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Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing (Tenn. Code Ann. § 4-5-205).

Pursuant to Tenn. Code Ann. § 4-5-229, any new fee or fee increase promulgated by state agency rule shall take effect on July 1, following the expiration of the ninety (90) day period as provided in § 4-5-207. This section shall not apply to rules that implement new fees or fee increases that are promulgated as emergency rules pursuant to § 4-5-208(a) and to subsequent rules that make permanent such emergency rules, as amended during the rulemaking process. In addition, this section shall not apply to state agencies that did not, during the preceding two (2) fiscal years, collect fees in an amount sufficient to pay the cost of operating the board, commission or entity in accordance with § 4-29-121(b).

Agency/Board/Commission:	Department of Health
Division:	Tennessee Board of Nursing
Contact Person:	Mark S. Waters
Address:	665 Mainstream Drive, Nashville, Tennessee
Zip:	37243
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Revision Type (check all that apply):

- Amendment
 New
 Repeal

Rule(s) Revised (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only ONE Rule Number/Rule Title per row)

Chapter Number	Chapter Title
1000-01	Rules and Regulations of Registered Nurses
Rule Number	Rule Title
1000-01-.12	Fees
1000-01-.17	Interstate Nurse Licensure

Chapter Number	Chapter Title
1000-02	Rules and Regulations of Licensed Practical Nurses
Rule Number	Rule Title
1000-02-.16	Interstate Nurse Licensure

Chapter Number	Chapter Title
1000-04	Advanced Practice Nurses and Certificates of Fitness to Prescribe
Rule Number	Rule Title
1000-04-.05	Renewal of Certificate and Demonstration of Competency

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Chapter
1000-01

Rules and Regulations of Registered Nurses

Amendments

Rule 1000-01-.12 Fees is amended by inserting new subparagraphs (1)(j), (1)(k), and (1)(l) and re-lettering the remaining subparagraphs, so that as amended, the new subparagraphs (1)(j), (1)(k), and (1)(l) shall read:

(j)	Registered Nurse First Assistant Certificate	\$100.00
(k)	Registered Nurse First Assistant Certificate Renewal	\$100.00
(l)	Registered Nurse First Assistant Certificate Reinstatement	\$100.00

Authority: T.C.A. §§ 63-7-105, 63-7-106, 63-7-114, 63-7-128, 63-7-207 and 63-7-207(4).

Rule 1000-01-.17 Interstate Nurse Licensure is amended by deleting subparagraphs (2)(e) and (2)(f) in their entirety and substituting instead the following language, so that as amended, the new subparagraphs (2)(e) and (2)(f) shall read:

- (e) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ninety (90) days.
- (f) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the ninety (90) day period in subparagraph (e) shall be stayed until resolution of the pending investigation.

Authority: T.C.A. §§ 63-7-104, 63-7-105, 63-7-113, 63-7-115, 63-7-207, and 63-7-301 et seq.

Chapter
1000-02

Rules and Regulations of Licensed Practical Nurses

Amendments

Rule 1000-02-.16 Interstate Nurse Licensure is amended by deleting subparagraphs (2)(e) and (2)(f) in their entirety and substituting instead the following language, so that as amended, the new subparagraphs (2)(e) and (2)(f) shall read:

- (e) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ninety (90) days.
- (f) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the ninety (90) day period in subparagraph (e) shall be stayed until resolution of the pending investigation.

Authority: T.C.A. §§ 63-7-104, 63-7-105, 63-7-113, 63-7-115, 63-7-207, and 63-7-301 et seq.

Chapter
1000-04

Advanced Practice Nurses and Certificates of Fitness to Prescribe

Amendments

Rule 1000-04-.05 Renewal of Certificate and Demonstration of Competency is amended by deleting paragraph (2) in its entirety and substituting the following language, so that as amended, the new paragraph (2) shall read:

- (2) if in possession of a Certificate of Fitness pursuant to Rule 1000-04-.04, have successfully completed a minimum of two (2) contact hours of continuing education designed specifically to address controlled substance prescribing practices. The continuing education must include instruction in the Tennessee Department of Health's treatment guidelines on opioids, benzodiazepines, barbiturates, and carisoprodol, and may include such other topics as medicine addiction and risk management tools.

Authority: T.C.A. §§ 63-1-402, 63-7-114, 63-7-123, 63-7-126, and 63-7-207.

Chapter
1000-01

Rules and Regulations of Registered Nurses

New Rule
1000-01-.20

Registered Nurse First Assistant Certificate

- 1000-01-.01 Licensure By Examination
- 1000-01-.02 Licensure Without Examination: By Interstate Endorsement
- 1000-01-.03 Biennial Registration (Renewal)
- 1000-01-.04 Discipline of Licensees, Unauthorized Practice of Professional Nursing, Civil Penalties, Screening Panels, Subpoenas, Advisory Rulings, Declaratory Orders, and Assessment of Costs
- 1000-01-.05 Schools - Approval
- 1000-01-.06 Schools - Philosophy, Purpose, Administration, Organization, and Finance
- 1000-01-.07 Schools – Faculty
- 1000-01-.08 Schools – Students
- 1000-01-.09 Schools - Curriculum, Instruction, Evaluation
- 1000-01-.10 Schools - Educational Facilities
- 1000-01-.11 Definitions
- 1000-01-.12 Fees
- 1000-01-.13 Unprofessional Conduct and Negligence, Habits or Other Cause
- 1000-01-.14 Standards of Nursing Competence
- 1000-01-.15 Scope of Practice
- 1000-01-.16 Consumer Right-To-Know Requirements
- 1000-01-.17 Interstate Nurse Licensure
- 1000-01-.18 Free Health Clinic and Volunteer Practice Requirements
- 1000-01-.19 Advertising
- 1000-01-.20 Registered Nurse First Assistant Certificate

1000-01-.20 Registered Nurse First Assistant Certificate. To be issued a certificate as a registered nurse first assistant with privileges to hold oneself out as a registered nurse first assistant or use the abbreviation RNFA, the applicant must meet all of the following requirements:

- (1) A current, unencumbered license as a registered nurse under T.C.A. Title 63, Chapter 7, or current unencumbered licensure as a registered nurse with the multistate licensure privilege to practice in Tennessee;
- (2) A current certification in perioperative nursing;

- (3) Successful completion of a registered nurse first assistant education program that meets the education standard of the Association of Perioperative Registered Nurses for a registered nurse first assistant;
- (4) Payment of the applicable fee;
- (5) Completion of the appropriate application signed under penalty of perjury.

Authority: T.C.A. §§ 63-7-128, 63-7-207, and 63-7-302.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Brent Earwood	X				
Lisa A Heaton	X				
Mark Allen Young	X				
Martha M. Buckner	X				
Leslie Nelson Akins	X				
Lee Ann Stearnes	X				
Kathleen Harkey	X				
Marietha O. Silvers	X				
Juanita Turnipseed	X				
Arthur L. Thompson	X				
Janell Rae Cecil	X				

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Tennessee Board of Nursing (board/commission/ other authority) on 12/04/2014 (mm/dd/yyyy), and is in compliance with the provisions of T.C.A. § 4-5-222.

I further certify the following:

Notice of Rulemaking Hearing filed with the Department of State on: 09/03/14 (mm/dd/yy)

Rulemaking Hearing(s) Conducted on: (add more dates). 12/04/14 (mm/dd/yy)

Date: 12/9/2014

Signature: Mark S. Waters

Name of Officer: Mark S. Waters

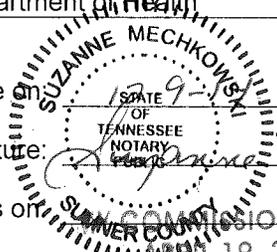
Deputy General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on 12-9-14

Notary Public Signature: Suzanne Mechkowski

My commission expires on APRIL 19, 2017



All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.

Herbert H. Slatery III
 Herbert H. Slatery III
 Attorney General and Reporter
3/20/2015
 Date

Department of State Use Only

Filed with the Department of State on:

3/24/15

Effective on:

6/22/15

Tre Hargett

Tre Hargett
Secretary of State

SECRETARY OF STATE
RECEIVED

2015 MAR 24 PM 4: 13

Public Hearing Comments

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. § 4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

There were no comments, either written or oral.

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

- (1) **The extent to which the rule or rules may overlap, duplicate, or conflict with other federal, state, and local governmental rules.**

These rules do not overlap, duplicate, or conflict with other federal, state, or local governmental rules.

- (2) **Clarity, conciseness, and lack of ambiguity in the rule or rules.**

These rules exhibit clarity, conciseness, and lack of ambiguity.

- (3) **The establishment of flexible compliance and/or reporting requirements for small businesses.**

These rules do not create flexible compliance and/or reporting requirements for small businesses.

- (4) **The establishment of friendly schedules or deadlines for compliance and/or reporting requirements for small businesses.**

These rules do not involve schedules or deadlines for compliance or reporting requirements for small businesses.

- (5) **The consolidation or simplification of compliance or reporting requirements for small businesses.**

These rules do not consolidate or simplify compliance reporting requirements for small businesses.

- (6) **The establishment of performance standards for small businesses as opposed to design or operational standards required in the proposed rule.**

These rules do not establish performance, design, or operational standards.

- (7) **The unnecessary creation of entry barriers or other effects that stifle entrepreneurial activity, curb innovation, or increase costs.**

These rules do not create unnecessary barriers or stifle entrepreneurial activity or innovation.

STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

Name of Board, Committee or Council: Tennessee Board of Nursing

Rulemaking hearing date: December 4, 2014

- 1. Type or types of small business and an identification and estimate of the number of small businesses subject to the proposed rule that would bear the cost of, and/or directly benefit from the proposed rule:**

These rules will affect all Advance Practice Nurses holding Certificates of Fitness and their employers, all endorsement applicants holding multistate practice privileges, and all registered nurses wishing to practice as RNFAs. These individuals and businesses will bear the cost of and directly benefit from the proposed rules.

- 2. Projected reporting, recordkeeping and other administrative costs required for compliance with the proposed rule, including the type of professional skills necessary for preparation of the report or record:**

These rules should have a minimal impact on reporting, recordkeeping and other administrative costs.

- 3. Statement of the probable effect on impacted small businesses and consumers:**

Small businesses and consumers will be positively affected by the proposed rules.

- 4. Description of any less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of the proposed rule that may exist, and to what extent, such alternative means might be less burdensome to small business:**

There are no less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of the proposed rules.

- 5. Comparison of the proposed rule with any federal or state counterparts:**

Federal: None.

State: Currently, twenty-four states have adopted the Nurse Licensure Compact (NLC).

- 6. Analysis of the effect of the possible exemption of small businesses from all or any part of the requirements contained in the proposed rule.**

These proposed rules do not provide for any exemptions of small businesses.

Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 “any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments.” (See Public Chapter Number 1070 (<http://state.tn.us/sos/acts/106/pub/pc1070.pdf>) of the 2010 Session of the General Assembly)

The proposed rule amendments should not have a financial impact on local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

Amendment 1000-01-.12: adds fees for registered nurse first assistants
Amendment 1000-01-.17: changes temporary licensure status from thirty days to ninety days
Amendment 1000-01-.20: creates certificate as a registered nurse first assistant
Amendment 1000-02-.16: changes temporary licensure status from thirty days to ninety days
Amendment 1000-04-.05: requires two hours of continuing education specifically address prescribing practices

- (B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

The amendments to rules 1000-01-.17 and 1000-02-.16 are necessary to comply with a rule change passed by the National Licensure Compact Administrators on November 13, 2013. The change allows a nurse from another compact state to practice under his current compact licensure for up to ninety (90) days following a change of residence to Tennessee, before the nurse becomes licensed in Tennessee.

The amendment to rule 1000-04-.02 is necessary to comply with Public Chapter No. 430, passed by the 108th General Assembly and signed by the Governor on May 16, 2013. This statute requires that two hours of continuing education credits specifically address prescribing practices and requires that these classes include instruction in the department's treatment guidelines on opioids, benzodiazepines, barbiturates, and carisoprodol, and may include such other topics as medicine addiction, risk management tools, and other topics as approved by the respective licensing boards.

The amendment to rule 1000-01-.20 would provide a procedure to those registered nurses seeking a certificate as a Registered Nurse First Assistant and is necessary to comply with Public Chapter No. 953, passed by the General Assembly and signed by the Governor on May 19, 2014.

- (C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

These rules will affect all Advance Practice Nurses holding Certificates of Fitness and their employers, all endorsement applicants holding multistate practice privileges, and all registered nurses wishing to practice as RNFAs. No one from these groups urged adoption of these rules at the rule making hearing.

- (D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

None.

- (E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

These rule amendments should not result in any increase or decrease in state and local government revenues or expenditures.

- (F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Mark. S. Waters, Deputy General Counsel, Department of Health

(G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Mark. S. Waters, Deputy General Counsel, Department of Health

(H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243, (615) 741-1611,
Mark.S.Waters@tn.gov.

(I) Any additional information relevant to the rule proposed for continuation that the committee requests.

None.

RULES AND REGULATIONS OF REGISTERED NURSES CHAPTER 1000-01

1000-01-.12 FEES.

(1) The Tennessee Board of Nursing hereby establishes fees as follows:

Fee	Amount
(a) R.N. Examination (R.N. applicants may also be required to pay a fee directly to the National Council of State Boards of Nursing.)	\$ 90.00
(b) R.N. Re-examination (R.N. applicants may also be required to pay a fee directly to the National Council of State Boards of Nursing.)	\$100.00
(c) R.N. Temporary Permit	\$ 25.00
(d) R.N. Endorsement	\$105.00
(e) R.N. Renewal	\$ 90.00
(f) R.N. Reinstatement	\$100.00
(g) R.N. Verification	\$ 25.00
(h) Biennial State Regulatory Fee (To be paid whenever an application for examination, re-examination, endorsement, renewal, or reinstatement is submitted.)	\$ 10.00
(i) Certificate of Fitness	\$200.00
<u>(j) Registered Nurse First Assistant Certificate</u>	<u>\$100.00</u>
<u>(k) Registered Nurse First Assistant Certificate Renewal</u>	<u>\$100.00</u>
<u>(l) Registered Nurse First Assistant Certificate Reinstatement</u>	<u>\$100.00</u>
<u>(m)</u> Change of Name	\$ 0.00
<u>(n)</u> Subparagraphs (a), (b), (d), and (e) include a \$15.00 fee to support impaired nurses.	

(2) Fees paid to the Tennessee Board of Nursing are not refundable.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-7-105, 63-7-106, 63-7-114, 63-7-128, 63-7-207 and 63-7-207(4).

1000-01-.17 INTERSTATE NURSE LICENSURE. Pursuant to the Interstate Nurse Licensure Compact, a license to practice registered nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in such party state.

- (1) Definitions. As used in this rule, the following terms shall have the following meanings ascribed to them:
 - (a) "Alternative program" means a voluntary, non-disciplinary monitoring program approved by a nurse licensing board.
 - (b) "Board" means party state's regulatory body responsible for issuing nurse licenses.
 - (c) "Coordinated licensure information system" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of state nurse licensing boards.
 - (d) "Current significant investigative information" means:
 1. Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
 2. Investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.
 - (e) "Home state" means the party state which is the nurse's primary state of residence.
 - (f) "Information System" means the coordinated licensure information system.
 - (g) "Interstate Nurse Licensure Compact" means the uniform legislation which is substantially similar to Tennessee's Public Chapter 538 of the Public Acts of 2002, which, when enacted into law by participating states, establishes multistate licensure privileges for registered nurses and licensed practical nurses.
 - (h) "Multistate licensure privilege" means current, official authority from a remote state permitting the practice of nursing as a registered nurse in such party state.
 - (i) "Nurse" means a registered nurse as that term is defined by each party's state practice laws.
 - (j) "Party state" means any state that has adopted the Interstate Nurse Licensure Compact.
 - (k) "Primary state of residence" means the state of a person's declared fixed permanent and principal home for legal purposes; domicile.
 - (l) "Public" means any individual or entity other than designated staff or representatives of party state boards or the National Council of State Boards of Nursing, Inc.

- (m) "Remote state" means a party state, other than the home state:
1. Where the patient is located at the time nursing care is provided; or
 2. In the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located.
- (2) Issuance of License by a Compact Party State – As of July 1, 2005, no applicant for initial licensure may be issued a compact license granting a multi-state privilege to practice unless the applicant first obtains a passing score on the applicable National Council Licensure Examination (NCLEX) or its predecessor examination used for licensure.
- (a) A nurse applying for a license in a home party state shall produce evidence of the nurse's primary state of residence. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include but is not limited to:
1. Driver's license with a home address;
 2. Voter registration card displaying a home address; or
 3. Federal income tax return declaring the primary state of residence; or
 4. Military Form No. 2058 – state of legal residence certificate; or
 5. W2 from US Government or any bureau, division or agency thereof indicating the declared state of residence.
- (b) A nurse on a visa from another country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.
- (c) A license issued by a party state is valid for practice in all other party states unless clearly designated as valid only in the state which issued the license.
- (d) When a party state issues a license authorizing practice only in that state and not authorizing practice in other party states (i.e. a single state license), the license shall be clearly marked with words indicating that it is valid only in the state of issuance.
- (e) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ~~ninety~~ninety (~~thirty~~930) days.
- (f) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the ~~ninety~~ninety (~~thirty~~930) day period in subparagraph (e) shall be stayed until resolution of the pending investigation.
- (g) The former home state license shall no longer be valid upon the issuance of a new home state license.
- (h) If a decision is made by the new home state denying licensure, the new home state shall notify the former home state within ten (10) business days and the former home state may take action in accordance with that state's laws and rules.

(3) Limitations on Multistate Licensure Privilege – Discipline

- (a) Home state boards shall include in all licensure disciplinary orders and/or agreements that limit practice and/or require monitoring the requirement that the licensee subject to said order and/or agreement will agree to limit the licensee's practice to the home state during the pendency of the disciplinary order and/or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from both the home state and such other party state boards.
- (b) An individual who had a license which was surrendered, revoked, suspended, or an application denied for cause in a prior state of primary residence, may be issued a single state license in a new primary state of residence until such time as the individual would be eligible for an unrestricted license by the prior state(s) of adverse action. Once eligible for licensure in the prior state(s), a multistate license may be issued.

(4) Information System

(a) Levels of access

- 1. The public shall have access to nurse licensure information contained in the Information System limited to:
 - (i) The nurse's name,
 - (ii) Jurisdiction(s) of licensure,
 - (iii) License expiration date(s),
 - (iv) Licensure classification(s) and status(es),
 - (v) Public emergency and final disciplinary actions, as defined by contributing state authority; and
 - (vi) The status of multistate licensure privileges.
 - 2. Non-party state boards shall have access to all Information System data except current significant investigative information and other information as limited by contributing party state authority.
 - 3. Party state boards shall have access to all Information System data contributed by the party states and other information as limited by contributing non-party state authority.
- (b) The licensee may request in writing to the home state board to review the data relating to the licensee in the Information System. In the event a licensee asserts that any data relating to him or her is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The Board shall verify and within ten (10) business days correct inaccurate data to the Information System.
- (c) The Board shall report to the Information System within ten (10) business days:
- 1. Disciplinary action, agreement or order requiring participation in alternative programs or which limit practice or require monitoring (except agreements and orders relating to participation in alternative programs required to remain nonpublic by contributing state authority)

2. Dismissal of complaint, and
 3. Changes in status of disciplinary action, or licensure encumbrance.
- (d) Current significant investigative information shall be deleted from the Information System within ten (10) business days upon report of disciplinary action, agreement or order requiring participation in alternative programs or agreements which limit practice or require monitoring or dismissal of a complaint.
- (e) Changes to licensure information in the Information System shall be completed within ten (10) business days upon notification by a board.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-7-104, 63-7-105, 63-7-113, 63-7-115, 63-7-207, and 63-7-301 et seq. **Administrative History:** Original rule filed April 4, 2003; effective June 18, 2003. Amendment filed December 16, 2005; effective March 1, 2006. Repeal and new rule filed August 5, 2011; effective November 3, 2011.

1000-01-20 REGISTERED NURSE FIRST ASSISTANT CERTIFICATE. To be issued a certificate as a registered nurse first assistant with privileges to hold oneself out as a registered nurse first assistant or use the abbreviation RNFA, the applicant must meet all of the following requirements:

- (1) A current, unencumbered license as a registered nurse under T.C.A. Title 63, Chapter 7, or current unencumbered licensure as a registered nurse with the multistate licensure privilege to practice in Tennessee;
- (2) A current certification in perioperative nursing;
- (3) Successful completion of a registered nurse first assistant education program that meets the education standard of the Association of Perioperative Registered Nurses for a registered nurse first assistant;
- (4) Payment of the applicable fee;
- (5) Completion of the appropriate application signed under penalty of perjury.

Authority: T.C.A. §§63-7-128, 63-7-207, and 63-7-302.

(Rule 1000-02-.15, continued)

1000-02-.16 INTERSTATE NURSE LICENSURE. Pursuant to the Interstate Nurse Licensure Compact, a license to practice practical nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a practical nurse in such party state.

- (1) Definitions. As used in this rule, the following terms shall have the following meanings ascribed to them:
 - (a) "Alternative program" means a voluntary, non-disciplinary monitoring program approved by a nurse licensing board.
 - (b) "Board" means party state's regulatory body responsible for issuing nurse licenses.
 - (c) "Coordinated licensure information system" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of state nurse licensing boards.
 - (d) "Current significant investigative information" means:
 1. Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
 2. Investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.
 - (e) "Home state" means the party state which is the nurse's primary state of residence.
 - (f) "Information System" means the coordinated licensure information system.
 - (g) "Interstate Nurse Licensure Compact" means the uniform legislation which is substantially similar to Tennessee's Public Chapter 538 of the Public Acts of 2002, which, when enacted into law by participating states, establishes multistate licensure privileges for registered nurses and licensed practical nurses.
 - (h) "Multistate licensure privilege" means current, official authority from a remote state permitting the practice of nursing as a practical nurse in such party state.
 - (i) "Nurse" means a practical nurse as that term is defined by each party's state practice laws.
 - (j) "Party state" means any state that has adopted the Interstate Nurse Licensure Compact.
 - (k) "Primary state of residence" means the state of a person's declared fixed permanent and principal home for legal purposes; domicile.
 - (l) "Public" means any individual or entity other than designated staff or representatives of party state boards or the National Council of State Boards of Nursing, Inc.
 - (m) "Remote state" means a party state, other than the home state:
 1. Where the patient is located at the time nursing care is provided; or

(Rule 1000-02-.15, continued)

2. In the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located.
- (2) Issuance of License by a Compact Party State – As of July 1, 2005, no applicant for initial licensure may be issued a compact license granting a multi-state privilege to practice unless the applicant first obtains a passing score on the applicable National Council Licensure Examination (NCLEX) or its predecessor examination used for licensure.
- (a) A nurse applying for a license in a home party state shall produce evidence of the nurse's primary state of residence. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include but is not limited to:
 1. Driver's license with a home address;
 2. Voter registration card displaying a home address; or
 3. Federal income tax return declaring the primary state of residence; or
 4. Military Form No. 2058 – state of legal residence certificate; or
 5. W2 from US Government or any bureau, division or agency thereof indicating the declared state of residence.
 - (b) A nurse on a visa from another country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.
 - (c) A license issued by a party state is valid for practice in all other party states unless clearly designated as valid only in the state which issued the license.
 - (d) When a party state issues a license authorizing practice only in that state and not authorizing practice in other party states (i.e. a single state license), the license shall be clearly marked with words indicating that it is valid only in the state of issuance.
 - (e) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ~~ninety~~ninety (~~90~~90) days.
 - (f) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the ~~ninety~~ninety (~~90~~90) day period in subparagraph (e) shall be stayed until resolution of the pending investigation.
 - (g) The former home state license shall no longer be valid upon the issuance of a new home state license.
 - (h) If a decision is made by the new home state denying licensure, the new home state shall notify the former home state within ten (10) business days and the former home state may take action in accordance with that state's laws and rules.
- (3) Limitations on Multistate Licensure Privilege – Discipline

(Rule 1000-02-.15, continued)

- (a) Home state boards shall include in all licensure disciplinary orders and/or agreements that limit practice and/or require monitoring the requirement that the licensee subject to said order and/or agreement will agree to limit the licensee's practice to the home state during the pendency of the disciplinary order and/or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from both the home state and such other party state boards.
 - (b) An individual who had a license which was surrendered, revoked, suspended, or an application denied for cause in a prior state of primary residence, may be issued a single state license in a new primary state of residence until such time as the individual would be eligible for an unrestricted license by the prior state(s) of adverse action. Once eligible for licensure in the prior state(s), a multistate license may be issued.
- (4) Information System
- (a) Levels of access
 1. The public shall have access to nurse licensure information contained in the Information System limited to:
 - (i) The nurse's name,
 - (ii) Jurisdiction(s) of licensure,
 - (iii) License expiration date(s),
 - (iv) Licensure classification(s) and status(es),
 - (v) Public emergency and final disciplinary actions, as defined by contributing state authority; and
 - (vi) The status of multistate licensure privileges.
 2. Non-party state boards shall have access to all Information System data except current significant investigative information and other information as limited by contributing party state authority.
 3. Party state boards shall have access to all Information System data contributed by the party states and other information as limited by contributing non-party state authority.
 - (b) The licensee may request in writing to the home state board to review the data relating to the licensee in the Information System. In the event a licensee asserts that any data relating to him or her is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The Board shall verify and within ten (10) business days correct inaccurate data to the Information System.
 - (c) The Board shall report to the Information System within ten (10) business days:
 1. Disciplinary action, agreement or order requiring participation in alternative programs or which limit practice or require monitoring (except agreements and orders relating to participation in alternative programs required to remain nonpublic by contributing state authority)
 2. Dismissal of complaint, and

(Rule 1000-02-.15, continued)

3. Changes in status of disciplinary action, or licensure encumbrance.
 - (d) Current significant investigative information shall be deleted from the Information System within ten (10) business days upon report of disciplinary action, agreement or order requiring participation in alternative programs or agreements which limit practice or require monitoring or dismissal of a complaint.
 - (e) Changes to licensure information in the Information System shall be completed within ten (10) business days upon notification by a board.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-7-104, 63-7-105, 63-7-113, 63-7-115, 63-7-207, and 63-7-301 et seq. **Administrative History:** Original rule filed April 4, 2003; effective June 18, 2003. Amendment filed December 16, 2005; effective March 1, 2006. Repeal and new rule filed August 5, 2011; effective November 3, 2011.

1000-04-.05 RENEWAL OF CERTIFICATE AND DEMONSTRATION OF COMPETENCY. All advanced practice nurses who hold a Tennessee registered nurse license must biennially renew their Tennessee registered nurse license pursuant to Rule 1000-01-.03 and must demonstrate competency as a registered nurse pursuant to Rule 1000-01-.14. Additionally, to demonstrate competency to hold and/or renew an Advanced Practice Nurse Certificate, an advanced practice nurse shall:

- (1) have initially obtained or maintained, during the most recent biennial renewal period, certification from a nationally recognized certification body appropriate to the nurse's specialty area; and
- (2) if in possession of a Certificate of Fitness pursuant to Rule 1000-04-.04, have successfully completed a minimum of ~~two one~~ (24) contact hours of continuing education course designed specifically to address controlled substance prescribing practices and offered through a continuing education provider approved by any certifying board of an advanced practice nurse, as the term advanced practice nurse is defined in T.C.A. § 63-7-126(a). The continuing education must include instruction in the Tennessee Department of Health's treatment guidelines on opioids, benzodiazepines, barbiturates, and carisoprodol, and may include such other topics as medicine addiction and risk management tools.

Authority: T.C.A. §§ 63-7-114, 63-7-123, 63-7-126, and 63-7-207. **Administrative History:** Original rule filed October 26, 1999; effective January 9, 2000. Repeal filed March 9, 2001; effective May 23, 2001. New rule filed May 28, 2004; effective August 11, 2004. Repeal filed December 16, 2005; effective March 1, 2006. Amendment filed December 20, 2012; effective March 20, 2013.