been disciplined for any action that might be considered a violation of this article 255 or might make the licensee unfit to practice nursing with reasonable care and safety. If an applicant fails to answer the questionnaire accurately, the failure ~~shall constitute~~ CONSTITUTES grounds for discipline under section 12-255-120 (1)(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (1)(d) of this section. The board may ~~refuse~~ DENY an application for license renewal that does not accompany an accurately completed questionnaire.

**SECTION 25.** In Colorado Revised Statutes, 12-255-121, **amend** (2)(a)(II), (2)(a)(III), (2)(b) introductory portion, and (2)(c) as follows:

**12-255-121. Withholding or denial of license - hearing - definitions.**

(2) (a) (II) The board may ~~refuse to issue~~ DENY a license or temporary license to practice as a nurse to any applicant during the time the applicant's license is under suspension in another state.

(III) The board may ~~refuse to issue~~ DENY a license or may grant a license subject to terms of probation if the board determines that an applicant for a license has not actively practiced practical or professional nursing, or has not otherwise maintained continued competency, as determined by the board, during the two years immediately preceding the application for licensure under this article 255.

(b) If the board ~~refuses to issue~~ DENIES a license to an applicant pursuant to subsection (2)(a) of this section, the provisions of section 24-4-104 (9) ~~shall~~ apply. Upon the ~~refusal~~ DENIAL, the board shall provide the applicant with a statement in writing setting forth the following:

(c) If the board ~~refuses to issue~~ DENIES a license to an applicant on the grounds that the applicant's nursing or other health care occupation license was revoked by another legally authorized board, the board may require the applicant to pass a written examination as provided in section 12-255-109 as a prerequisite to licensure. The applicant shall not be allowed to take the written examination until at least two years after the revocation of the nursing or other health care occupation license.

**SECTION 26.** In Colorado Revised Statutes, 12-255-131, **amend** (1) as follows:

**12-255-131. Delegation of nursing tasks - rules.** (1) Any LICENSED PRACTICAL NURSE, registered nurse, OR ADVANCED PRACTICE REGISTERED NURSE may delegate any task included in the ~~practice of professional nursing~~ NURSE'S LICENSED SCOPE OF PRACTICE, subject to the requirements of this section. A LICENSED PRACTICAL NURSE, REGISTERED NURSE, OR ADVANCED PRACTICE REGISTERED NURSE MAY DELEGATE NURSING TASKS TO LICENSED, CERTIFIED, REGISTERED, OR UNLICENSED OR UNREGULATED ASSISTIVE PERSONNEL. In no event may a registered nurse delegate to another person the authority to select medications if the person is not, independent of the delegation, authorized by law to select medications.

**SECTION 27.** In Colorado Revised Statutes, 12-30-105, **amend** (1)(d); and **repeal** (5)(a) and (5)(b) as follows:

**12-30-105. Nurse-physician advisory task force for Colorado health care - creation - duties - definition - repeal.** (1) There is hereby created, within the division, the nurse-physician advisory task force for Colorado health care, referred to in this section as "NPATCH". The purpose of the NPATCH is to promote public safety and improve health care in Colorado by supporting collaboration and communication between the practices of nursing and medicine. The NPATCH shall:

(d) Make consensus recommendations to policy-making and rule-making entities, including RECOMMENDATIONS TO THE EXECUTIVE DIRECTOR.

~~(f) Recommendations to the state board of nursing created in section 12-255-105 and the Colorado medical board created in section 12-240-105 regarding the transition to the articulated plan model and harmonizing language for articulated plans; and~~

~~(H) Recommendations to the executive director.~~

(5) The NPATCH shall prioritize consideration of and make recommendations

on the following topics:

(a) ~~Facilitating a smooth transition to the articulated plan model, as described in sections 12-240-108 and 12-255-112 (4);~~

(b) ~~The framework for articulated plans, including creation of sample plans;~~

**SECTION 28.** In Colorado Revised Statutes, 12-240-108, **repeal** (2) and (3) as follows:

**12-240-108. Collaboration with advanced practice nurses with prescriptive authority - mentorships.** (2) ~~While serving as a mentor pursuant to section 12-255-112 (4)(b)(I), a physician shall assist the advanced practice nurse in developing an articulated plan for safe prescribing, as described in section 12-255-112 (4)(b)(II), and shall verify through his or her signature that the advanced practice nurse has developed an articulated plan in compliance with that section.~~

(3) ~~For purposes of an advanced practice nurse who obtained prescriptive authority prior to July 1, 2010, as described in section 12-255-112 (4)(c), or who has prescriptive authority from another state and obtains prescriptive authority in this state, as described in section 12-255-112 (4)(d), physicians may, and are encouraged to, assist those advanced practice nurses in developing the articulated plans required by those sections and verifying, through the physician's signature, the development of the required plans. The physician verifying an advanced practice nurse's articulated plan shall be practicing in Colorado and have education, training, experience, and active practice that corresponds with the role and population focus of the advanced practice nurse.~~

**SECTION 29.** In Colorado Revised Statutes, 12-240-121, **repeal** (1)(cc) as follows:

**12-240-121. Unprofessional conduct - definitions.** (1) "Unprofessional conduct" as used in this article 240 means:

(cc) ~~Verifying by signature the articulated plan developed by an advanced practice nurse pursuant to sections 12-240-108 and 12-255-112 (4) if the articulated plan fails to comply with the requirements of section 12-255-112 (4)(b)(II);~~

**SECTION 30.** In Colorado Revised Statutes, 12-280-103, **amend** (39)(c)(II)(C) as follows:

**12-280-103. Definitions - rules.** As used in this article 280, unless the context otherwise requires or the term is otherwise defined in another part of this article 280:

(39) "Practice of pharmacy" means:

(c) The provision of a therapeutic interchange selection or a therapeutically equivalent selection to a patient if, during the patient's stay at a nursing care facility or a long-term acute care hospital licensed under part 1 of article 3 of title 25, the selection has been approved for the patient:

(II) By one of the following health care providers:

(C) An advanced practice nurse prescriber licensed as a professional nurse under section 12-255-110, registered as an advanced practice nurse under section 12-255-111, and authorized to prescribe controlled substances or prescription drugs pursuant to section 12-255-112; ~~if the advanced practice nurse prescriber has developed an articulated plan to maintain ongoing collaboration with physicians and other health care professionals; and~~

**SECTION 31.** In Colorado Revised Statutes, 12-280-502, **amend** (1)(b)(III) as follows:

**12-280-502. Therapeutic interchange and therapeutically equivalent selections for nursing care facility or long-term acute care hospital patients - rules.** (1) A pharmacy used by a nursing care facility or a long-term acute care hospital licensed under part 1 of article 3 of title 25 may make a therapeutic interchange or a therapeutically equivalent selection for a patient if, during the patient's stay at the facility, the selection has been approved for the patient:

(b) By one of the following health care providers:

(III) An advanced practice nurse prescriber licensed as a professional nurse under section 12-255-110, registered as an advanced practice nurse under section 12-255-111, and authorized to prescribe controlled substances or prescription drugs pursuant to section 12-255-112. ~~if the advanced practice nurse prescriber has developed an articulated plan to maintain ongoing collaboration with physicians and other health care professionals.~~

**SECTION 32. Effective date.** This act takes effect July 1, 2020.

**SECTION 33. Safety clause.** The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety.

Approved: June 30, 2020