

S B

315

STATE OF ALASKA
THE LEGISLATURE

LEGISLATIVE AFFAIRS AGENCY
LEGISLATIVE REFERENCE LIBRARY

POUCH Y. STATE CAPITOL
JUNEAU, ALASKA 99811
907-465-3800

May, 1988

Copies of minutes listed below were originally included in this file. The minutes are available on the STAIRS database CMPR. In order to save space copies of minutes have not been left in the files.

Mary Van Nimwegen

House Judiciary:

1988 - April 27

HOUSE COMMITTEE REPORT

4/28

(7)

Date referred: 4/8/88

FURTHER REFERRALS:

Ruley

DATE: April 27, 1988

The Judiciary Committee has considered SB 315

"An Act relating to third party reimbursement for advanced nurse practitioner services."

RECOMMENDS:

- replace with _____ the same title
- attached amendment(s) a new title
- do pass
- do not pass
- no recommendation
- individual recommendations
- additional referral to the _____ Committee

ADOPTS: _____ letter of intent

ATTACHES NEW FISCAL NOTE(s):

- fiscal impact same as previous fiscal note published _____
- zero fiscal note same as previous zero fiscal note published 1/11/88
- zero with analysis

SIGNING DO PASS:

[Signature]

J. Milner

[Signature]

Robert L. Taylor

[Signature]

J. G. [Signature]

SIGNING OTHER RECOMMENDATIONS:

[Signature]

 Chairman's signature

DAVID T. WALKER
ATTORNEY AT LAW
MENDENHALL BUILDING
326 FOURTH STREET, SUITE B
JUNEAU, ALASKA 99801
(907) 586-3537

APR 21 1988

April 21, 1988

HAND DELIVERED

Representative John Sund
Chairman, House Judiciary Committee
Capitol Building, Room 120
Juneau, AK 99811

Re: Senate Bill 315

Dear Representative Sund:

I am the registered lobbyist for the Alaska Nurses' Association. The Association supports passage of Senate Bill 315 "An Act relating to third party reimbursement for advanced nurse practitioner services."

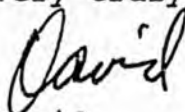
Reimbursement for advanced nurse practitioner services would benefit the public in at least two very important ways: (1) Health care costs will be reduced through increased competition to provide health care services; and (2) advanced nurse practitioners will be able to establish independent nursing practices and thereby improve the access to health care by consumers in under-served areas, especially in rural Alaska.

The Association is the largest nursing organization in Alaska. The Association has always appreciated the legislature's interest in providing quality health care and appreciates the opportunity to work with the legislature to improve health care, and contain health care costs.

We whole heartedly support Senate Bill 315 and request your consideration of this measure. If you have a question concerning the Association's position on this bill, or on

other matters relating to nursing or health care, please do not hesitate to call.

Very truly yours,

A handwritten signature in cursive script that reads "David".

David T. Walker

DTW:amw

cc: Finance Committee Members
Alaska Nurses' Association

Alaska State Legislature



SENATOR
ARLISS STURGULEWSKI

Chairman, Senate Community and Regional Affairs Committee
Vice-Chairman, Senate Judiciary Committee
Member, Senate Resources Committee

2937 SHELDON JACKSON STREET
ANCHORAGE, ALASKA 99508

While in Juneau
P. O. BOX V
JUNEAU, ALASKA 99811
(907) 465-3818

Senate

M E M O R A N D U M

08 April 1988

TO: Representative John Sund
Chairman, House Judiciary Committee

FROM: Senator Arliss Sturgulewski

RE: Senate Bill 315 *AS*

As you know, Senate Bill 315 has been referred to your committee as its second committee of referral in the House. It was heard in the House Health, Education, and Social Services Committee on 07 April 1988. I would greatly appreciate your scheduling this bill for a hearing as soon as is practicable.

In 1982 the nurse practice act was substantially revised. That revision took regulation of the practice of nursing away from the state medical board and put it under a separate board of nursing. Two years later, in 1984, the regulation requiring a collaborative relationship between a nurse and a physician was repealed. That meant that nurses could practice (according to their certifications) independently of physicians.

The changes made in the 1982 revision of the nurse practice act and allowing nurses to practice independently reflect changes in health care policy occurring nationwide and in Alaska. Nurses are now considered professionals in their own right and are moving into more advanced types of health care. There is a feeling that by allowing nurses to practice independently the cost of health care can be kept down and that it is more efficient to refer up from nurses than down from doctors.

This legislation adds advanced nurse practitioners to the list of health care providers in AS 29.36.090 (d) which are to be paid directly by third party payers (insurance companies) for

services provided within the scope of the providers' occupational license.

I am enclosing charts showing the types and practice settings of Alaskan nurse practitioners, a position statement by the organization of Alaskan Nurse Practitioners, and a statement from the American Academy of Nurse Practitioners summarizing findings of studies of nurse practitioners performances. In addition, I am attaching copies of the statutes and regulations pertaining to the practice of nursing.

Senate Bill 315 was heard before the Senate HESS Committee on 25 January 1988 and before the Senate Labor & Commerce Committee on 03 February 1988. There was testimony in support of this legislation at both hearings; the Department of Commerce and Economic Development and the Department of Health and Social Services have both testified and written position papers in support of this legislation and both departments have submitted zero fiscal notes.

Representatives of the nurses' organization have testified for this bill. The lobbyist for the doctors and the lobbyist for Blue Cross have indicated their respective clients have no objection to Senate Bill 315.

If there are any questions, please contact me or Melissa Fouse of my staff at 465-3818.

Table 1

Type of Nurse Practitioner Licensed and Residing in Alaska,
July, 1987*

Type of Practitioner	Number
Family Nurse Practitioner (includes 3 with other NP designations)	48
Certified Nurse Midwife (includes 7 with other NP designations)	25
Women's Health Care Practitioner (includes 3 with other NP designations)	22
Pediatric Nurse Practitioner	13
Adult Nurse Practitioner	9
Neonatal Nurse Practitioner	5
School Nurse Practitioner	5
Geriatric Nurse Practitioner	1
Psychiatric Nurse Practitioner	1
	129

*Each NP was given a single designation, although some were certified in several areas. If an NP was a CNM, this was considered her primary designation. If an FNP was also an ANP, the practitioner was included in the FNP group (since the FNP designation covers a broader age-range in clients).

Table 2

Practice Settings of Alaskan Nurse Practitioners

Type of Setting	Number
Currently unemployed	2
Retired	1
Independent Practice (whole or partial)	11
Clinic Setting	
Private Sector (MD on site)	31
Governmental or Native Corporation funded (MD may or may not be on site)	40
Hospital Setting	18
Faculty/Primary Teaching	9
School Nursing	6
Public Health Nursing	3
Corrections	2
Health Care Administration/Consulting	4
Infectious Disease Control Programs	2
	129

Table 3

Highest Nursing Degree of Licensed Nurse Practitioners, 1987

Type of Degree	Number
Diploma or Associate Degree	43
Bachelor's	38
Master's	48

AMERICAN ACADEMY OF NURSE PRACTITIONERS

179 PRINCETON BLVD. LOWELL, MA 01851 617 937-7343

Summarizing the findings of the numerous studies of nurse practitioner's performance in a variety of settings, the Congressional Budget Office concluded: Nurse practitioners have performed as well as physicians with respect to patient outcomes, proper diagnosis, management of specified medical conditions, and frequency of patient satisfaction.¹

Studies have shown that nurse practitioners rate high in consumer satisfaction.²

In a program initiated by the Pittsburgh Veterans Administration, before hiring a Pulmonary Clinical Nurse Specialist, they had 150 patients at home on oxygen. After evaluation by the Clinical Nurse Specialist, 50% of those patients were able to come off the oxygen. Of the remaining 50%, more up-to-date equipment was issued allowing better patient mobility and breathing.³

Review of studies comparing nurse practitioners and physicians led the Congressional Office of Technology Assessment to conclude: "NPs appear to have better communication, counseling, and interviewing skills than physicians have."⁴

The OTA study also states: "Malpractice insurance premiums and the incidence of malpractice claims indicate that patients are satisfied with NP care. Although insurance premiums for nurse practitioners are increasing, successful malpractice suits against them remain extremely rare."⁵

In a review of 26 studies comparing nurse practitioner performance to that of physicians, Prescott and Driscoll reported that nurse practitioners received higher scores than physicians on several variables. These included such areas as amount/depth of discussion regarding child health care, preventative health, & wellness; amount of advice, therapeutic listening, and support offered to patients; completeness of history and followup on history findings; completeness of physical examination and interviewing skills, and patient knowledge about the management plan given to them by the provider.⁶

In a review of 15 studies, Record concluded that between 75% and 80% of adult primary care services and up to 90% of pediatric primary care services could be performed by nurse practitioners.⁷

Productivity studies show that if a nurse practitioner is utilized efficiently, s/he could increase the productivity of a solo practice physician by approximately 70%.⁸

A review of several studies shows that the quality of care provided by NPs is as high as the care rendered by physicians for that range of skills which the NPs are trained to use. The quality of care comparison was measured by diagnosis, treatment, and patient outcomes.⁹

Robyn and Hadley report, ". . . it appears that patients respond favorably to the quality of treatment itself, as well as the tendency of nurse practitioners . . . to spend more time with them, to create a more relaxed atmosphere in which they (the patient) feel more comfortable asking questions which they might regard as too trivial for a physician."¹⁰

The Burlington Randomized Trial Study found that nurse practitioners made appropriate referrals when medical intervention was necessary.¹¹

Estimates of increases in the productivity of physician practices that include nurse practitioners range from 20 to 90 percent. The greatest increase in productivity results when the nurse practitioner has primary responsibilities for a subset of patients and refers complicated cases "up" to the physician rather than having the physician delegate routine problems "down" to the nurse practitioner.¹²

In the Burlington Randomized Trial Study, it was found that nurse practitioners were able to provide primary care services as safely and effectively as physicians.¹³

In a federal physician extender reimbursement experiment, it was found that physician/nurse practitioner teams provided a higher quality of care than physicians alone.¹⁴

References

- ¹ Congressional Budget Office, US Congress. **Physician Extenders: Their Current and Future Role In Medical Care Delivery.** Washington, D.C.: US Government Printing Office, April 1979.
- ² Kulal, Stephanie, Clever, Linda, "Acceptance of the Nurse Practitioner" *AM.J.Nursing* 1974 March pp 231-256.
- ³ Openbrier, Diana, **Cost Effectiveness and Quality Report with the use of a Pulmonary Clinical Nurse Practitioner In The Pittsburgh Veterans Administration.** Accepted for publication in the *Clinical Nurse Specialist* magazine. 1985.
- ⁴ Office of Technology Assessment, US Congress. **Nurse Practitioners, Physician Assistants, and Certified Nurse Midwives: A Policy Analysis.** Washington, D.C.: US Government Printing Office, December 1986, pp. 19.
- ⁵ *Ibid.* pp 20.
- ⁶ Prescott, P.A. and Driscoll, L.. "Evaluating Nurse Practitioner Performance". *Nurse Practitioner* 1980, Vol. 5, PP. 28-32.
- ⁷ Record, J. C. (ed.) **Provided Requirements, Cost Savings and The New Health Practitioner In Primary Care: National Estimate for 1990 Contract 231-77-0077.** Washington, D.C.: DEHEW, 1979
- ⁸ Robyn, Dorothy; Hadley, Jack, "National Health Insurance and the New Health Occupations: Nurse Practitioners and Physicians Assistants" *Journal of Health Politics, Policy and Law* Vol. 5, No. 3, Fall 1980. pp 451.
- ⁹ *Ibid.* pp 459.
- ¹⁰ *Ibid.* pp 450.
- ¹¹ Sackett, D.L. et al. "The Burlington Randomized Trial of the Nurse Practitioners: Health Outcomes of Patients. *Annals of Internal Medicine.* 80:137, 1974.
- ¹² Smith, K.R., **Health Practitioners: Efficiency. Utilization and Cost of Health Care.**
- ¹³ Spitzer, W. O. et al "The Burlington Randomized Trial of the Nurse Practitioner" *N.ENG.J.MED.* 290:251-256, Jan. 31, 1976.
- ¹⁴ System Sciences, Inc. **Nurse Practitioners and the Physicians Assistant Training and Deployment Study: Final Report** Contract No. HRA 230-75-0198. Bethesda, MD: System Sciences, Inc., September, 1975.

NURSE PRACTITIONERS

PROVIDERS OF QUALITY PRIMARY HEALTH CARE

DOCUMENTATION ON QUALITY OF SERVICE

POSITION STATEMENT ON
THIRD PARTY REIMBURSEMENT FOR NURSE PRACTITIONERS
Prepared by P.E.E.R., the Organization
of Alaskan Nurse Practitioners
August, 1987

P.E.E.R.'s Position

P.E.E.R. strongly supports the policy of issuing direct third party payment as reimbursement for professional services rendered by all licensed Nurse Practitioners (NPs) in Alaska. The services offered by NPs are legally recognized by the State of Alaska in specific Nurse Practice Acts, and are equivalent, and in some cases, more holistic in approach, than services provided by physicians in primary care. Reimbursement for NP services would benefit the public by:

1. enabling NPs to establish independent practices and clinics by providing a mechanism to finance their businesses. Currently, most NPs are employed by physicians or other entities, in part because they CANNOT receive direct third party payment.
2. offering more freedom of choice to the public in their selection of competent health care providers.
3. potential reduction in health care costs through competition for provision of services.
4. potential expansion of health care services of NPs in the private sector in under-served areas.

The Significant Contribution of Nurse Practitioners in Alaska

Licensed NPs in Alaska are in sufficient numbers to deserve recognition as an important group of health care providers: as of July, 1987, 129 NPs were licensed and claimed residence in the state. Another 40 NPs are estimated to work in federal governmental agencies (such as Elmendorf Hospital or the Indian Health Service); they are not required to apply for state licences in order to practice. This section describes only the licensed NPs.

Family nurse practitioners outnumber the other eight types of nurse practitioners in Alaska (Table 1). Nurse practitioners impact health care services in Alaska in a variety of work settings (Table 2). Only eleven are in independent practice; of those, six practice in rural settings. Independent practice became an option in December, 1984, with the passing of the new regulations that included placement of NPs under the sole jurisdiction of the Alaska Board of Nursing. Five of the independent practitioners are nurse midwives, who may collect fees from third party payers as stipulated in Alaska Statutes, Sec. 47.07.030--others may not, or do so with difficulty.

The majority of Alaskan NPs hold a Bachelor's or Master's

degree in nursing (86) in addition to their specialized nurse practitioner training, and certification through national certifying bodies (Table 3). In contrast to R.N. degree status for entry into NP training programs in the 1960s, the current national trend is for that training to take place in conjunction with Master's degree preparation, illustrated by the Family Nurse Practitioner program at the University of Alaska's College of Nursing and Health Sciences.

No studies have been conducted in Alaska to assess the quality of care provided by nurse practitioners, nor how their care might differ from that of a physician. Numerous studies in the lower 48, however, have shown that . . . "within their areas of competence, nurse practitioners provide care whose quality is equivalent to that of care provided by physicians", and that patients are generally satisfied with their care (US Congress, Office of Technology Assessment, 1986, pages 5-6). The American Academy of Nurse Practitioners provides a summary of the recent studies documenting the quality of services provided by NPs (addendum 1; also cites the OTA study mentioned above).

Alaskan NPs have demonstrated their willingness to work in under-served rural areas in Alaska: 51 of the currently employed 126 state-licensed NPs work in settings other than in Anchorage, Fairbanks, or Juneau. Their jobs entail multiple responsibilities and require high levels of expertise (see addendum 2 for an example of the rural practice of one NP).

The National Trends

Congress continues to consider a variety of proposals to mandate third party reimbursement for NPs. So far, federally mandated payments are limited to a few State Medicaid programs, Champus, and some programs in the Federal Employees Health Benefit Program (refer to Appendix B, US Congress, Office of Technology Assessment, 1986). At least 13 states currently permit direct payment for NP services, including Washington and Oregon, states also supporting the independent practice of NPs.

Conclusion and Our Recommendations

We contend that without direct reimbursement to NPs in the State of Alaska, the practice settings of NPs are limited, which in turn, effectively limits competition among providers, patient choices of providers, and ultimately, adversely impacts upon health care costs. We therefore recommend that:

1. third party insurers voluntarily offer to provide direct reimbursement for NP services, and/or that
2. the state legislature amend the statutes to mandate such reimbursement to all licensed NPs, not just to nurse midwives as is now the case.

Thanks is extended to Gail McGuill, Executive Director, Alaska Board of Nursing, for her assistance in obtaining the NP data.

rs.

Chapter 68. Nursing.

Article

2. Examination and Licensing (§§ 08.68.220, 08.68.270)

ion

Article 2. Examination and Licensing.

Section
220. Fees

Section
270. Grounds for denial, suspension, or
revocation

Sec. 08.68.220. Fees. The Department of Commerce and Economic Development shall set fees under AS 08.01.065 for each of the following:

- (1) registered nursing:
 - (A) application;
 - (B) license by examination;
 - (C) license by endorsement;
 - (D) license renewal;
 - (E) temporary permit;
- (2) practical or vocational nursing:
 - (A) application;
 - (B) license by examination;
 - (C) license by endorsement;
 - (D) license renewal;
 - (E) temporary permit.

(§ 13 ch 90 SLA 1957; am § 1 ch 80 SLA 1960; am § 5 ch 94 SLA 1968; am § 2 ch 81 SLA 1969; am §§ 3, 4 ch 37 SLA 1970; am § 13 ch 14 SLA 1982; am § 40 ch 37 SLA 1985)

Effect of amendments. — The 1985 amendment rewrote this section, which included a fee schedule. ment took effect on May 26, 1986 under the amendment of ch. 37, SLA 1985, as amended by ch. 37, SLA 1986.

Effective dates. — The 1985 amend-

Sec. 08.68.270. Grounds for denial, suspension, or revocation.

The board may deny, suspend or revoke the license of a person who

- (1) has obtained or attempted to obtain a license to practice nursing by fraud or deceit;
- (2) has been convicted of a felony or other crime if the felony or other crime is substantially related to the qualifications, functions or duties of the licensee;
- (3) *[Repealed, § 18 ch 14 SLA 1982.]*
- (4) habitually abuses alcoholic beverages, or illegally uses controlled substances as defined by AS 11.71.900(4);
- (5) has impersonated a registered or practical nurse;

otor vehicles,
g in business
Public Safety.
9 ch 81 SLA

biennially" for
ally."

lication for
istration fee
LA 1959; am

annual registra-

shall renew
l every two
4)

y this chapter
of each year."

r and file a
0. A dealer
of a misde-
more than
0; am § 12

a" for "any"
ond sentence.

(6) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;

(7) practices or attempts to practice nursing while afflicted with physical or mental illness, deterioration, or disability which interferes with the individual's performance of nursing functions;

(8) is guilty of unprofessional conduct as defined by regulations adopted by the board;

(9) has wilfully or repeatedly violated any of the provisions of this chapter or regulations adopted under it;

(10) is professionally incompetent;

(11) denies care or treatment to a patient or person seeking assistance if the sole reason for the denial is the failure or refusal of the patient or person seeking assistance to agree to arbitrate as provided in AS 09.55.535(a). (§ 20 ch 90 SLA 1957; am § 8 ch 129 SLA 1974; am § 30 ch 177 SLA 1978; am § 18 ch 14 SLA 1982; am § 29 ch 6 SLA 1984)

Effect of amendments. — The 1984 amendment substituted "controlled substances as defined by AS 11.71.900(4)" for "hallucinogenic or stimulant drugs as defined by AS 17.12.150(3) or narcotic drugs as defined by AS 17.10.230(13)" in paragraph (4).

Chapter 70. Nursing Home Administrators.

Section

20. Membership board; source of appointments; term of office

Section

40. Board meetings: Quorum
150. Fees

Sec. 08.70.020. Membership board; source of appointments; term of office. (a) The board consists of three members: one nursing home administrator licensed under this chapter and practicing in the state, a registered nurse licensed in the state and having no direct financial interest in any nursing home, and one person from the general public.

(b) Board members are appointed by the governor.

(c) Board members serve staggered terms of four years or until their successor is appointed, except that a member appointed to a vacated term serves the duration of that term. A person who has served two successive complete terms may not be reappointed until four years from the expiration of the second term. (§ 1 ch 123 SLA 1975; am § 1 ch 77 SLA 1977; am §§ 3, 4 ch 141 SLA 1980; am § 2 ch 99 SLA 1986)

duct that has
a client or in

afflicted with
high interferes

is;
by regulations

visions of this

seeking assis-
refusal of the
te as provided
29 SLA 1974;
§ 29 ch 6 SLA

or narcotic drugs
30(13)" in para-

ators.

rum

pointments;
one nursing
ticing in the
ng no direct
om the gen-

rs or until
ointed to a
n who has
ointed until
h 123 SLA
; am § 2 ch

Cross references. — For transitional provisions related to the 1986 amendments to (a) of this section, see § 4, ch. 99, SLA 1986, in the Temporary and Special Acts.

Effect of amendments. — The 1986

amendment, effective June 7, 1986, in subsection (a) substituted "three" for "five," "one" for "two," "administrator" for "administrators" and "one person" for "two persons."

Sec. 08.70.040. Board meetings: Quorum. The board shall meet at least annually. A majority of the board constitutes a quorum. (§ 1 ch 123 SLA 1975; am § 3 ch 99 SLA 1986)

Effect of amendments. — The 1986 amendment, effective June 7, 1986, substituted "annually" for "semiannually" at the end of the first sentence.

Sec. 08.70.150. Fees [See effective date note]. The department shall set fees under AS 08.01.065 for examination and investigation of persons applying for a license, initial license, and license renewal. (§ 1 ch 123 SLA 1975; am § 11 ch 141 SLA 1980; am § 41 ch 37 SLA 1985)

Effect of amendments. — The 1985 amendment rewrote this section, which included a fee schedule.

Effective dates. — The 1985 amend-

ment to this section is effective upon the adoption of regulations under AS 08.01.065. For the law until that date, see the main pamphlet.

Chapter 71. Dispensing Opticians.

Article

2. Licensing (§§ 08.71.110 — 08.71.130)

5. General Provisions (§ 08.71.220)

Article 2. Licensing.

Section

110. Qualifications of applicants for examination

Section

120. Fees

130. Renewal of license

Sec. 08.71.110. Qualifications of applicants for examination.

(a) A person is entitled to take the examination who

(1) has had education equivalent to four years attendance at a high school;

(2) has either

(A) completed at least 6,000 hours of training as an apprentice, or

(B) been engaged for at least 6,000 hours as a practicing optician in good standing in a state, territory, district or possession of the United States; and

(3) has paid the required examination fee.

(b) Graduation from an associate degree program in a recognized school or college of opticianry may be substituted for 4,000 of the 6,000 hours of experience required by (a)(2) of this section. (§ 1 ch 45 SLA 1973; am § 4 ch 56 SLA 1980; am § 2 ch 145 SLA 1986)

NOTES TO DECISIONS

Cited in Allison v. State, Sup. Ct. Op. No. 1703 (File No. 3716), 583 P.2d 813 (1978).

Collateral references. — 61 Am. Jur. 70 C.J.S. Physicians and Surgeons. 2d, Physicians, Surgeons and Other §§ 6-11, 13. Healers, §§ 2, 40, 41.

Article 1. Board of Nursing.

Section	Section
10. Creation and membership of Board of Nursing	80. Meetings
20. Term of office	90. Quorum
30. Limitation on term of service	100. Duties and powers of board
40. [Repealed]	110. [Repealed]
50. Removal of board members	111. Executive secretary of board
60. Qualifications of registered nurse and licensed practical nurse board members	120 — 130. [Repealed]
70. Election of officers	140. Applicability of Administrative Procedure Act
	150. Expenses

Sec. 08.68.010. Creation and membership of Board of Nursing. There is created a Board of Nursing, consisting of seven members appointed by the governor. One member shall be a licensed practical nurse currently involved in institutional nursing service, one member shall be a registered nurse engaged in baccalaureate nursing education; three members shall be registered nurses at large, and two members shall be persons who have no direct financial interest in the health care industry. (§ 3 ch 90 SLA 1957; am § 1 ch 67 SLA 1973; am § 15 ch 102 SLA 1976; am § 1 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment, in the second sentence, inserted "a licensed practical nurse" and "members shall be" and substituted "shall be a registered nurse engaged in baccalaureate nursing education, three members shall be registered nurses" for "in community or public health nursing and two members in basic or continuing nursing education, one nurse."

Editor's notes. — Section 26 of ch. 14, SLA 1982 provides: "A member of the Board of Nursing appointed before July 1, 1982 may continue until his appointment under AS 08.68.010 — 08.68.030 expires, notwithstanding AS 08.68.010 as amended in sec. 1 of this Act. Appointments to the Board of Nursing made after July 1, 1982 shall be in accordance with AS 08.68.010 as enacted in sec. 1 of this Act."

Sec. 08.68.020. Term of office. Members serve staggered terms of five years and until their successors are appointed. The terms of the public members on the board shall be set so that they do not expire at the same time. Vacancies on the board shall be filled for the unexpired term. (§ 3 ch 90 SLA 1957; am § 16 ch 102 SLA 1976)

Cross references. — As to notes to AS 09.55.536 and Alas. Const., constitutionality of ch. 102, SLA 1976, see art. II, § 14.

Sec. 08.68.030. Limitation on term of service. A board member may not serve more than two consecutive terms. Time served in filling an unexpired vacancy of two years or less is not considered a term. (§ 3 ch 90 SLA 1957)

Sec. 08.68.040. Source of appointments.

Repealed by § 46 ch 102 SLA 1976.

Editor's notes. — The repealed section derived from § 3, ch. 90, SLA 1957.

Sec. 08.68.050. Removal of board members. A member of the board may be removed from office by the governor for cause. The board may by regulation provide that unexcused absences from meetings is cause for removal. (§ 3 ch 90 SLA 1957; am § 2 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment rewrote the section, which formerly read: "The governor may remove any board member for neglect of duty required by law, or for unprofessional or dishonorable conduct after a fair and impartial hearing."

Sec. 08.68.060. Qualifications of registered nurse and licensed practical nurse board members. The five members of the board who are nurses shall be licensed in the state, and shall have been actively engaged in nursing for not less than four years before appointment, three years of which were within the five years immediately preceding appointment. (§ 4 ch 90 SLA 1957; am § 17 ch 102 SLA 1976; am § 3 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment deleted "professional nurses" following "shall be licensed," substituted "three years" for "two years," and inserted "immediately."

Sec. 08.68.070. Election of officers. The board shall annually elect a chairman and secretary from among its members. (§ 5 ch 90 SLA 1957; am § 4 ch 14 SLA 1982)

Surgeons.

rd
ard
ministrative

Nursing.
members
practical
member
g educa-
wo mem-
he health
am § 15

6 of ch. 14,
ber of the
ore July 1,
pointment
30 expires,
is amended
ents to the
uly 1, 1982
08.68.010

Effect of amendments. — The 1982 amendment substituted "secretary" for "secretary-treasurer."

Sec. 08.68.080. Meetings. The board shall meet at least four times a year. (§ 5 ch 90 SLA 1957; am § 5 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "four times" for "once."

Sec. 08.68.090. Quorum. A majority of the board constitutes a quorum. (§ 5 ch 90 SLA 1957)

Sec. 08.68.100. Duties and powers of board. (a) The board shall

(1) adopt regulations necessary to implement this chapter, including regulations pertaining to practice as an advanced nurse practitioner and a nurse anesthetist;

(2) approve curricula and adopt standards for basic education programs that prepare persons for licensing under AS 08.68.190;

(3) provide for surveys of the basic nursing education programs in the state at the times it considers necessary;

(4) accredit education programs that meet the requirements of this chapter and of the board, and deny, revoke, or suspend accreditation of education programs for failure to meet the requirements;

(5) examine, license, and renew the licenses of qualified applicants;

(6) prescribe requirements for competence before a former nurse may resume the practice of nursing under this chapter;

(7) keep a record of its proceedings, and submit annual reports to the governor and legislature;

(8) define by regulation the qualifications and duties of the executive secretary and delegate authority to the executive secretary that is necessary to conduct board business.

(b) The board may

(1) conduct hearings upon charges of alleged violations of this chapter or regulations adopted under it;

(2) invoke, or request the department to invoke, disciplinary action against a licensee;

(3) prescribe requirements for competence to continue practice. (§ 6(1)(2)(3) ch 90 SLA 1957; am § 6 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment rewrote this section. Formerly the provisions now appearing in paragraphs (2) and (3) of subsection (a) both appeared in paragraph (3) and the provisions now appearing in paragraph (1) of subsection (b) appeared in paragraph (5). The provisions of paragraph (8) of subsection (a) and of paragraphs (2) and (3) of subsection (b) were added by the amendment.

Editor's notes. — Section 28, ch. 14, SLA 1982, provides: "Administrative regulations adopted jointly by the Board of Nursing and the State Medical Board under AS 08.68 which are in effect on July 1, 1982 remain in effect until amended or repealed by the Board of Nursing as provided by law."

Sec. 08.68.110. Appointment of executive officer.
Repealed by § 3 ch 59 SLA 1966.

Editor's notes. — The repealed section derived from § 64, ch. 90, SLA 1957.

Sec. 08.68.111. Executive secretary of board. (a) The Department of Commerce and Economic Development, in consultation with the Board of Nursing, shall employ a licensed, registered nurse, who is not a member of the board, to serve as executive secretary of the board.

(b) The executive secretary shall perform duties as prescribed by the board.

(c) Repealed by § 29 ch 14 SLA 1982.

(d) Repealed by § 1 ch 129 SLA 1974. (§ 1 ch 47 SLA 1967; am § 1 ch 81 SLA 1969; am § 2 ch 67 SLA 1973; am § 1 ch 129 SLA 1974; am § 49 ch 218 SLA 1976; am §§ 7, 29 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "executive secretary" for "executive officer" near the end of subsection (a); rewrote subsection (b), which concerned the qualifications of the executive officer; and repealed subsection (c), which specified the duties of the executive officer.

Secs. 08.68.120 — 08.68.130. Bond; disposition of fees.
Repealed by § 3 ch 59 SLA 1966.

Editor's notes. — The repealed sections derived from art. IV, ch. 90, SLA 1957.

Sec. 08.68.140. Applicability of Administrative Procedure Act. The board shall comply with the Administrative Procedure Act (AS 44.62).

Sec. 08.68.150. Expenses. Members of the board are entitled to the per diem and travel expenses allowed by law. (§ 7 ch 90 SLA 1957)

Article 2. Examination and Licensing.

Section	Section
160. License required	240. Nurses licensed or holding temporary permits under previous law
165. [Repealed]	250. [Repealed]
170. Qualifications of registered or practical nurse applicants	251. Lapsed licenses
180. Qualifications of practical nurse applicants	260. [Repealed]
190. License by examination	265. Scope of practice of practical nurses
200. License by endorsement	270. Grounds for denial, suspension, or revocation
210. Temporary permits	275. Limits or conditions on license: discipline
220. Fees	276. Continuing competence required
230. Use of title and abbreviation	

Collateral references. — 61 Am. Jur. 70 C.J.S. Physicians and Surgeons, 2d, Physicians, Surgeons and Other §§ 8, 10, 12. Healers. §§ 86, 94.

Sec. 08.68.160. License required. A person practicing or offering to practice professional or practical nursing in the state shall submit evidence of qualification to practice, and shall be licensed under this chapter. (§ 1 ch 90 SLA 1957)

Editor's notes. — This section was redrafted by the revisor of statutes to remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, SLA 1982.

Sec. 08.68.165. Malpractice insurance.

Repealed by § 40 ch 177 SLA 1978.

Editor's notes. — The repealed section derived from § 18, ch 102, SLA 1976. As to purpose of repealing act, see § 1, ch. 177, SLA 1978 as amended by § 7, ch. 46, SLA 1982, in the 1982 Temporary and Special Acts and Resolves.

Sec. 08.68.170. Qualifications of registered or practical nurse applicants. An applicant for a license to practice registered or practical nursing shall submit to the board on forms and in the manner prescribed by the board, written evidence, verified by oath, that the applicant has successfully completed (1) a registered or practical nursing education program accredited by the board; or (2) a registered or practical nursing education program outside the state which, in the opinion of the board, meets the minimum requirements of the board for an accredited program of study in this state at the time the applicant graduated; or (3) a registered or practical nursing education program accredited by the National League for Nursing at the time the applicant graduated. (§ 8 ch 90 SLA 1957; am § 2 ch 129 SLA 1974; am § 1 ch 105 SLA 1976; am § 8 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "registered or practical" for "professional" in four places, and deleted "completed an approved four year high school course of study or equivalent as determined by the appropriate educational agency, and has" preceding "successfully completed" near the middle of the section.

Sec. 08.68.180. Qualifications of practical nurse applicants. (a) Repealed by § 29 ch 14 SLA 1982.

(b) A qualified student of the Mt. Edgecombe School of Practical Nursing who was graduated before January 1, 1959, and had eighth grade pretraining is eligible for a license. (§ 9 ch 90 SLA 1957; am § 3

Surgeons.

offering
ll submit
nder this

hapter 58.

by § 7, ch.
porary and

al nurse
l or prac-
manner
that the
practical
egistered
ch, in the
board for
applicant
program
he appli-
4; am § 1

ppropriate
preceding
the middle

ants. (a)

Practical
id eighth
7; am § 3

ch 129 SLA 1974; am § 2 ch 105 SLA 1976; am § 29 ch 14 SLA 1982

Effect of amendments. — The 1982 amendment repealed subsection a), which read: "An applicant for a license to practice practical nursing shall submit to the board on forms prescribed by the board written evidence, verified by oath, that the applicant has completed the tenth grade or its equivalent as determined by the appropri-

ate educational agency, is not less than 18 years of age, and has successfully completed (1) a practical nursing education program outside the state which, in the opinion of the board, meets the minimum requirements of the board for an accredited program of study in this state"

Sec. 08.68.190. License by examination. The applicant shall pass a written examination as prescribed by the board. The board shall issue a license to an applicant who passes the examination to practice registered or practical nursing provided the other qualifications outlined in AS 08.68.170 and 08.68.180 are also met. The board shall conduct examinations annually and as often as it considers necessary in each region of the state. (§ 10 ch 90 SLA 1957; am § 9 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "as prescribed by the board" for "in the subjects which the board prescribes" in the first sentence, substituted "registered or practical

nursing" for "professional nursing or practical nursing" in the second sentence, and added "in each region of the state" to the end of the third sentence.

Sec. 08.68.200. License by endorsement. The board may issue a license by endorsement to practice as a registered or practical nurse, whichever is appropriate, to an applicant who

(1) is licensed as either a registered or practical nurse under the laws of another state or territory, if in the opinion of the board the applicant meets the qualifications required for licensing in the state, and meets the requirements of AS 08.68.170; or

(2) meets the requirements of AS 08.68.170 and has successfully completed the Canadian Nurses' Association Testing Service examination if the board determines it is comparable to the examination administered by this state. (§ 11 ch 90 SLA 1957; am § 1 ch 37 SLA 1970; am § 4 ch 129 SLA 1974; am § 10 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "as a registered or practical nurse" for "professional nursing or to practice practical nursing" in the introductory language, added the paragraph (1) designation, substituted "regis-

tered or practical nurse" for "professional nurse or a practical nurse" in paragraph (1), substituted "AS 08.68.170; or" for "either AS 08.68.170 or 08.68.180, whichever is applicable" at the end of paragraph (1), and added paragraph (2).

Sec. 08.68.210. Temporary permits. (a) The board may issue a temporary permit, nonrenewable and valid for a period not exceeding four months, to an applicant for a license by endorsement if the applicant

- (1) submits proof satisfactory to the board that the applicant is currently licensed in another state or territory.
- (2) meets the requirements of AS 08.68.170, and
- (3) pays the required fee.

(b) The board may issue a nonrenewable permit to an applicant for license by examination if (1) the applicant meets the qualifications of AS 08.68.170; or (2) the applicant is a graduate of a foreign school of nursing and has successfully completed the examination administered by the Commission on Graduates of Foreign Nursing Schools. The permit will be valid for a period not extending beyond the time when the results are published of the first examination the applicant is eligible to take after the permit is issued. (§ 11 ch 90 SLA 1957; am § 2 ch 37 SLA 1970; am § 5 ch 129 SLA 1974; am §§ 11, 12 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "requirements of AS 08.68.170" for "requirements of either AS 08.68.170 or 08.68.180, whichever is applicable" in paragraph (2) of subsection (a), and in the first sentence of subsection (b), substituted "(1) the applicant meets" for "he meets" and the language beginning

"(2) the applicant is a graduate" for "AS 08.68.180, whichever is applicable, and pays the required fee."

Editor's notes. — This section was redrafted by the revisor of statutes to remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, SLA 1982.

Sec. 08.68.220. Fees. The following fees shall be imposed under this chapter when applicable:

- (1) for registered nurses:
 - (A) application fee \$30
 - (B) license by examination fee 20
 - (C) license by endorsement fee 20
 - (D) biennial license renewal fee 20
- (2) for practical or vocational nurses:
 - (A) application fee \$20
 - (B) license by examination fee 10
 - (C) license by endorsement fee 10
 - (D) biennial license renewal fee 20

(§ 13 ch 90 SLA 1957; am § 1 ch 80 SLA 1960; am § 5 ch 94 SLA 1968; am § 2 ch 81 SLA 1969; am §§ 3, 4 ch 37 SLA 1970; am § 13 ch 14 SLA 1982)

See Supp

Effect of amendments. — The 1982 amendment substituted "registered nurses" for "professional or registered nursing" in the introductory language of paragraph (1); increased the fees in subparagraphs (1)(A) and (D) from \$20 and

\$15 to \$30 and \$20, respectively; substituted "nurses" for "nursing" in the introductory language of paragraph (2); and changed the fees in subparagraphs (2)(A) - (D) from \$15 to \$20, \$10, \$10, and \$20, respectively.

Sec. 08.68.230. Use of title and abbreviation. (a) A person licensed to practice registered nursing in the state may use the title

ent is cur-

"licensed professional nurse," "registered nurse," and the abbreviation "R.N."

licant for
ications of
school of
nistered
ools. The
me when
plicant is
7; am § 2
h 14 SLA

(b) A person licensed to practice practical nursing in the state may use the title "licensed practical nurse," or "licensed vocational nurse," and the abbreviation "L.P.N." or "L.V.N." (§ 14 ch 90 SLA 1957; am § 14 ch 14 SLA 1982)

ite" for "AS
licable, and
section was
statutes to
conformity
Chapter 58.

Effect of amendments. — The 1982 amendment substituted "registered nursing" for "professional nursing" in subsection (a).

Sec. 08.68.240. Nurses licensed or holding temporary permits under previous law. A person holding a license to practice registered or practical nursing in the state under prior law is considered licensed as a registered or practical nurse. (§ 15 ch 90 SLA 1957; am § 15 ch 14 SLA 1982)

ied under

Effect of amendments. — The 1982 amendment substituted "registered" for "professional" in two places.

Sec. 08.68.250. Renewal of license.
Repealed by § 3 ch 81 SLA 1969.

... \$30
... 20
... 20
... 20

... \$20
... 10
... 10
... 20
SLA 1968;
h 14 SLA

Editor's notes. — The repealed section derived from § 16, ch. 90, SLA 1957; § 2, ch. 80, SLA 1960; § 7, ch. 94, SLA 1968.

Sec. 08.68.251. Lapsed licenses. (a) A lapsed license may be reinstated if it has not remained lapsed for more than five years by payment of the license fees for the period during which the license has lapsed.

(b) If a license is lapsed for more than five years,

(1) the board shall require the applicant to complete a course of study approved by the board or to pass an examination prescribed by the board, and to pay the fees prescribed by this chapter; or

(2) if the board determines that the person applying for reinstatement was actively employed in nursing in another state during the time that the license has lapsed in this state, the license that has lapsed may be reinstated by payment of fees as required by AS 08.01.100(b). (§ 3 ch 81 SLA 1969; AS 08.68.250; am § 6 ch 129 SLA 1974; am § 16 ch 14 SLA 1982)

ely; substi-
g" in the
agraph (2);
paragraphs
10, §10, and

Effect of amendments. — The 1982 amendment rewrote this section.

Editor's notes. — Section 27 of ch. 14, SLA 1982, provides: "A nurse who holds an

inactive license issued before July 1, 1982 shall either make the license active by the next renewal date or allow the license to lapse."

A person
the title

Sec. 08.68.260. Inactive nurses.

Repealed by § 29 ch 14 SLA 1982.

Cross references. — For provisions as to lapsed licenses, see AS 08.68.251.

Editor's notes. — The repealed section derived from § 16, ch. 90, SLA 1957; § 2, ch. 80, SLA 1960; § 4, ch. 81, SLA 1969; § 7 ch. 129, SLA 1974.

Section 27 of ch. 14, SLA 1982, provides: "A nurse who holds an inactive license issued before July 1, 1982 shall either make the license active by the next renewal date or allow the license to lapse."

Sec. 08.68.265. Scope of practice of practical nurses. A practical nurse shall work under the supervision of a licensed registered nurse, a licensed physician, or a licensed dentist. (§ 17 ch 14 SLA 1982)

Sec. 08.68.270. Grounds for denial, suspension, or revocation. The board may deny, suspend or revoke the license of a person who

- (1) has obtained or attempted to obtain a license to practice nursing by fraud or deceit;
- (2) has been convicted of a felony or other crime if the felony or other crime is substantially related to the qualifications, functions or duties of the licensee;
- (3) Repealed by § 18 ch 14 SLA 1982.
- (4) habitually abuses alcoholic beverages, or illegally uses hallucinogenic or stimulant drugs as defined by AS 17.12.150(3) or narcotic drugs as defined by AS 17.10.230(13);
- (5) has impersonated a registered or practical nurse;
- (6) has intentionally or negligently engaged in conduct that has resulted in a significant risk to the health or safety of a client or in injury to a client;
- (7) practices or attempts to practice nursing while afflicted with physical or mental illness, deterioration, or disability which interferes with the individual's performance of nursing functions;
- (8) is guilty of unprofessional conduct as defined by regulations adopted by the board;
- (9) has wilfully or repeatedly violated any of the provisions of this chapter or regulations adopted under it;
- (10) is professionally incompetent;
- (11) denies care or treatment to a patient or person seeking assistance if the sole reason for the denial is the failure or refusal of the patient or person seeking assistance to agree to arbitrate as provided in AS 09.55.535(a). (§ 20 ch 90 SLA 1957; am § 8 ch 129 SLA 1974; am § 30 ch 177 SLA 1978; am § 18 ch 14 SLA 1982)

*See
supp*

Effect of amendments. — The 1978 amendment added paragraph (11).

The 1982 amendment deleted "after compliance with the Administrative Procedure Act (AS 44.62.)" following "The board" in the introductory language;

added the language beginning "or other crime" to the end of paragraph (2); repealed former paragraph (3), which read "has been convicted of a crime involving moral turpitude"; rewrote paragraphs (4), (6), and (7), which read "is habitually

1. provides:
the license
shall either
the next
to lapse."

A prac-
titioner
(A 1982)

ocation.
on who
nursing

or other
duties

ly uses
.50(3) or

that has
ent or in

ted with
interferes

ulations

is of this

ing assis-
tance of the
provided
1974; am

"or other
paragraph (2);
which read
involving
paragraphs (4),
habitually

intoxicated or is addicted to the use of narcotics," is guilty, in the opinion of the board, of negligence which has resulted in serious injury to a patient," and "is mentally ill or mentally incompetent," respectively; substituted "registered" for "professional" in paragraph (5); added "as defined by regulations adopted by the board" at the end of paragraph (8); added "or regulations adopted under it" to the end of paragraph (9); deleted "considered by the board to be" preceding "profes-

sionally" in paragraph (10); and substituted "agree to arbitrate" for "execute and agreement to arbitrate a dispute, controversy, or issue arising out of the care or treatment" in paragraph (11).

Editor's notes. — AS 17.12.150 and 17.10.230, referred to in paragraph (4), were repealed by § 26, ch. 45, SLA 1982. For present provisions concerning controlled substances, see AS 11.71.010 — 11.71.900.

NOTES TO DECISIONS

Cited in *Leege v. Martin*, Sup. Ct. Op. No. 131 (File No. 256), 379 P.2d 447 (1963).

Collateral references. — 61 Am. Jur. 2d Physicians, Surgeons and Other Healers, §§ 44, 48, 49, 62.

70 C.J.S., Physicians and Surgeons, §§ 16-18.

Cancellation or suspension irrespective of licensee's personal fault, validity of statute or rule making specified conduct or condition the ground for. 3 ALR2d 107.

Nolo contendere or non vult, statute authorizing revocation of license upon conviction as applicable to conviction based on plea of. 89 ALR 2d 606.

Revocation of nurse's license to practice profession. 55 ALR3d 1141.

Sec. 08.68.275. Limits or conditions on license; discipline. (a) In addition to action under AS 08.68.270, upon a finding that by reason of demonstrated problems of competence, experience, education, or health the authority to practice nursing should be limited or conditioned or the practitioner disciplined, the board may reprimand, censure, place on probation, restrict practice by specialty, procedure or facility, require additional education or training, or revoke or suspend a license.

(b) Repealed by § 19 ch 14 SLA 1982.

(c) The board shall seek consistency in the application of disciplinary sanctions. A significant departure from earlier disciplinary decisions of the board that involve similar situations shall be explained in findings of fact or orders made by the board. (§ 18 ch 102 SLA 1976; §§ 19, 29 ch 14 SLA 1982)

Effect of amendments. — The 1982 (AS 44.62) applies to any action taken by the board under this section." and added subsection (c). read "The Administrative Procedure Act

Sec. 08.68.276. Continuing competence required. A license to practice nursing may not be renewed unless the nurse has complied with continuing competence requirements established by the board by regulation. (§ 20 ch 14 SLA 1982)

Article 3. Nursing Education Programs.

Section	Section
280. Nursing education program prohibited unless accredited	300 — 320 [Repealed]
290. Application for accreditation	330. List of accredited programs

Sec. 08.68.280. Nursing education program prohibited unless accredited. No person, institution or agency may conduct a nursing education program that prepares persons for examination, licensing, authorization for specialized practice, or a graduate degree unless the program is accredited by the board. A program may be accredited by the board only if it is established through an accredited postsecondary educational institution. (§ 18 ch 90 SLA 1957; am § 21 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "that prepares persons for examination, licensing, authorization for specialized practice, or a graduate degree" for "for professional or practical nurses" in the first sentence and added the second sentence.

Sec. 08.68.290. Application for accreditation. An institution desiring to conduct a nursing education program to prepare registered or practical nurses shall apply to the board and submit evidence that (1) it is prepared to carry out the curriculum approved by the board for registered nursing or for practical nursing, and that (2) it is prepared to meet other standards established by law and by the board. (§ 17 ch 90 SLA 1957; am § 22 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment substituted "registered" for "professional" in two places and deleted "as the case may be" following "for practical nursing" in item (1).

Secs. 08.68.300 — 08.68.320. Accreditation by board.
 Repealed by § 29 ch 14 SLA 1982.

Editor's notes. — The repealed sections derived from § 18, ch. 90, SLA 1957.

Sec. 08.68.330. List of accredited programs. The board shall prepare, maintain, and from time to time publish a list of accredited nursing education programs in the state. (§ 19 ch 90 SLA 1957)

Article 4. Unlawful Acts.

<p>Section 340. Violations 350. [Repealed] 360. Unlicensed practice a public nuisance</p>	<p>Section 370. Application for injunction 380. Issuance of injunction 390. Remedy not exclusive</p>
---	--

Sec. 08.68.340. Violations. (a) It is a class B misdemeanor for a person to

- (1) practice nursing under a diploma, license, or record that is unlawfully obtained, signed, or issued;
- (2) practice or offer to practice nursing without a license, unless the person gives necessary aid to the ill, injured, or infirm in an emergency;
- (3) employ as a nurse a person who is not licensed to practice nursing;
- (4) use in connection with the person's name a designation that implies that the person is a licensed nurse unless the person is licensed;
- (5) practice nursing during the time that the person's license is suspended or revoked;
- (6) practice nursing with knowledge that the person's license has lapsed;
- (7) conduct a nursing education program and represent or imply that it is accredited by the board, unless the program has been accredited by the board.

(b) It is a class A misdemeanor for a person to knowingly or intentionally do any of the acts described in (a)(1) - (5) and (7) of this section.

(c) It is a violation for a person to practice nursing during the time that the person's license has lapsed if the person does not know that the license has lapsed. (§§ 1, 22 ch 90 SLA 1957; am § 9 ch 129 SLA 1974; am § 23 ch 14 SLA 1982)

Cross references. — For penalties for misdemeanors, see AS 12.55.135.
Effect of amendments. — The 1982 amendment rewrote this section.
Collateral references. — Practicing medicine, surgery, dentistry, optometry, podiatry, or other healing arts without license as a separate or continuing offense. 99 ALR2d 654.

Sec. 08.68.350. Punishment for misdemeanor.
 Repealed by § 29 ch 14 SLA 1982.

Cross references. — For penalties for misdemeanors, see AS 12.55.135.
Editor's notes. — The repealed section derived from § 22, ch. 90, SLA 1957.

Sec. 08.68.360. Unlicensed practice a public nuisance. The practice of professional or practical nursing for compensation by a person who is not licensed, or whose license is suspended, or revoked, or expired, is declared to be inimical to the public welfare and to constitute a public nuisance. (art VIII ch 90 SLA 1957)

unless
 nursing
 nursing,
 unless the
 provided by
 primary
 § SLA

onal or
 nce and

tution
 stered
 e that
 rd for
 pared
 17 ch

r prac-

pre-
 lited

Sec. 08.68.370. Application for injunction. The board may apply for an injunction in a competent court to enjoin a person not licensed or whose license is suspended or revoked or expired from practicing professional or practical nursing. The court may issue a temporary injunction enjoining the defendant from practicing professional or practical nursing. (art VIII ch 90 SLA 1957)

Sec. 08.68.380. Issuance of injunction. If it is established that the defendant has been or is practicing professional or practical nursing without a license or has been or is practicing nursing after the defendant's license has been suspended or revoked, or has expired, the court may enjoin the defendant from further practice. (art VIII ch 90 SLA 1957)

Editor's notes. — This section was redrafted by the revisor of statutes to remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, SLA 1982.

Sec. 08.68.390. Remedy not exclusive. If a person violates an injunction issued under this section, the person may be punished for contempt of court. The injunction proceeding is in addition to other penalties and remedies provided in this chapter. (art VIII ch 90 SLA 1957)

Editor's notes. — This section was redrafted by the revisor of statutes to remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, SLA 1982.

Article 5. General Provisions.

Section

400. Exceptions to application of chapter

410. Definitions

Sec. 08.68.400. Exceptions to application of chapter. (a) This chapter does not apply to

(1) a qualified nurse licensed in another state employed by the United States Government or a bureau, or agency, or division of the United States Government while in the discharge of official duties;

(2) nursing service given temporarily in the event of a public emergency, epidemic, or disaster;

(3) the practice of nursing by a student enrolled in a nursing education program accredited by the board when the practice is in connection with the student's course of study;

(4) the practice of nursing by an individual enrolled in an approved program or course of study approved by the board to satisfy the requirements of AS 08.68.251; or

(5) the practice of nursing by a nurse licensed in another state who engages in nursing education or nursing consultation activities, if

which delineate those advanced life-support techniques which may be carried out by the mobile intensive care paramedic and under what circumstances:

(C) assuring that the mobile intensive care paramedics have 24-hour access to voice contact with a physician;

(D) responsibility for provisions for periodic physician critiques of patient care provided by the mobile intensive care paramedic for selected cases;

(E) approval of a program of continuing medical education for each mobile intensive care paramedic under his supervision; the program must meet the requirements of 12 AAC 40.350(a)(1):

(14) "location other than the one in which the collaborating physician practices" means a location 30 or more miles by road from the collaborating physician's primary office;

(15) "periodic method of assessment" means evaluation of medical care and clinic management, accomplished through at least two days each quarter of direct and personal contact at either the physician's or physician assistant's site of work and through at least monthly telephone or radio review of patient care and review of health care records;

(16) "temporary permit" means authorization under 12 AAC 40.405 to practice as a physician assistant while awaiting a permanent permit;

(17) "temporary practice permit" means authorization under 12 AAC 40.405 to practice temporarily as a physician assistant for the purpose of substituting for another licensed health care provider, or to practice in a location of special or seasonal need. (Eff. 8/29/73, Reg. 47; am 1/13/80, Reg. 73; am 9/30/81, Reg. 79; am 7/4/84, Reg. 90)

Authority: AS 08.64.100
AS 08.64.107

CHAPTER 44. BOARD OF NURSING

Article

1. Nursing Education of Professional Nurses (12 AAC 44.010-12 AAC 44.140)
2. Nursing Education of Practical Nurses (12 AAC 44.150-12 AAC 44.280)
3. Examination and Licensure (12 AAC 44.290-12 AAC 44.320)
4. Advanced Nurse Practitioner (12 AAC 44.322-12 AAC 44.490)
5. Registered Nurse Anesthetists (12 AAC 44.500-12 AAC 44.560)
6. General Provisions (12 AAC 44.900-12 AAC 44.940)

ARTICLE 1. NURSING EDUCATION OF PROFESSIONAL NURSES

Section

10. Purpose of accreditation
20. Types of accreditation
30. Survey
40. Establishment of school of professional nursing
50. Discontinuance of program
60. Organization of schools
70. Budget
80. Student clinical experience
90. Faculty
100. Qualifications of director and professional nursing instructors
110. Records
120. School catalogue
130. Curriculum requirements
140. Reports

12 AAC 44.010. PURPOSE OF ACCREDITATION. The purpose of accreditation is

(1) to assure the safe practice of nursing by setting minimum requirements for the conduct of schools of professional nursing that prepares the nurse practitioner;

(2) to assure the graduate of their eligibility for admission to the licensing examination for professional nurses in Alaska; and

(3) to encourage within school of professional nursing self-evaluation and study for growth, development and improvement of its program. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100
AS 08.68.290

12 AAC 44.020. TYPES OF ACCREDITATION. (a) Full accreditation is granted a school of professional nursing that has met the requirements as set forth in 12 AAC 44.010 - 12 AAC 44.140.

(b) Provisional accreditation is granted a school of professional nursing that has not been in operation long enough to fulfill the standards of accreditation of 12 AAC 44.010 - 12 AAC 44.140.

(c) Conditional accreditation is granted a school of professional nursing which has failed to maintain minimum standards and has been notified that it must meet the requirements of the board within one year from date of notice. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2) and (4)
AS 08.68.290

12 AAC 44.030. SURVEY. (a) The completed application for provisional accreditation shall be submitted to the board when the school of professional nursing is ready for a survey visit.

(b) A survey of each school of nursing, including affiliations and extended campus facilities, is required for the purpose of full accreditation and shall be made by one or more representatives of the board and may include a faculty member from an established professional nursing program.

(c) Each school of professional nursing shall permit periodic surveys by the board or their designated representative for the purpose of

determining compliance with accreditation standards.

(d) Prior to a survey visit, specific information will be requested by the board.

(e) The information supplied by the school and the written report of the survey will be given to the board. The report and recommendations of the board will be sent to the administrator of the controlling body and the delegated nurse administrator of the program. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2) and (4)

12 AAC 44.040. ESTABLISHMENT OF SCHOOL OF PROFESSIONAL NURSING. (a) Any university or college wishing to establish a school of professional nursing shall inform the board in writing during the initial planning period.

(b) There shall be information on the availability of clinical facilities and job opportunities for graduates. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2) and (4)

12 AAC 44.050. DISCONTINUANCE OF PROGRAM. When a school of professional nursing plans on discontinuing its program it shall

(1) notify the board in writing as soon as the decision is made;

(2) give assurances that the educational standards shall be maintained until the last class has graduated or that adequate provisions are made for the transfer of students unable to complete the program; and

(3) make provision for the preservation of students' records. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1)

12 AAC 44.060. ORGANIZATION OF SCHOOLS. (a) There shall be a clear statement of philosophy which shall be filed with the board.

(b) The school of professional nursing shall be an integral part of an accredited institution of higher learning. There shall be a plan of organization and administration of the school of

professional nursing with an organization diagram available to all persons concerned with the school of professional nursing. This chart shall indicate responsibilities and lines of communication and show how individuals and units within the school of professional nursing stand in relation to one another and to such groups as the board of control and clinical facilities. The relationships may be direct, advisory, contractual, coordinating or cooperative in nature. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.070. BUDGET. (a) The financial statement of a school of professional nursing shall be submitted annually to the board and must include assets and liabilities, allowance for

fiscal year for faculty salaries, administrative positions, laboratory equipment, maintenance, capitol improvement, library.

(b) In addition to the information required in (a) of this section, a school of professional nursing applying for initial, provisional accreditation shall submit a proposed budget for five years which includes projected amounts and sources of funding, and an analysis of projected disbursements. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.080. STUDENT CLINICAL EXPERIENCE. (a) Assignment of students for clinical experience shall be the responsibility of the director of the school of professional nursing and the faculty.

(b) Each school of professional nursing shall include in its curriculum student experience in meeting the physical, emotional and social needs of people of all ages in health and illness for nursing care.

(c) If there is more than one professional nursing program having clinical experience simultaneously within the same clinical area, each group shall have separate instructors.

(d) In student clinical experience, the clinical instructor-student ratio may not exceed 1:12 at any given time. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.090. FACULTY. The administration and teaching staff shall consist of

(1) a director of the school of professional nursing;

(2) nursing instructors prepared in the major broad areas of current nursing practice. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.100. QUALIFICATIONS OF DIRECTOR AND PROFESSIONAL NURSING INSTRUCTORS. (a) The director of a school of professional nursing shall be a professional nurse and have at least a master's degree in education or nursing, including coursework in curriculum development and counseling, and at least one

year of experience either in instruction or administration of nursing education.

(b) Instructors who are responsible for the development and implementation of curriculum in one of the specialty areas shall have a master's degree in nursing, and have at least one year of clinical nursing experience in that area.

(c) Instructors who supervise nursing practice in a school of professional nursing shall have at least a baccalaureate degree in nursing and have at least one year of clinical nursing experience in the area in which they are teaching. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.110. RECORDS. The school of professional nursing shall provide for

(1) pre-admission and current records for each student, including information as to the student's knowledge and skills related to the practice of professional nursing; and

(2) the official transcript of each student. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.120. SCHOOL CATALOGUE. In the catalogue of the accredited institution there shall be a current official statement, developed by the nursing faculty, describing the nursing program, which includes

(1) a statement of the philosophy and objectives of the school of professional nursing;

(2) admission and graduation policies and procedures;

(3) the curriculum, course description, and list of faculty members; and

(4) description of physical facilities. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.130. CURRICULUM REQUIREMENTS. Baccalaureate and associate degree programs shall comply with the following minimum curriculum requirements:

(1) biological and physical sciences

(A) academic faculty prepared in these areas shall provide this instruction:

(B) subject matter shall relate to structure and function of the human body:

(2) behavioral and social sciences

(A) academic faculty prepared in these areas shall provide this instruction:

(B) subject matter shall include principles of psychology, communications, growth and development, and interpersonal relationships:

(3) nursing science

(A) the school of professional nursing shall provide instruction and clinical experience in the major broad areas of current nursing practice:

(B) it shall provide instruction in allied subjects such as community health, pharmacology, nutrition and diet therapy, history and trends in nursing and professional responsibilities:

(C) theory and laboratory experience shall be concurrent to enable students to develop basic skills in professional nursing;

(D) throughout the program the student shall have experience applying the principles learned by working with the health team in providing nursing services and health education to people of all ages. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)
AS 08.68.290

12 AAC 44.140. REPORTS. By July 1 of each year, schools of professional nursing shall submit to the Board of Nursing reports related to faculty, students and current curriculum as follows:

(1) written job descriptions and qualifications for each category of faculty;

(2) names, educational qualifications, and titles of all nursing faculty members;

(3) a count of students admitted, withdrawn, transferred and graduated on forms provided by the board;

(4) a copy of the catalogue;

(5) course outlines for all nursing courses;

(6) budget information required in 12 AAC 44.070; and

(7) a copy of any written agreement between the school of professional nursing and clinical facilities. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(3)

ARTICLE 2. NURSING EDUCATION OF PRACTICAL NURSES

Section

- 150. Purpose of accreditation
- 160. Types of accreditation
- 170. Survey
- 180. Establishment of school of practical nursing
- 190. Discontinuance of program
- 200. Organization of schools
- 210. Budget
- 220. Student clinical experience
- 230. Faculty
- 240. Qualifications of director and practical nursing instructors
- 250. Records
- 260. School catalogue
- 270. Curriculum requirements
- 280. Reports

12 AAC 44.150. PURPOSE OF ACCREDITATION. The purpose of accreditation is

(1) to assure safe practice of nursing by setting minimum requirements for the conduct of school of practical nursing that prepares the practical nurse;

(2) to assure the graduates of their eligibility for admission to the licensing examination for practical nurses in Alaska; and

(3) to encourage within school of practical nursing self-evaluation and study for growth,

development and improvement of its program.
(Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100
AS 08.68.290

12 AAC 44.160. TYPES OF ACCREDITATION. (a) Full accreditation is granted a school of practical nursing that has met the requirements as set forth in 12 AAC 44.150 - 12 AAC 44.280.

(b) Provisional accreditation is granted a school of practical nursing that has not been in operation long enough to fulfill the standards of accreditation of 12 AAC 44.150 - 12 AAC 44.280.

(c) Conditional accreditation is granted a school of practical nursing which has failed to maintain minimum standards and has been notified that it must meet the requirements of the board within one year from date of notice.
(Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2) and (4)
AS 08.68.290

12 AAC 44.170. SURVEY. (a) The completed application for provisional accreditation shall be submitted to the board when the school of practical nursing is ready for a survey visit.

(b) A survey of each school of nursing, including affiliations and extended campus facilities, is required for the purpose of FULL accreditation and shall be made by one or more representatives of the board and may include a faculty member from an established practical nursing program.

(c) Each school of practical nursing shall permit periodic surveys by the board or their designated representative for the purpose of determining compliance with accreditation standards.

(d) Prior to a survey visit, specific information will be requested by the board.

(e) The information supplied by the school and the written report of the survey will be given to

the board. The report and recommendations of the board will be sent to the administrator of the controlling body and the delegated nurse administrator of the program. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2), (3) and (4)

12 AAC 44.180. ESTABLISHMENT OF SCHOOL OF PRACTICAL NURSING. (a) Any college wishing to establish a school of practical nursing shall inform the board in writing during the initial planning period.

(b) There shall be information on the availability of clinical facilities and job opportunities for graduates. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1), (2), (3) and (4)

12 AAC 44.190. DISCONTINUANCE OF PROGRAM. When a school of practical nursing plans on discontinuing its program it shall

(1) notify the board in writing as soon as the decision is made;

(2) give assurances that the educational standards shall be maintained until the last class has graduated or that adequate provisions are made for the transfer of students unable to complete the program; and

(3) make provision for preservation of students' records. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1)

12 AAC 44.200. ORGANIZATION OF SCHOOLS. (a) There shall be a clear statement of philosophy which shall be filed with the board.

(b) The school of practical nursing shall be an integral part of an accredited institution of higher learning. There shall be a plan of organization and administration of the school of practical nursing with an organization diagram available to all persons concerned with the school of practical nursing. This chart shall indicate responsibilities and lines of communication and show how individuals and units within the school of practical nursing stand in relation to one another and to such groups as the board of control and clinical facilities. The relationships may be direct, advisory.

contractual, coordinating or cooperative in nature. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.210. BUDGET. (a) The financial statement of a school of practical nursing shall be submitted annually to the board and must include assets and liabilities, allowance for fiscal year for faculty salaries, administrative positions, laboratory equipment, maintenance, capital improvement library.

(b) In addition to the information required in (a) of this section, a school of practical nursing applying for initial, provisional accreditation shall submit a proposed budget for five years which includes projected amounts and sources of funding, and an analysis of projected disbursements. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.220. STUDENT CLINICAL EXPERIENCE. (a) Assignment of students for clinical experience shall be the responsibility of the director of the school of practical nursing and the faculty.

(b) Each school of practical nursing shall include in its curriculum, student clinical experience in the areas of medical, surgical, obstetrical, psychiatric and pediatric nursing.

(c) If there is more than one nursing program having clinical experience simultaneously within the same clinical area, each group shall have separate instructors.

(d) In student clinical experience, the clinical instructor-student ratio may not exceed 1:12 at any given time. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.230. FACULTY. The administration and teaching staff shall consist of

(1) a director of the school of practical nursing; and

(2) nursing instructors in each specialty area, medical, surgical, obstetrical, psychiatric and pediatric nursing. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.240. QUALIFICATIONS OF DIRECTOR AND PRACTICAL NURSING INSTRUCTORS. (a) The director of a school of practical nursing shall have at least a baccalaureate degree in nursing, including coursework in curriculum development and counseling, and at least one year of experience either in instruction or administration of nursing education and one year clinical nursing experience in the areas in which he is teaching.

(b) Instructors who teach in a school of practical nursing shall be registered nurses with a bachelor's degree who have at least one year of clinical nursing experience in the area in which they are teaching. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.250. RECORDS. The school of practical nursing shall provide for

(1) pre-admission and current records for each student, including information as to the student's knowledge and skills related to the practice of practical nursing; and

(2) the official transcript of each student. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.260. SCHOOL CATALOGUE. In the catalogue of the accredited institution there shall be a current official statement, developed by the nursing faculty describing the nursing program, which includes

(1) a statement of the philosophy and objectives of the school of practical nursing;

(2) admission and graduation policies and procedures;

(3) the curriculum, course description, and list of faculty members; and

(4) description of physical facilities. (Eff. 10/14/72, Reg. 43)

Authority: AS 08.68.100(a)(1) and (2)

12 AAC 44.270. CURRICULUM REQUIREMENTS. The program for a school of practical nursing shall comply with the following minimum requirements:

12 AAC 44.140. **REPORTS.** By September 1 of each year, unless otherwise designated by the board, nursing education programs shall submit to the board reports related to faculty, students, and current curriculum, as follows:

(1) changes or new developments in the purpose, philosophy, objectives, conceptual framework, and subsequent curriculum changes;

(2) changes in the administrative structure;

(3) update on faculty membership;

(4) student enrollment statistics;

(5) resources and facilities data update;

(6) a program evaluation and plan for program improvement;

(7) projected changes for the school of nursing and curriculum for the next year;

(8) results of studies of postgraduate activities relative to ongoing employment and accomplishments of graduates. (Eff. 10/14/72, Reg. 43; am 4/2/86, Reg. 97)

Authority: AS 08.68.100(a)

ARTICLE 2. NURSING EDUCATION OF PRACTICAL NURSES

Section

- 150. (Repealed)
- 160. (Repealed)
- 170. (Repealed)
- 180. (Repealed)
- 190. (Repealed)
- 200. (Repealed)
- 210. (Repealed)
- 220. (Repealed)
- 230. (Repealed)
- 240. (Repealed)
- 250. (Repealed)
- 260. (Repealed)
- 270. (Repealed)
- 280. (Repealed)

12 AAC 44.150. **PURPOSE OF ACCREDITATION.** Repealed 4/2/86.

12 AAC 44.160. **TYPES OF ACCREDITATION.** Repealed 4/2/86.

12 AAC 44.170. **SURVEY.** Repealed 4/2/86.

12 AAC 44.180. **ESTABLISHMENT OF SCHOOL OF PRACTICAL NURSING.** Repealed 4/2/86.

12 AAC 44.190. **DISCONTINUANCE OF PROGRAM.** Repealed 4/2/86.

12 AAC 44.200. **ORGANIZATION OF SCHOOLS.** Repealed 4/2/86.

12 AAC 44.210. **BUDGET.** Repealed 4/2/86.

12 AAC 44.220. **STUDENT CLINICAL EXPERIENCE.** Repealed 4/2/86.

12 AAC 44.230. **FACULTY.** Repealed 4/2/86.

12 AAC 44.240. **QUALIFICATIONS OF DIRECTOR AND PRACTICAL NURSING INSTRUCTORS.** Repealed 4/2/86.

12 AAC 44.250. **RECORDS.** Repealed 4/2/86.

12 AAC 44.260. **SCHOOL CATALOGUE.** Repealed 4/2/86.

12 AAC 44.270. **CURRICULUM REQUIREMENTS.** Repealed 4/2/86.

12 AAC 44.280. **REPORTS.** Repealed by 4/2/86.

ARTICLE 3. EXAMINATION AND LICENSURE

Section

- 290. Application for examination
- 300. Examinations
- 305. License by endorsement
- 310. Licensure of graduates of foreign schools of nursing
- 320. Temporary permits

12 AAC 44.290. APPLICATION FOR EXAMINATION. (a) All applicants for license by examination in Alaska must

(1) make written application, on a form provided by the department, for approval to take the licensing examination;

(2) pay the application fee and the license by examination fee specified in 12 AAC 02.280;

(3) provide the board with a complete certified transcript of his or her nursing education to be mailed directly to the department from the school of nursing; and

(4) repealed 4/27/83;

(5) provide the nursing program verification form, completed by an official of the school of nursing attended, and mailed directly to the department from the school of nursing.

(b) The application and fees required under (a)(1) and (2) of this section must be post-marked no later than 60 days before the date of the examination except that applications post-marked after that date may be accepted on a showing of good cause. All supporting documents required under (a)(3) and (5) of this section, must be on file with the department no later than 21 days before the date of the examination. (Eff. 10/14/72, Reg. 43; am 4/27/83, Reg. 86; am 8/2/86, Reg. 99)

Authority: AS 08.68.100
AS 08.68.190

12 AAC 44.300. EXAMINATIONS. (a) Candidates for a license by examination shall take the National Council Licensing Examination.

(b) Registered nurse candidates who receive a

standard score of at least 1,600 on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(c) Practical nurse candidates who receive a standard score of at least 350 on the examination will be issued a license by the board, provided all other qualifications and requirements outlined in AS 08.68 are also met.

(d) Registered nurse candidates or practical nurse candidates who fail the examination may repeat the examination. A candidate who fails to retake the examination within five years after a first or second exam fail, must pursue a remedial course approved by the board. After a third exam fail or failure to retake the examination within five years after receiving a failing grade on the examination, both a registered nurse and practical nurse candidate must submit to the board a proposal for a remedial course defined in relation to needs. The candidate must provide proof of having fulfilled the requirements of the remedial course before attempting to retake the examination. (Eff. 10/14/72, Reg. 43; am 4/27/83, Reg. 86)

Authority: AS 08.68.100
AS 08.68.190

12 AAC 44.305. LICENSE BY ENDORSEMENT. (a) All applicants for license by endorsement in Alaska must

(1) make written application on forms provided by the department;

(2) pay the application fee and the license by endorsement fee specified in 12 AAC 02.280; and

(3) submit, on a form provided by the department and verified by the endorsing state's licensing jurisdiction, proof of

(A) a license to practice as a registered nurse or a practical nurse issued by another state's licensing jurisdiction either

(i) before July 1, 1982 where licensure was obtained by successful completion of the State Board Test Pool examination with a score of 350 on each section for registered nurses and 350 on the examination for licensed practical nurses; or,

(ii) after June 30, 1982, where licensure was obtained by passing the National Council Licensing Examination with a standard score of 1600 for a registered nurse candidate or a standard score of 350 for a practical nurse candidate; or

(iii) before 1953, where licensure was obtained by passing the issuing state's constructed examination with a minimum score of 75 percent; and

(B) successful completion of an accredited nursing program;

(4) submit proof of employment in a nursing capacity within the five years preceding the date of application in the form of a reference letter from his or her past employer. (Eff. 4/27/83, Reg. 86; am 8/2/86, Reg. 99)

Authority: AS 08.68.100

AS 08.68.170

AS 08.68.200

12 AAC 44.310. LICENSURE OF GRADUATES OF FOREIGN SCHOOLS OF NURSING. (a) Applicants shall submit all required documents accompanied by certified English translations if the original documents are not in English.

(b) Unless otherwise provided by this section, nurses who have received nursing education outside the United States shall write the National Council Licensing Examination.

(c) Applicants who have successfully completed the National Council Licensing Examination elsewhere will be licensed by endorsement.

(d) If an applicant was licensed in Canada either before August, 1980 as a result of passing the national Canadian examination with a score of at least 350 on each of the five parts of the examination, or after July, 1980 with a score of 400, an applicant may receive a license by endorsement in the manner provided by AS 08.68.200. (Eff. 10/14/72, Reg. 43; am 4/27/83, Reg. 86)

Authority: AS 08.68.100

AS 08.68.190

AS 08.68.200

AS 08.68.210(a)(b)

12 AAC 44.320. TEMPORARY PERMITS. (a) The board will, in its discretion, issue a temporary nonrenewable permit to an applicant for license by examination who

(1) applies on a form provided by the department in accordance with 12 AAC 44.290;

(2) pays the application fee, the license by examination fee, and the temporary permit fee specified in 12 AAC 02.280; and

(3) has taken the National Council Licensing Examination one time and is awaiting the results, or is scheduled to take the next National Council Licensing Examination.

(b) The board will, in its discretion, issue a temporary nonrenewable permit to an applicant for license by endorsement who

(1) applies on a form provided by the department;

(2) pays the application fee, the license by endorsement fee, and the temporary permit fee specified in 12 AAC 02.280; and

(3) submits verification of a current license to practice as a registered nurse or a practical nurse issued by another state licensing jurisdiction.

(c) A temporary permit issued under (a) of this section is valid until the results of the National Council Licensing Examination are made available to the board and notification of the results is received by the temporary permit holder.

(d) A temporary permit issued under (b) of this section is valid for four months from the date of issuance or until a permanent license is issued or denied, whichever occurs first. (Eff. 10/14/72, Reg. 43; am 6/27/76, Reg. 58; am 4/27/83, Reg. 86; am 8/2/86, Reg. 99)

Authority: AS 08.68.100
AS 08.68.200
AS 08.68.210

**ARTICLE 4.
ADVANCED NURSE PRACTITIONER**

Section

- 322. (Repealed)
- 330. (Repealed)
- 340. (Repealed)
- 350. (Repealed)
- 360. (Repealed)
- 370. (Repealed)
- 400. Requirements for initial authorization
- 410. (Repealed)
- 420. Recognized certification bodies
- 430. Scope of practice
- 435. (Repealed)
- 440. Prescriptive authority
- 450. Temporary and nonrenewable advanced nurse practitioner permits
- 460. Preceptorship permits
- 470. Renewal of authorization
- 480. (Repealed)
- 490. Applicability

12 AAC 44.322. NURSE-MIDWIFE. Repealed 1/13/80.

12 AAC 44.330. LICENSE RENEWAL. Repealed 1/13/80.

12 AAC 44.340. REINSTATEMENT OF A SUSPENDED LICENSE. Repealed 1/13/80.

12 AAC 44.350. REINSTATEMENT OF A REVOKED LICENSE. Repealed 1/13/80.

12 AAC 44.360. CHANGE OF NAME. Repealed 1/13/80.

12 AAC 44.370. DEFINITIONS. Repealed 1/13/80.

12 AAC 44.400. REQUIREMENTS FOR INITIAL AUTHORIZATION. (a) An applicant for initial authorization to practice as an advanced nurse practitioner as defined in AS 08.68.410(1)

(1) must have satisfactorily completed

(A) a formal one-academic-year educational course of study which

(i) prepares registered nurses to perform an expanded role in the delivery of health care;

(ii) includes a combination of classroom instruction and a component of supervised clinical practice; and

(iii) awards a degree, diploma or certificate to persons who successfully complete the course of study; or

(B) a formal course of study which does not necessarily meet the requirements of (A) of this paragraph and

(i) have been performing an expanded role in the delivery of health care for at least 12 months during the 18 months immediately preceding January 13, 1980; and

(ii) authorized in Alaska as an advanced nurse practitioner on December 1, 1984; and

(2) must hold a current license to practice as a registered nurse in Alaska; and

(3) must hold a current certification of nurse practitioner in a specialty area of nursing granted by a national certification body recognized by the board; and

(4) shall, in the absence of a continuing education requirement of the certifying body, submit documented evidence of having obtained 30 contact hours of continuing education in the specialty area of the nurse practitioner every two years; and

(5) when delivering health care services to the public, shall have in effect a written plan approved by the board which outlines procedures for consultation with other health care professionals and for referral of clients to other health care professionals as indicated by clients' health care needs; the consultation referral plan must

(A) conform to criteria established by the board:

(B) include a method for quality assurance; and

(C) be kept current and made available to the board at any time the board considers it necessary for good cause;

(6) shall complete the application form provided by the board; and

(7) shall submit a nonrefundable application fee of \$25.

(b) Repealed 12/1/84.

(c) An applicant for initial authorization to practice as an advanced nurse practitioner on the basis of education in (a)(1)(B) of this section must apply to the board no later than June 30, 1981. (Eff. 1/13/80, Reg. 73; am 5/16/81, Reg. 78; am 12/1/84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.410. COLLABORATIVE RELATIONSHIP. Repealed 12/1/84.

12 AAC 44.420. RECOGNIZED CERTIFICATION BODIES. (a) The board will, in its discretion, recognize national certification bodies which certify advanced nurse practitioners by exercising responsibility for

(1) approving the basic education course of study in the specialty area;

(2) examining graduates of the course of study; and

(3) addressing the issue of ongoing competency.

(b) The board will annually review national certification bodies to assure that board requirements are met.

(c) The board will maintain a current list of certification bodies which it has reviewed and recognized.

(d) An applicant applying for an advanced nurse practitioner authorization by virtue of certification from a body not on the board's current list of certification bodies shall supply the board with sufficient data to evaluate the

authority of the certifying body. (Eff. 1/13/80, Reg. 73; am 12/1/84, Reg. 94)

Authority: AS 08.68.100

12 AAC 44.430. SCOPE OF PRACTICE. The board recognizes advanced and specialized acts of nursing practice as those described in the scope of practice statements for nurse practitioners certified by national certification bodies recognized by the board. (Eff. 1/13/80, Reg. 73)

Authority: AS 08.68.100(a)(1)

12 AAC 44.435. ADVANCED NURSE PRACTITIONER IN REMOTE LOCATION. Repealed 12/1/84.

12 AAC 44.440. PRESCRIPTIVE AUTHORITY. (a) The board will, in its discretion, authorize an advanced nurse practitioner or "ANP" to prescribe legend drugs in accordance with applicable state and federal laws.

(b) The board will transmit to the Board of Pharmacy a list of all ANPs with prescriptive authority. The list will include

- (1) the name of the authorized ANP;
 - (2) the prescriber's identification number assigned by the board; and
 - (3) the effective date of prescriptive authority.
- (c) A registered nurse who applies for authorization to prescribe drugs shall
- (1) be currently designated as an ANP in Alaska;
 - (2) provide evidence of completion of 15 contact hours of education in pharmacology and clinical management of drug therapy within the two-year period immediately before the date of application; and
 - (3) submit a completed, notarized application, on a form provided by the board, accompanied by a nonrefundable fee of \$10.

(d) Authorized prescriptions by an ANP must

(1) comply with all applicable state and federal laws; and

(2) be signed by the prescriber with the initials "ANP" and the prescriber's identification number assigned by the board.

(e) Prescriptive authorization will, in the board's discretion, be terminated if the ANP has

(1) not maintained current authorization as an ANP; or

(2) prescribed outside the ANP scope of practice or for other than therapeutic purposes.

(f) ANP prescriptive authority must be renewed biennially with the ANP authorization. Documentation of eight contact hours of pharmacology during the previous two years must be submitted at the time of renewal.

(g) The board will notify the Board of Pharmacy within 24 hours after termination of, or change in, an advanced nurse practitioner's prescriptive authority. (Eff. 1/13/80, Reg. 73; am 12/1/84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.450. TEMPORARY AND NON-RENEWABLE ADVANCED NURSE PRACTITIONER PERMITS. (a) The board will, in its discretion, grant a temporary permit to practice as an advanced nurse practitioner to an applicant who is currently certified as an advanced nurse practitioner in another state or jurisdiction with requirements at least equivalent to those of this state.

(b) The board will, in its discretion, grant a nonrenewable permit to practice as an advanced nurse practitioner to an applicant who meets the requirements of 12 AAC 44.400(a)(1), (2), (4), (5), (6) and (7) of this chapter; and

(1) has been accepted to take the next specialty board examination; or

(2) is awaiting certification results.

(c) A temporary permit granted under (a) of this section is nonrenewable and is valid for a period not to exceed four months.

(d) A nonrenewable temporary permit granted under (b)(1) of this section is valid only until the publication of the results of the first examination the applicant is eligible to take after the permit is issued.

(e) A nonrenewable permit granted under (b)(2) of this section is valid only until the applicant receives notice of certification results.

(f) An applicant who fails the certifying examination shall surrender a nonrenewable permit issued under this section. (Eff. 1/13/80, Reg. 73; am 12/1/84, Reg. 91)

Authority: AS 08.68.100
AS 08.68.210

12 AAC 44.460. PRECEPTORSHIP PERMITS. (a) The board will, in its discretion, grant a preceptorship permit to an applicant whose certifying body requires clinical practice in order to take the specialty board examination or who is engaged in a course of study which meets the requirements of 12 AAC 44.400(a)(1)(A).

(b) The applicant must meet the requirements of 12 AAC 44.400(a)(2), (5), (6), and (7) and submit documented evidence of a preceptorship arrangement to be approved by the board.

(c) A preceptorship permit expires and must be surrendered to the board at the time the preceptorship arrangement is terminated. (Eff. 1/13/80, Reg. 73)

Authority: AS 08.68.100(1)
AS 08.68.410(5) and (9)

12 AAC 44.465. IDENTIFICATION. An ANP shall conspicuously display

(1) on his or her uniform or clothing, a name plate including designation as an ANP; and

(2) in his or her customary place of employment, a current authorization to practice as an ANP; and

(3) a sign at least five inches by eight inches in size informing the public of the definition of an advanced nurse practitioner in AS 08.68.410(1). (Eff. 12/1/84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.470. RENEWAL OF AUTHORIZATION. (a) An applicant for renewal of authorization to practice as an advanced nurse practitioner shall submit to the board

(1) evidence of continued national certification since the date of original authorization or reauthorization in the applicant's specialty area;

(2) repealed 12/1/84;

(3) repealed 12/1/84;

(4) a completed renewal application on a form provided by the board, accompanied by a nonrefundable renewal fee of \$25.

(b) The date for renewal of authorization to practice as an advanced nurse practitioner will coincide with the renewal of the applicant's RN license. (Eff. 1/13/80, Reg. 73; am 12/1/84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.480. UNPROFESSIONAL CONDUCT. Repealed 4/27/83.

Editor's Note: The substance of former 12 AAC 44.480 is included in 12 AAC 44.905.

12 AAC 44.490. APPLICABILITY. (a) The provisions of 12 AAC 44.400 - 12 AAC 44.490 of this chapter are applicable only to a registered professional nurse whose authorization to perform acts of medical diagnosis and prescription of medical, therapeutic, and corrective measures comes from the nurse's educational preparation, national certification, and authorization to practice in compliance with regulations established by the board.

(b) Nothing in 12 AAC 44.400 - 12 AAC 44.490 limits the usual and customary practice of a registered professional nurse or licensed vocational nurse in the State of Alaska. (Eff. 1/13/80, Reg. 73)

Authority: AS 08.68.100(a)(1)

**ARTICLE 5.
REGISTERED NURSE ANESTHETISTS**

Section

- 500. Requirements for initial authorization
- 510. Scope of practice
- 520. Written guidelines required
- 530. Nonrenewable registered nurse anesthetist permits
- 540. Renewal of authorization
- 550. (Repealed)
- 560. Applicability

12 AAC 44.500. REQUIREMENTS FOR INITIAL AUTHORIZATION. An applicant for initial authorization to practice as a registered nurse anesthetist shall

(1) submit documentation of having satisfactorily completed an educational program prescribed by a school of anesthesia accredited by a nationally recognized accrediting agency approved by the United States Department of Health and Welfare and the Board of Nursing;

(2) submit documentation of having successfully passed an examination administered by a nationally recognized certifying agency for nurse anesthetists following completion of the educational program described in (1) of this section;

(3) submit evidence of current national certification;

(4) hold a current license to practice as a registered nurse in Alaska;

(5) complete the application form provided by the board; and

(6) submit a nonrefundable application fee of \$25. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.68.100

12 AAC 44.510. SCOPE OF PRACTICE. (2) To ensure available nurse anesthesia to the Alaska public in accordance with the standards set forth by the national certifying body for nurse anesthetists, a registered nurse anesthetist in Alaska is authorized within the scope of his or her educational preparation to

(1) evaluate the immediate preoperative condition of the patient as it relates to anesthesia;

(2) select anesthetic agent with the approval of the anesthesiologist, primary physician or dentist responsible for the patient's care;

(3) induce and maintain anesthesia and manage the relief of pain;

(4) take responsibility for support of life functions during anesthesia;

(5) take responsibility for recognition of abnormal responses to anesthesia or to any medication or other form of therapy used adjunctive to anesthesia and to take action to correct any abnormal response; and

(6) provide observation and resuscitative care during the immediate post-operative period.

(b) A registered nurse anesthetist shall maintain complete and accurate records of anesthesia used and of any abnormal response to anesthesia.

(c) a registered nurse anesthetist is authorized to administer anesthesia

(1) under the supervision of the director of the anesthesia service or a qualified designee of the director; or

(2) under the supervision of the primary physician or qualified physician designee of the primary physician or of the dentist responsible for the patient's immediate care. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.68.100

12 AAC 44.520. WRITTEN GUIDELINES REQUIRED. A registered nurse anesthetist must maintain written guidelines developed with a primary physician, anesthesiologist or the medical staff of the employing institution and practice in accordance with guidelines. The guidelines must specify the degree to which supervision, collaboration and independent action are required of the registered nurse anesthetist. The board will, on request, review the guidelines to determine whether they meet standards of practice which adequately protect patients. The board will, in its discretion, require changes in the guidelines to meet the appropriate standards. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.68.100

12 AAC 44.530. NONRENEWABLE REGISTERED NURSE ANESTHETIST PERMITS.

(a) The board will, in its discretion, grant a non-renewable permit to practice as a registered nurse anesthetist to an applicant who meets the requirements of 12 AAC 44.500(1), (4), (5) and (6); and

(1) has been accepted to take the next scheduled certified registered nurse anesthetist examination; or

(2) is awaiting results of the examination.

(b) A nonrenewable permit granted under (a)(1) of this section is valid only until the date of the first available certification examination if the applicant fails to sit for the examination, or, if the applicant does sit for the certification examination, until the applicant receives notification of having successfully passed the certification examination on the third attempt or earlier.

(c) A nonrenewable permit granted under (a)(2) of this section is valid until the applicant receives notification of having successfully passed the certification examination.

(d) The holder of a nonrenewable permit to practice as a registered nurse anesthetist granted under (a)(1) or (a)(2) of this section who fails to successfully pass the certification examination on three consecutive occasions must surrender his or her nonrenewable permit to the board within 48 hours of receiving notification of the third failure.

(e) The holder of a nonrenewable permit granted under this section may practice only in an anesthesia service supervised by an anesthesiologist. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.68.100

12 AAC 44.540. RENEWAL OF AUTHORIZATION. (a) An applicant for renewal of authorization to practice as a registered nurse anesthetist shall submit to the board

(1) evidence of current national certification; and

(2) a completed renewal application on a

form provided by the board accompanied by a nonrefundable renewal fee of \$25.

(b) The date of renewal of authorization to practice as a registered nurse anesthetist will coincide with the renewal of the applicant's registered nurse license. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.68.100

12 AAC 44.550. UNPROFESSIONAL CONDUCT. Repealed 4/27/83.

Editor's Note: The substance of former 12 AAC 44.550 is included in 12 AAC 44.905.

12 AAC 44.560. APPLICABILITY. (a) The provisions of 12 AAC 44.500 - 12 AAC 44.550 are applicable only to a registered nurse whose authorization to perform acts of anesthesia service comes from the nurse's educational preparation, national certification and authorization to practice in compliance with regulations established by the board.

(b) Nothing in 12 AAC 44.500 - 12 AAC 44.550 limits the usual and customary practice of a registered professional nurse or licensed vocational nurse in the State of Alaska. (Eff. 10/8/81, Reg. 80)

Authority: AS 08.64.100

**ARTICLE 6.
GENERAL PROVISIONS**

Section

- 900. License renewal
- 905. Unprofessional conduct
- 910. Reinstatement of a suspended license and/or authorization
- 920. Reinstatement of a revoked license and/or authorization
- 930. Change of name
- 940. Definitions

12 AAC 44.900. LICENSE RENEWAL. (a) A licensed practical nurse license must be renewed biennially by September 30. A registered nurse license must be renewed biennially by November 30. Notice of renewal with inventory questionnaire will be mailed to every currently licensed nurse at least 60 days before the renewal date.

(b) A license not renewed by the last day of the last month of the licensing period will be automatically cancelled on the first day of the following month.

(c) A cancelled license will be reinstated upon receipt of payment of license renewal fees and all applicable penalty fees. (Eff. 1/13 80, Reg. 73; am 12/1 84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.905. UNPROFESSIONAL CONDUCT. Nursing conduct which could adversely affect the health and welfare of the public constitutes unprofessional conduct under AS 08.68.270(8) and includes the following:

(1) failing to use sufficient knowledge, skills or nursing judgment in the practice of nursing as defined by the level of licensure;

(2) assuming duties and responsibilities, on repeated occasions, without sufficient preparation or for which competency has not been maintained;

(3) knowingly delegating a nursing care function, task, or responsibility to another who is not licensed under AS 08.68 to perform that function, task, or responsibility, when the delegation is contrary to AS 08.68 or 12 AAC 44 or involves a substantial risk or harm to a client;

(4) failing to exercise adequate supervision over persons who are authorized to practice only under the supervision of the licensed professional;

(5) failing to perform acts within the nurse's scope of competence which are necessary to prevent substantial risk or harm to a client;

(6) violating the confidentiality of information or knowledge concerning a client;

(7) physically or verbally abusing a client;

(8) using alcohol or other drugs to the extent that the use interferes with nursing functions;

(9) violating state or federal laws regulating drugs, including but not limited to forging prescriptions or unlawfully distributing drugs or narcotics;

(10) failing to maintain a record for each client which accurately reflects the nursing problems and interventions for the client, or falsifying a client's records or intentionally making an incorrect entry in a client's chart;

(11) leaving a nursing assignment without properly notifying appropriate personnel;

(12) permitting another person to use his or her nursing license or permit for any purpose;

(13) failing to report, through proper channels, facts known to the individual regarding incompetent, unprofessional or illegal practice of any health care provider;

(14) engaging in fraud, misrepresentation, or deceit in writing the licensing examination;

(15) for any person not authorized to practice acts of medical diagnosis or medical therapeutics as an advanced nurse practitioner, to use the title nurse practitioner or advanced nurse practitioner, or the abbreviation NP or ANP or any other words, letters, signs, or figures to indicate that the person is an advanced nurse practitioner;

(16) for an advanced nurse practitioner to perform duties other than those specified in 12 AAC 44.430;

(17) for any person not authorized to practice as a registered nurse anesthetist to use the title registered nurse anesthetist, nurse anesthetist or certified registered nurse anesthetist or the abbreviation CRNA or any other words, letters, signs, or figures to indicate that the person is a registered nurse anesthetist; and

(18) for a registered nurse anesthetist to perform duties outside the scope of practice described in 12 AAC 44.510. (Eff. 4/27/83, Reg. 86)

Authority: AS 08.68.100
AS 08.68.270

12 AAC 44.910. REINSTATEMENT OF A SUSPENDED LICENSE AND/OR AUTHORIZATION. A suspended license or authorization may be reinstated in the termination of suspension only if the requirements in the

suspension order have been met. (Eff. 1/13/80, Reg. 73)

Authority: AS 08.68.100

12 AAC 44.920. REINSTATEMENT OF A REVOKED LICENSE AND OR AUTHORIZATION. (a) One year after revocation of a license or authorization, the licensee or authorized nurse practitioner may apply to the board in writing for reinstatement.

(b) The applicant for reinstatement shall appear before the board.

(c) The board will, in its discretion, request, as a condition for temporary reinstatement, the applicant to work in a supervised relationship approved by the board for a specified length of time.

(d) The applicant is responsible for providing a written evaluation from the employer regarding his or her performance and will be evaluated by the board to determine whether or not the license or authorization will be reinstated. (Eff. 1/13/80, Reg. 73)

Authority: AS 08.68.100

12 AAC 44.930. CHANGE OF NAME. A licensee authorized to practice under this chapter shall notify the board of a change of mailing address or name within 60 days after the change. A report of a change of name must be made in writing and must be accompanied by one of the following to verify the change of name:

(1) a completed affidavit supplied by the board;

(2) a certified copy of a marriage certificate;

(3) a certified copy of a divorce decree; or

(4) a certified copy of a court ruling. (Eff. 1/13/80, Reg. 73; am 12/1/84, Reg. 91)

Authority: AS 08.68.100

12 AAC 44.940. DEFINITIONS. As used in this chapter

(1) "accreditation" means the approval granted a school of professional or practical

nursing which has met the minimum requirements of the board:

(2) "associate degree program" includes general academic and nursing courses, is conducted within a community or junior college; and prepares a person for an associate degree in nursing;

(3) "baccalaureate program" is a program conducted in a senior college or university and which is in an academic department, division, school or college of the senior college or university, which prepares persons for a baccalaureate degree in nursing;

(4) "board" means Alaska Board of Nursing;

(5) "clinical facility" means any facility which provides laboratory experience for the education of students in a school of professional or practical nursing;

(6) repealed 12/1/84;

(7) "contact hour" means a 50-minute classroom instructional session or three laboratory or clinical practice hours;

(8) "preceptorship" is that portion of the ANP course of study consisting of clinical experiences under the auspices of a qualified preceptor for the purpose of correlating theory to practical application of the expanding role of the nurse; the setting must provide an environment which permits observation and active participation in the delivery of health care;

(9) "qualified preceptor" is an advanced nurse practitioner currently authorized to practice as an ANP in the state or a currently licensed, practicing physician or a physician specifically exempted by AS 08.64.370(1) and approved by the board; the functions of the preceptor include supervision, teaching, and evaluation of a student's performance in the clinical setting;

(10) "school" or "program" means a division in a college or university which is responsible for

these activities and contact with clients do not exceed 20 working days within a licensing period.

(b) For purposes of this section the word "nurses" includes registered and practical nurses, and "nursing" means registered and practical nursing. (Art. IX, ch 90 SLA 1957; am § 10 ch 129 SLA 1974; am § 24 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment in subsection (a), inserted "epidemic" in paragraph (2), deleted "or" from the end of paragraph (3), substituted "an individual" for "a nurse" and the language beginning "program or course of study" for "refresher course" in paragraph (4), and added paragraph (5). In subsection

(b), the amendment substituted "registered" for "professional" in two places.

Editor's notes. — This section was redrafted by the revisor of statutes to remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, SLA 1982.

Sec. 08.68.410. Definition . in this chapter.

(1) "advanced nurse practitioner" means a registered nurse authorized to practice in the state who, because of specialized education and experience, is certified to perform acts of medical diagnosis and the prescription of medical, therapeutic, or corrective measures under regulations adopted by the board;

(2) "board" means the Board of Nursing;

(3) "incompetent" means that a nurse does not possess the skills, knowledge, and awareness of the nurse's limitations and abilities to safely practice nursing;

(4) "licensed practical nurse" is equivalent to the title "licensed vocational nurse" and to the name suffix abbreviations L.P.N. and L.V.N.;

(5) "licensed registered nurse" is equivalent to the common title "registered nurse" and the name suffix abbreviation R.N.;

(6) "nurse anesthetist" means a registered nurse authorized to practice in the state who, because of specialized education and experience, is certified to select and administer anesthetic and give anesthesia care under regulations adopted by the board;

(7) "practice of practical nursing" means the performance for compensation or personal profit of nursing functions that do not require the substantial specialized skill, judgment, and knowledge of a registered nurse;

(8) "practice of registered nursing" means the performance for compensation or personal profit of acts of professional service that requires substantial specialized knowledge, judgment, and skill based on the principles of biological, physiological, behavioral, and sociological sciences in assessing and responding to the health needs of individuals, families, or communities through services that include

- (A) assessment of problems, counseling, and teaching
- (i) clients to maintain health or prevent illness; and

- (ii) in the care of the ill, injured, or infirm;
- (B) administration, supervision, delegation, and evaluation of nursing practice;
- (C) teaching others the skills of nursing;
- (D) execution of a medical regimen as prescribed by a person authorized by the state to practice medicine;
- (E) performance of other acts that require education and training that are recognized by the nursing profession as properly performed by registered nurses;
- (F) performance of acts of medical diagnosis and the prescription of medical therapeutic or corrective measures under regulations adopted by the board. (§ 2 ch 90 SLA 1957; am § 5 ch 37 SLA 1970; am § 3 ch 67 SLA 1973; am §§ 11, 12 ch 129 SLA 1974; am § 25 ch 14 SLA 1982)

Effect of amendments. — The 1982 amendment rewrote the section.

remove personal pronouns in conformity with AS 01.05.031(c) and § 4, Chapter 58, ALS 1982.

Editor's notes. — This section was redrafted by the revisor of statutes to

Chapter 70. Nursing Home Administrators.

Section	Section
10. Creation of Board of Nursing Home Administrators	120. Examination
20. Membership board; source of appointments; term of office	130. Provisional licenses
30. Election of officers	140. Expiration and renewal
40. Board meetings: Quorum	150. Fees
50. Duties and powers of the board	155. Grounds for imposition of disciplinary sanctions
55. Removal of board members	160. Disciplinary sanctions
60 — 70. [Repealed]	170. Penalties
80. License required	180. Definitions
90. Application	190. Facilities operated by religious organizations
110. Licensing	

Collateral references. — 58 Am. Jur. 2d, Occupations, Trades and Professions, §§ 17-22.

Licensing and regulation of nursing or rest homes. 97 ALR2d 1187.

Sec. 08.70.010. Creation of Board of Nursing Home Administrators. There is established the Board of Nursing Home Administrators. (§ 1 ch 123 SLA 1975)

Sec. 08.70.020. Membership board; source of appointments; term of office. (a) The board consists of five members: two nursing home administrators licensed under this chapter and practicing in the

Position Paper

SB 315

For an Act entitled: "An Act relating to third party reimbursement for advanced nurse practitioner services."

This Act amends Section 1. AS 21.36.090(d) to include the advanced nurse practitioner as a provider eligible for third-party reimbursement for services provided within the scope of the occupational license.

Background

The professional nurse practitioner provides direct patient care to individuals, families, and other groups in a variety of public health settings. In some cases, the nurse practitioner engages in independent decision making about the needs of clients and collaborates with other health professionals such as the physician, psychologist, social worker, and nutritionist in making decisions about other health needs. The nurse practitioner working in an expanded role practices in primary, acute, and chronic health care settings. As a member of the health care team, the nurse practitioner plans and institutes health care programs.

In the past two decades, the number of nurse practitioners and their responsibilities for providing care to patients have increased. Today approximately 15,400 nurse practitioners are practicing in the United States; 170 are certified to practice in Alaska. The use of nurse practitioners affects the quality of care, access to care, productivity of providers, and the costs of care.

The weight of evidence indicates that within their areas of competencies, nurse practitioners provide care comparable in quality to that provided by physicians. This determination is made by examining patient satisfaction with care provided by nurse practitioners and assessing physicians' acceptance of such care.

In addition to improving access to care in underserved populations and areas, nurse practitioners provide care in certain institutional settings, such as jails, and to specific populations, such the elderly and poor women and their infants. Nurse practitioners also affect access (as well as quality) by providing person-oriented services, such as communicating thoroughly with patients, counseling, promoting self-help, and attending to patients' emotional needs. Nurse practitioners reduce financial barriers to access by providing care at relatively low cost. Productivity studies indicate that nurse practitioners working under physicians' supervision can increase the total practice output by some 20-50 percent.

Although the evidence indicates that nurse practitioners have made positive contributions to the delivery of health care, these practitioners have not been used to their fullest potential. Major obstacles to the greater employment and appropriate use of nurse practitioners have been that

most third-party payers do not cover many services that are typically and characteristically provided by physicians. In these instances, payments are often indirect (i.e., to the employing physician or institution rather than direct to the nurse practitioner).

Impact of Bill

Third-party payment to nurse practitioners for providing services typically and characteristically performed by physicians will dramatically increase the nurse practitioner's ability to establish fee-for-service practices as autonomous providers independent from physicians. Advanced nurse practitioners could provide the full range of services for which they are trained and licensed. Passage of this bill would encourage the employment of advanced nurse practitioners within community mental health centers, particularly in areas of the state in which recruitment of other mental health professionals has been difficult.

The effects of third-party reimbursement of nurse practitioners and paying directly for their services would undoubtedly be influenced by the markets for their services. For example, some third-party payers are paying prospectively for hospital in-patient services (e.g., Medicare is paying on the basis of diagnosis related groups), and capitation is a growing mode of payment. These changes, along with the fact that an increasing proportion of the population is age 65 or older and thus in need of a significant amount of health care services, have major implications for the employment of nurse practitioners and health care costs.

Position

The Department of Health and Social Services supports this bill. Third-party reimbursement for services of advanced nurse practitioners could benefit the health status of certain segments of the population currently not receiving adequate care.

Recommended by: Elizabeth Ward
Elizabeth Ward, Director
Division of Public Health

Date: January 22, 1988

Approved by: Myra M. Munson
Myra M. Munson, Commissioner
Department of Health and
Social Services

Date: Jan 22, 1988

FISCAL NOTE

REQUEST:

Revision Date: _____
Title: An Act relating to third party reimbursement...
Sponsor: Sturgilewski
Requestor: _____

Agency Affected: Health & Social Services
BRU: State Health Services
Components: Nursing

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 88	FY 89	FY 90	FY 91	FY 92	FY 93
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL						

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS : (Attach a separate page if necessary)

The enactment of SB 315 would have no direct fiscal impact on the Department of Health and Social Services.


Prepared by: Elizabeth Ward, Director Phone: 465-3090
Division: Public Health Date: 1-13-88

Approved by Commissioner: Kam Quilley Date: 1/22/88
Agency: Department of Health & Social Services

Distribution (by preparer):
Legislative Finance
Legislative Sponsor
Requestor
Office of Management and Budget
Impacted Agency(ies)

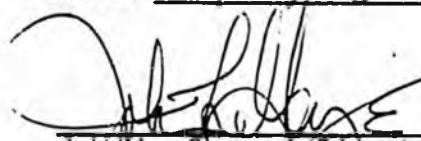
SB 315: "An Act relating to third party reimbursement for advanced nurse practitioner services."

The Administration supports this bill. This bill is aimed at allowing advanced nurse practitioners the ability to bill and receive third party reimbursement for their services. This generally means a disability insurer or a hospital/medical service corporation. The aim is accomplished with a simple modification of AS 21.36.090(d). It is appropriate for a medical practitioner to have access to reimbursement by an insurance company if the coverage provided by the insurer can be performed within the scope of that practitioner's occupational license.



J. Anthony Smith, Commissioner
Department of Commerce & Economic
Development

Date: 1/25/88



John L. George, Director of Insurance

Date: 1/25/88

STATE OF ALASKA
1988 LEGISLATIVE SESSION

BILL VERSION: SB 315
PUBLISH DATE: 01/11/88

FISCAL NOTE

REQUEST:

Revision Date: 01/11/88
 Title: Third party reimbursement for advanced nurse practitioners services
 Sponsor: Sturgulewski
 Requester: _____
 Agency Affected: Commerce & Econ. Dev.
 BRU: Insurance
 Components: Public Protection

EXPENDITURES / REVENUES : (Thousands of Dollars)

OPERATING	FY 88	FY 89	FY 90	FY 91	FY 92	FY 93
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
---------	-----	-----	-----	-----	-----	-----

REVENUE	0.0	0.0	0.0	0.0	0.0	0.0
---------	-----	-----	-----	-----	-----	-----

FUNDING: (Thousands of dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME	0.0	0.0	0.0	0.0	0.0	0.0
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary.)

Prepared by: John L. George, Director Phone: 465-2515
 Division: Division of Insurance Date: January 25, 1988

Approved by Commissioner: J. Anthony Smith Date: January 25, 1988
 Agency: Department of Commerce and Economic Development

Distribution (by preparer):

Legislative Finance
 Legislative Sponsor
 Requestor
 Office of Management and Budget
 Impacted Agency(ies)

0642K-3/12588a