## **HOUSE BILL 1140**

J2, J1 (8lr2695)

## ENROLLED BILL

—Health and Government Operations / Education, Health, and Environmental Affairs—

Introduced by Delegate Kullen Delegates Kullen, Eckardt, Hammen, Pendergrass, Benson, Donoghue, Elliott, Hubbard, Kach, Kipke, McDonough, Mizeur, Montgomery, Morhaim, Nathan-Pulliam, Oaks, Pena-Melnyk, Reznik, Riley, Tarrant, V. Turner, and Weldon

Read and Examined by Proofreaders: Proofreader. Proofreader. Sealed with the Great Seal and presented to the Governor, for his approval this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_ o'clock, \_ M. Speaker. CHAPTER \_\_\_\_ AN ACT concerning **Nurse Practitioners - Authority to Certify** FOR the purpose of authorizing certain nurse practitioners to make a certain determination of incapacity or debilitation under certain circumstances; requiring a certain nurse practitioner to provide a copy of a certain determination to a certain standby guardian; authorizing certain nurse practitioners to certify that a certain minor is pregnant or has given birth under certain circumstances; authorizing certain nurse practitioners or certain nurse midwives to provide certain information about the birth of a child for purposes of filing a birth certificate; authorizing certain nurse practitioners to complete and sign a certain death certificate under certain circumstances; requiring

## EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



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BY adding to

Article – Health – General

Annotated Code of Maryland

(2005 Replacement Volume and 2007 Supplement)

Section 5–601(o)

certain nurse practitioners who complete a certain death certificate to give or transmit the certificate to a certain mortician within a certain period of time; authorizing certain nurse practitioners to serve as a witness to a certain advance directive under certain circumstances; authorizing certain nurse practitioners to issue a certain oral emergency medical services "do not resuscitate order" under certain circumstances; authorizing certain nurse practitioners to conduct a certain examination for purposes of a certain involuntary admission; requiring the Department of Health and Mental Hygiene to pay for a certain examination conducted by a certain nurse practitioner; authorizing certain nurse practitioners to conduct certain educational training programs for applicants for certification for the Insect Sting Emergency Treatment Program; authorizing certain nurse practitioners to certify that certain applicants for assignment of a certain special disability registration number or plates to a certain vehicle have certain conditions; defining certain terms; and generally relating to the certifying authority of nurse practitioners.

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     BY repealing and reenacting, with amendments,
           Article - Estates and Trusts
18
           Section 13-906
19
           Annotated Code of Maryland
20
21
           (2001 Replacement Volume and 2007 Supplement)
22
     BY repealing and reenacting, with amendments,
           Article – Family Law
23
           Section 2-301
24
           Annotated Code of Maryland
25
           (2006 Replacement Volume and 2007 Supplement)
26
     BY repealing and reenacting, with amendments,
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28
           Article – Health – General
           Section 4–208(a), 4–212, 5–601(h) and (o) through (q), 5–602(c) through (e) and
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                 (d), 5-608(c), \frac{10-616(a), 10-628, and 13-704
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           Annotated Code of Maryland
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32
           (2005 Replacement Volume and 2007 Supplement)
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     BY repealing and reenacting, without amendments,
34
           Article – Health – General
           Section 5–601(a), 5–602(a) and (e), and 13–701
35
           Annotated Code of Maryland
36
           (2005 Replacement Volume and 2007 Supplement)
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1 2 3 4 5	BY repealing and reenacting, with amendments, Article – Transportation Section 13–616(a) and (b) Annotated Code of Maryland (2006 Replacement Volume and 2007 Supplement)
6 7	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
8	Article - Estates and Trusts
9	<del>13–906.</del>
l0 l1	(a) (1) A determination of incapacity or debilitation under this subtitle shall:
12 13	(i) Be made by the attending physician OR NURSE PRACTITIONER to a reasonable degree of medical certainty;
L <b>4</b>	(ii) Be in writing; and
<b>L</b> 5	(iii) Contain the attending physician's OR NURSE
L6 L7	PRACTITIONER'S opinion regarding the cause and nature of the parent's incapacity or debilitation, and the extent and probable duration of the incapacity or debilitation.
18 19 20 21	(2) If a standby guardian's identity is known to an attending physician OR NURSE PRACTITIONER, the attending physician OR NURSE PRACTITIONER shall provide a copy of a determination of incapacity or debilitation to the standby guardian.
22 23	(b) If requested by a standby guardian, an attending physician OR NURSE
24	PRACTITIONER—shall make a determination regarding the parent's incapacity or debilitation for purposes of this subtitle.
25 26	(c) If the parent is able to comprehend the information, a standby guardian shall inform the parent of:
27 28	(1) The beginning of the standby guardian's authority as a result of a determination of incapacity; and
29 30	(2) The parent's right to revoke the authority promptly after receipt of the determination of incapacity.

(a)

1	2–301.						
2	(a) An individual 16 or 17 years old may not marry unless:						
$\begin{matrix} 3 \\ 4 \end{matrix}$	(1) the individual has the consent of a parent or guardian and the parent or guardian swears that the individual is at least 16 years old; or						
5 6 7 8 9	(2) if the individual does not have the consent of a parent or guardian either party to be married gives the clerk a certificate from a licensed physician <b>OR CERTIFIED NURSE PRACTITIONER</b> stating that the physician <b>OR NURSE PRACTITIONER</b> has examined the woman to be married and has found that she is pregnant or has given birth to a child.						
10	(b) An individual 15 years old may not marry unless:						
11	(1) the individual has the consent of a parent or guardian; and						
12 13 14 15	(2) either party to be married gives the clerk a certificate from a licensed physician <b>OR CERTIFIED NURSE PRACTITIONER</b> stating that the physician <b>OR NURSE PRACTITIONER</b> has examined the woman to be married and has found that she is pregnant or has given birth to a child.						
16	(c) An individual under the age of 15 may not marry.						
17	Article - Health - General						
18	4–208.						
19 20 21	(a) (1) Within 72 hours after a birth occurs in an institution, or en route to the institution, the administrative head of the institution or a designee of the administrative head shall:						
22 23	(i) Prepare, on the form that the Secretary provides, a certificate of birth;						
24	(ii) Secure each signature that is required on the certificate; and						
25	(iii) File the certificate.						
26 27 28	(2) The attending physician, NURSE PRACTITIONER, OR NURSE MIDWIFE shall provide the date of birth and medical information that are required on the certificate within 72 hours after the birth.						
29	4–212.						

This section does not apply to a fetal death.

$\begin{array}{c} 1 \\ 2 \end{array}$	(b) (1) out and signed by:	A cer	tificate of death regardless of age of decedent shall be filled
$\frac{3}{4}$	of the body; or	(i)	The medical examiner, if the medical examiner takes charge
5 6 7	physician OR PH attended the decea		If the medical examiner does not take charge of the body, the AN'S COLLABORATING NURSE PRACTITIONER who last
8 9 10	(2) COLLABORATING on the certificate o	='	medical examiner [or], physician, OR PHYSICIAN'S E PRACTITIONER shall fill in only the following information a:
11		(i)	The name of the deceased.
12		(ii)	The cause of death and medical certification.
13		(iii)	The date and hour of death.
14		(iv)	The place where death occurred.
15 16	(3) regardless of age o	•	other information that is required on the certificate of death lent shall be filled in:
17		(i)	By the person who has charge of the body; or
18 19	person who last ha	(ii) id char	If the State Anatomy Board has charge of the body, by the ge of the body before it was sent to the State Anatomy Board.
20 21 22 23	receipt of the deat NURSE PRACTITI	th cert	nedical certification shall be completed within 24 hours after ificate by the physician <b>OR PHYSICIAN'S COLLABORATING</b> in charge of the patient's care for the illness or condition except when inquiry is required by the medical examiner.
24 25 26 27		LLABO IYSICL	ne absence or inability of the attending physician <b>OR DRATING NURSE PRACTITIONER</b> or with the attending <b>AN'S COLLABORATING NURSE PRACTITIONER'S</b> approval,  npleted by:
28 29	associate;	(i)	The attending physician's OR NURSE PRACTITIONER'S
30 31	which death occur	(ii) red; or	The chief medical officer or designee of the institution in

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1 2 3	provided the indiv to natural causes.	(iii) vidual l	The physician who performed an autopsy upon the decedent, nas access to the medical history of the case and death is due
4 5	(6) shall attest to the	_	person completing the cause of death and medical certification cy by signature or by an approved electronic process.
6 7 8 9	completion or obta	in the	funeral director or person acting as the funeral director shall medical certification from the person responsible for its urance that the medical certification has been provided to the delectronic process.
10 11	(c) Each notify the medical		dual concerned with carrying out this subtitle promptly shall ner if:
12 13	(1) terminal illness;	The d	leceased was not under treatment by a physician during the
14	(2)	The c	ause of death is unknown; or
15 16	(3) cause of death or t		ndividual considers any of the following conditions to be the contributed to the death:
17		(i)	An accident, including a fall with a fracture or other injury.
18		(ii)	Homicide.
19		(iii)	Suicide.
20		(iv)	Other external manner of death.
21		(v)	Alcoholism.
22		(vi)	Criminal or suspected criminal abortion.
23 24 25		deteri	ithin 24 hours after taking charge of a body, the medical mined the cause of death, the medical examiner shall enter in the cause of death section of the death certificate.
26 27 28	(2) the medical exam entry on the certifi	iner sł	on as the medical examiner determines the cause of death, nall send to the Secretary a report of the cause of death, for

A physician OR + PHYSICIAN'S COLLABORATING NURSE

PRACTITIONER who fills out a certificate of death shall give it or transmit it by

approved electronic media, including facsimile, to the mortician within 24 hours after the death occurred.

- (2) A medical examiner who fills out a certificate of death shall give it or transmit it by approved electronic media, including facsimile, to the mortician within 24 hours after the medical examiner took charge of the body.
- (f) (1) If a death occurs on a common carrier in the United States and the body is removed from the carrier in this State, the death shall be registered in this State, and the place where it is first removed shall be considered the place of death. When a death occurs on a common carrier while in international waters or air space or in a foreign country or its air space and the body is first removed from the carrier in this State, the death shall be registered in this State, but the certificate shall show the actual place of death insofar as can be determined.
- 13 (2) The individual in charge or the owner of the common carrier or a designee shall file a certificate of death within 24 hours after the body is removed from the carrier.
- 16 (3) If the death occurred under any of the conditions or circumstances set forth in subsection (c) of this section, the medical examiner shall be notified.
- 18 (g) A mortician who obtains a certificate of death under this section shall file 19 the certificate within 72 hours after the death.
- 20 (h) (1) Except as authorized under this subtitle, an individual who has a 21 duty to fill out and sign a certificate of death may not execute more than one 22 certificate for a death.
  - (2) The attending physician, THE <u>PHYSICIAN'S COLLABORATING</u> NURSE PRACTITIONER, or a medical examiner who takes charge of a body may file a replacement death certificate if a correction that the physician, THE <u>PHYSICIAN'S COLLABORATING NURSE PRACTITIONER</u>, or medical examiner authorizes cannot be entered legibly on the original certificate.
- 28 5–601.

- (a) In this subtitle the following words have the meanings indicated.
- (h) "Emergency medical services 'do not resuscitate order" means a physician's **OR NURSE PRACTITIONER'S** written order in a form established by protocol issued by the Maryland Institute for Emergency Medical Services in conjunction with the State Board of Physicians which, in the event of a cardiac or respiratory arrest of a particular patient, authorizes certified or licensed emergency medical services personnel to withhold or withdraw cardiopulmonary resuscitation including cardiac compression, endotracheal intubation, other advanced airway

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1 management techniques, artificial ventilation, defibrillation, and other related 2 life—sustaining procedures.

- (0) "Nurse practitioner" means an individual licensed to practice registered nursing in the State and who is certified as a nurse practitioner <del>Jointly</del> by the State Board of Nursing <del>and the State Board of Physicians</del> under Title 8 <del>and Title 14</del> of the Health Occupations Article.
- 8 [(o)] **(P)** "Persistent vegetative state" means a condition caused by injury, 9 disease, or illness:
- 10 (1) In which a patient has suffered a loss of consciousness, exhibiting 11 no behavioral evidence of self–awareness or awareness of surroundings in a learned 12 manner other than reflex activity of muscles and nerves for low level conditioned 13 response; and
- 14 (2) From which, after the passage of a medically appropriate period of 15 time, it can be determined, to a reasonable degree of medical certainty, that there can 16 be no recovery.
- [(p)] (Q) "Physician" means a person licensed to practice medicine in the State or in the jurisdiction where the treatment is to be rendered or withheld.
- [(q)] (R) "Terminal condition" means an incurable condition caused by injury, disease, or illness which, to a reasonable degree of medical certainty, makes death imminent and from which, despite the application of life-sustaining procedures, there can be no recovery.
- 23 5–602.
- 24 (a) Any competent individual may, at any time, make a written advance 25 directive regarding the provision of health care to that individual, or the withholding 26 or withdrawal of health care from that individual.
- 27 (c) (1) A written advance directive shall be dated, signed by or at the express direction of the declarant, and subscribed by two witnesses.
- 29 (2) (i) Except as provided in items (ii) and (iii) of this paragraph, 30 any competent individual may serve as a witness to an advance directive, including an 31 employee of a health care facility, **NURSE PRACTITIONER**, or physician caring for the 32 declarant if acting in good faith.
- 33 (ii) The health care agent of the declarant may not serve as a 34 witness.

- (iii) At least one of the witnesses must be an individual who is not knowingly entitled to any portion of the estate of the declarant or knowingly entitled to any financial benefit by reason of the death of the declarant.
  - (d) (1) Any competent individual may make an oral advance directive to authorize the providing, withholding, or withdrawing of any life—sustaining procedure or to appoint an agent to make health care decisions for the individual.
  - (2) An oral advance directive shall have the same effect as a written advance directive if made in the presence of the attending physician **OR NURSE PRACTITIONER** and one witness and if the substance of the oral advance directive is documented as part of the individual's medical record. The documentation shall be dated and signed by the attending physician **OR NURSE PRACTITIONER** and the witness.
- (e) (1) Unless otherwise provided in the document, an advance directive shall become effective when the declarant's attending physician <del>OR NURSE PRACTITIONER</del> and a second physician <del>OR NURSE PRACTITIONER</del> certify in writing that the patient is incapable of making an informed decision.
- 17 (2) If a patient is unconscious, or unable to communicate by any 18 means, the certification of a second physician <del>OR NURSE PRACTITIONER</del> is not 19 required under paragraph (1) of this subsection.
- 20 5–608.

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- 21 (c) This section does not authorize emergency medical services personnel in 22 the outpatient setting to follow an emergency medical services "do not resuscitate 23 order" that is in any form other than:
- 24 (1) An emergency medical services "do not resuscitate order" described 25 in subsection (a) of this section;
- 26 (2) An oral emergency medical services "do not resuscitate order" 27 provided by an on-line, emergency medical services medical command and control 28 physician; or
- 29 (3) An oral emergency medical services "do not resuscitate order" 30 provided by a physician, as defined in § 5–601 of this subtitle, **OR A NURSE** 31 **PRACTITIONER, AS DEFINED IN § 5–601 OF THIS SUBTITLE,** who is physically 32 present on the scene with the patient and the emergency medical services personnel in the outpatient setting.

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immediately available.

$\frac{1}{2}$	(a) (1) A certificate for involuntary admission of an individual under Part III of this subtitle shall:
3 4	(i) Be based on the personal examination of the physician [or], psychologist, OR NURSE PRACTITIONER who signs the certificate; and
5 6	(ii) Be in the form that the Secretary adopts, by rule or regulation.
7	(2) The rules and regulations shall require the form to include:
8	(i) A diagnosis of a mental disorder of the individual;
9 10	(ii) An opinion that the individual needs inpatient care or treatment; and
11 12	(iii) An opinion that admission to a facility or Veterans' Administration hospital is needed for the protection of the individual or another.
13	10–628.
14 15 16 17 18 19 20	(a) (1) If an emergency evaluee cannot pay or does not have insurance that covers the charges for emergency services, an initial consultant examination by a physician <b>OR NURSE PRACTITIONER</b> , and transportation to an emergency facility and, for an involuntary admission of the emergency evaluee, to the admitting facility, the Department shall pay the appropriate party the actual cost or a reasonable rate for this service, whichever is lower, except that hospitals shall be paid at rates approved by the Health Services Cost Review Commission.
21 22 23	(2) The reasonable rate for the services provided under an emergency petition shall be calculated by using a methodology established by regulation and reasonably related to the actual cost.
24 25 26 27 28	(b) With respect to emergency admissions, the Department shall be subrogated against any insurance coverage available to the patient for charges relating to emergency service, initial consultant examination by a physician <b>OR NURSE PRACTITIONER</b> , and transportation to an emergency facility under Part IV of this subtitle.
29	13–701.
30 31 32	The Insect Sting Emergency Treatment Program is a program in the Department for the purpose of providing a means of authorizing certain individuals to administer life—saving treatment to persons who have severe adverse reactions to

insect stings when physician services or emergency medical services are not

1	13–704.
2 3	(a) To qualify for a certificate, an individual shall meet the requirements of this section.
4	(b) The applicant shall be of good moral character.
5	(c) The applicant shall be at least 18 years old.
6 7	(d) The applicant shall have, or reasonably expect to have, responsibility for at least one other person as a result of the individual's occupation or volunteer status.
8 9	(e) (1) The applicant shall successfully complete an educational training program approved by the Department.
10 11	(2) Educational training programs required under this subsection shall:
12 13	(i) 1. Be conducted by a physician licensed to practice medicine in this State under Title 14 of the Health Occupations Article; [and] OR
14 15 16 17 18	2. BE CONDUCTED BY A NURSE PRACTITIONER LICENSED TO PRACTICE REGISTERED NURSING IN THIS STATE UNDER TITLE 8 OF THE HEALTH OCCUPATIONS ARTICLE AND WHO IS CERTIFIED AS A NURSE PRACTITIONER JOINTLY BY THE STATE BOARD OF NURSING AND THE STATE BOARD OF PHYSICIANS; AND
19	(ii) Include training in:
$20 \\ 21$	1. The recognition of the symptoms of systemic reactions to insect stings; and
22 23	2. The proper administration of a subcutaneous injection of epinephrine.
24	Article - Transportation
25	13–616.
26	(a) (1) In this subtitle the following words have the meanings indicated.
27 28 29	(2) "CERTIFIED NURSE PRACTITIONER" MEANS AN INDIVIDUAL WHO IS LICENSED BY THE STATE BOARD OF NURSING TO PRACTICE REGISTERED NURSING AS DESCRIBED IN § 8–101 OF THE HEALTH

OCCUPATIONS ARTICLE AND WHO IS CERTIFIED AS A NURSE PRACTITIONER

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	JOINTLY BY THE PHYSICIANS.	STATE	BOARD	OF	NURSING	AND-	THE	STATE	BOARD	<del>-OF</del>
3	[(2)] <b>(3</b>	() "L	icensed cl	nirop	practor" mea	ans a c	hirop	ractor wl	no is licen	sed

- by the State Board of Chiropractic Examiners to practice chiropractic or chiropractic with the right to practice physical therapy as described in § 3–301 of the Health Occupations Article.
- 7 [(3)] (4) "Licensed optometrist" means an optometrist who is licensed 8 by the State Board of Examiners in Optometry to practice optometry as described in § 9 11–101 of the Health Occupations Article.
- [(4)] (5) "Licensed physician" means a physician, including a doctor of osteopathy, who is licensed by the State Board of Physicians to practice medicine as described in § 14–101 of the Health Occupations Article.
- 13 [(5)] **(6)** "Licensed podiatrist" means a podiatrist who is licensed by the State Board of Podiatric Medical Examiners to practice podiatry as described in § 16–101 of the Health Occupations Article.
- 16 (b) (1) The owner of any vehicle described in paragraph (3) of this subsection may apply to the Administration for the assignment to that vehicle of a special disability registration number and special disability registration plates, if a CERTIFIED NURSE PRACTITIONER, licensed physician, licensed chiropractor, licensed optometrist, or licensed podiatrist certifies, in accordance with paragraph (2) of this subsection, that the applicant:
- 22 (i) Has lung disease to such an extent that forced (respiratory) 23 expiratory volume for one second when measured by spirometry is less than one liter, 24 or arterial oxygen tension (PO2) is less than 60 mm/hg on room air at rest;
- 25 (ii) Has cardiovascular disease limitations classified in severity 26 as Class III or Class IV according to standards accepted by the American Heart 27 Association;
- 28 (iii) Is unable to walk 200 feet without stopping to rest;
- 29 (iv) Is unable to walk without the use of, or assistance from, a 30 brace, cane, crutch, another person, prosthetic device, or other assistive device;
- 31 (v) Requires a wheelchair for mobility;
- 32 (vi) Has lost a foot, leg, hand, or arm;
- 33 (vii) Has lost the use of a foot, leg, hand, or arm;

1	(viii) Has a permanent impairment of both eyes so that:
2 3	1. The central visual acuity is 20/200 or less in the better eye, with corrective glasses; or
4 5 6	2. There is a field defect in which the peripheral field has contracted to such an extent that the widest diameter of visual field subtends an angular distance no greater than 20 degrees in the better eye; or
7 8 9 10	(ix) Has a permanent disability that adversely impacts the ambulatory ability of the applicant and which is so severe that the person would endure a hardship or be subject to a risk of injury if the privileges accorded a person for whom a vehicle is specially registered under this section were denied.
11 12	(2) For the purposes of this section, the qualifying disabilities specified in paragraph (1) of this subsection shall be certified as follows:
13 14 15	(i) A licensed physician $\mathbf{OR}$ CERTIFIED NURSE PRACTITIONER may certify conditions specified in paragraph (1)(i) through (ix) of this subsection;
16 17	(ii) A licensed chiropractor or a licensed podiatrist may certify conditions specified in paragraph (1)(iii) through (vii) and (ix) of this subsection;
18 19	$(iii)  A \ licensed \ optometrist \ may \ certify \ the \ condition \ specified \ in \ paragraph \ (1)(viii) \ of \ this \ subsection; \ and$
20 21 22 23	(iv) Notwithstanding any provision of paragraph (1) of this subsection, the applicant may self-certify conditions specified in paragraph (1)(vi) of this subsection by appearing in person with proper identification at a full-service Motor Vehicle Administration office during normal business hours.
24	(3) This section applies only to:
25	(i) A Class A (passenger) vehicle;
26	(ii) A Class D (motorcycle) vehicle;
27	(iii) A Class M (multipurpose) vehicle;
28 29	
30 31 32	(v) A Class H, I, or J vehicle that is specially equipped for the transportation of individuals with disabilities and is used exclusively for the transportation of individuals with disabilities.

## **HOUSE BILL 1140**

1 2 3 4 5	(4) (i) Notwithstanding the provisions of paragraph (1) of this subsection, a nursing home, health care facility, adult day care facility, retirement home, or other facility that regularly provides transportation for individuals with disabilities may apply to the Administration for special disability registration for vehicles owned by the facility.
6 7	(ii) An application for special disability registration under this paragraph shall contain:
8 9 10 11	1. The certification of the owner or operator of the facility that the vehicle for which the registration is sought is used exclusively for the transportation of individuals with disabilities as described in paragraph (1) of this subsection; and
12 13	2. Any other information or documentation concerning the facility or the vehicle that the Administration requires.
14 15	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2008.
	Approved:
	Governor.
	Speaker of the House of Delegates.
	President of the Senate.