

House Bill 2930

Sponsored by Representatives KENY-GUYER, KENNEMER; Representatives FREDERICK, GREENLICK, LIVELY, NOSSE, SMITH WARNER, WEIDNER, Senators SHIELDS, STEINER HAYWARD

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires hospital to adopt rules granting admitting privileges to licensed, certified nurse midwife nurse practitioner. Prohibits hospital from requiring licensed, certified nurse midwife nurse practitioner to co-admit patients with physician who has admitting privileges. Prohibits health care facility from denying voting rights of medical staff to nurse practitioner who is granted admitting privileges at facility.

A BILL FOR AN ACT

1
2 Relating to nurse practitioners; amending ORS 441.064 and 441.055.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1.** ORS 441.064 is amended to read:

5 441.064. (1) The rules of any hospital in this state may grant admitting privileges to nurse
6 practitioners licensed and certified under ORS 678.375 for purposes of patient care, subject to hos-
7 pital and medical staff bylaws, rules and regulations governing admissions and staff privileges.

8 (2) Rules shall be in writing and may include, but need not be limited to:

9 (a) Limitations on the scope of privileges;

10 (b) Monitoring and supervision of nurse practitioners in the hospital by physicians who are
11 members of the medical staff;

12 (c) A requirement that a nurse practitioner co-admit patients with a physician who is a member
13 of the medical staff; and

14 (d) Qualifications of nurse practitioners to be eligible for privileges, including but not limited
15 to requirements of prior clinical and hospital experience.

16 (3) The rules may also regulate the admissions and the conduct of nurse practitioners while
17 using the facilities of the hospital and may prescribe procedures whereby a nurse practitioner's
18 privileges may be suspended or terminated.

19 (4) The hospital may refuse [*such*] **admitting** privileges to nurse practitioners only upon the
20 same basis that privileges are refused to other medical providers. **A hospital shall have a process**
21 **by which a nurse practitioner may appeal the hospital's suspension, termination or refusal**
22 **of privileges that includes the following rights:**

23 (a) **The right to a written explanation of the reason for the action taken by the hospital;**

24 (b) **The right to present testimony and evidence;**

25 (c) **The right to be represented by retained counsel;**

26 (d) **The right to a written decision based on the testimony and evidence presented; and**

27 (e) **The right to inspect and copy a complete record of all preliminary and final decisions**
28 **regarding the nurse practitioner's admitting privileges.**

29 (5) **The rules of any hospital in this state must grant admitting privileges to a licensed**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 **registered nurse who is certified by the Oregon State Board of Nursing as a nurse midwife**
 2 **nurse practitioner. The rules must be subject to hospital and medical staff bylaws, rules and**
 3 **regulations governing admissions and staff privileges and may not:**

4 (a) **Include a requirement that a nurse midwife nurse practitioner co-admit patients with**
 5 **a physician who is a member of the medical staff; or**

6 (b) **Prevent a licensed registered nurse who is certified by the Oregon State Board of**
 7 **Nursing as a nurse midwife nurse practitioner and who is granted admitting privileges from**
 8 **exercising the voting rights of medical staff membership.**

9 [(4)] (6) For purposes of this section, “physician” has the meaning given the term in ORS
 10 677.010.

11 **SECTION 2.** ORS 441.055 is amended to read:

12 441.055. (1) The governing body of each health care facility shall be responsible for the operation
 13 of the facility, the selection of the medical staff and the quality of care rendered in the facility. The
 14 governing body shall:

15 (a) Ensure that all health care personnel for whom state licenses, registrations or certificates
 16 are required are currently licensed, registered or certified;

17 (b) Ensure that physicians **and nurse practitioners** admitted to practice in the facility are
 18 granted privileges consistent with their individual training, experience and other qualifications;

19 (c) Ensure that procedures for granting, restricting and terminating privileges exist and that
 20 such procedures are regularly reviewed to ensure their conformity to applicable law;

21 (d) Ensure that physicians **and nurse practitioners** admitted to practice in the facility are or-
 22 ganized into a medical staff in such a manner as to effectively review the professional practices of
 23 the facility for the purposes of reducing morbidity and mortality and for the improvement of patient
 24 care; and

25 (e) Ensure that a physician **or nurse practitioner** is not denied medical staff membership or
 26 privileges at the facility solely on the basis that the physician **or nurse practitioner** holds medical
 27 staff membership or privileges at another health care facility.

28 (2) The physicians **and nurse practitioners** organized into a medical staff pursuant to sub-
 29 section (1) of this section shall propose medical staff bylaws to govern the medical staff. The bylaws
 30 shall include, but not be limited to the following:

31 (a) Procedures for physicians **and nurse practitioners** admitted to practice in the facility to
 32 organize into a medical staff pursuant to subsection (1) of this section;

33 (b) Procedures for ensuring that physicians **and nurse practitioners** admitted to practice in the
 34 facility are granted privileges consistent with their individual training, experience and other quali-
 35 fications;

36 (c) Provisions establishing a framework for the medical staff to nominate, elect, appoint or re-
 37 move officers and other persons to carry out medical staff activities with accountability to the
 38 governing body;

39 (d) Procedures for ensuring that physicians admitted to practice in the facility are currently li-
 40 censed by the Oregon Medical Board **and that nurse practitioners are currently licensed by the**
 41 **Oregon State Board of Nursing;**

42 (e) Procedures for ensuring that the facility’s procedures for granting, restricting and terminat-
 43 ing privileges are followed and that such procedures are regularly reviewed to assure their con-
 44 formity to applicable law; and

45 (f) Procedures for ensuring that physicians **and nurse practitioners** provide services within the

1 scope of the privileges granted by the governing body.

2 (3) Amendments to medical staff bylaws shall be accomplished through a cooperative process
3 involving both the medical staff and the governing body. Medical staff bylaws shall be adopted, re-
4 pealed or amended when approved by the medical staff and the governing body. Approval shall not
5 be unreasonably withheld by either. Neither the medical staff nor the governing body shall withhold
6 approval if such repeal, amendment or adoption is mandated by law, statute or regulation or is
7 necessary to obtain or maintain accreditation or to comply with fiduciary responsibilities or if the
8 failure to approve would subvert the stated moral or ethical purposes of the institution.

9 (4) The Oregon Medical Board may appoint one or more physicians to conduct peer review for
10 a health care facility upon request of such review by all of the following:

- 11 (a) The physician whose practice is being reviewed.
- 12 (b) The executive committee of the health care facility's medical staff.
- 13 (c) The governing body of the health care facility.

14 (5) The physicians appointed pursuant to subsection (4) of this section shall be deemed agents
15 of the Oregon Medical Board, subject to the provisions of ORS 30.310 to 30.400 and shall conduct
16 peer review. Peer review shall be conducted pursuant to the bylaws of the requesting health care
17 facility.

18 (6) Any person serving on or communicating information to a peer review committee shall not
19 be subject to an action for damages for action or communications or statements made in good faith.

20 (7) All findings and conclusions, interviews, reports, studies, communications and statements
21 procured by or furnished to the peer review committee in connection with a peer review are confi-
22 dential pursuant to ORS 192.501 to 192.505 and 192.690 and all data is privileged pursuant to ORS
23 41.675.

24 (8) Notwithstanding subsection (7) of this section, a written report of the findings and conclu-
25 sions of the peer review shall be provided to the governing body of the health care facility who shall
26 abide by the privileged and confidential provisions set forth in subsection (7) of this section.

27 (9) Procedures for peer review established by subsections (4) to (8) of this section are exempt
28 from ORS chapter 183.

29 (10) The Oregon Health Authority shall adopt by rule standards for rural hospitals, as defined
30 in ORS 442.470, that specifically address the provision of care to postpartum and newborn patients
31 so long as patient care is not adversely affected.

32 (11) For purposes of this section, "physician" has the meaning given the term in ORS 677.010.

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