Illinois creates new independent practice license for nurses

Rick L. Hindmand | Tuesday, June 18, 2019

On June 14, 2019, the Illinois Department of Financial and Professional Regulation (IDFPR) issued final regulations allowing advanced practice registered nurses (APRNs) who satisfy training and education requirements to practice independently of physicians.

The regulations implement 2017 amendments to the Illinois Nurse Practice Act by establishing a full practice authority licensing process so that Illinois-licensed APRNs can avoid the need for a collaborative agreement with a physician. The principal licensure requirements are:

- Certification as a nurse practitioner, nurse midwife or clinical nurse specialist.
- Continuing education and training (at least 250 hours).
- At least 4,000 hours of clinical experience within the APRN’s area of certification after first attaining national certification. The clinical experience must be in collaboration with physicians and attested to by the APRN and the collaborating physicians or (for APRNs in hospital settings) by the hospital medical staff committee or its designee.

The new license will expand APRN scope of practice by authorizing qualified APRNs to:

- Practice without a collaborative agreement in all practice settings consistent with national certification.
- Use local anesthetic, but not perform operative surgery.
- Prescribe, administer and dispense over the counter medications, legend drugs and Schedules II controlled substances.
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- **In order to prescribe benzodiazepines and Schedule II narcotic drugs the APRN must have a consultation relationship and will be subject to additional requirements and restrictions.**
- **Dispensing of prescription drugs will require satisfaction of record-keeping, labelling and written prescription requirements similar to those that apply to physicians.**

The amended regulations also:
- Expand APRN continuing education requirements from 50 to 80 hours per 2 year license cycle.
- Require an APRN who has a doctorate and self-identifies as a doctor to clarify that he or she is not a physician.
- Update "advanced practice nurse" and "APN," to "advanced practice registered nurse" and "APRN," respectively.
- Revise the requirements for written collaborative agreements between APRNs and physicians, dentists and podiatric physicians.
- Extend the facility-based exemption (which currently allows APRNs to provide services in licensed hospitals and ambulatory surgical treatment centers without a collaborating agreement or prescriptive authority) to hospital affiliates.
- Allow APRNs in a hospital, hospital affiliate or ASTC setting to complete discharge prescriptions.

For more information, please contact the attorney listed below.

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**Team member bio**