1	AN ACT
2	RELATING TO HEALTH CARE; ENACTING THE NURSE LICENSURE COMPACT;
3	REQUIRING REGISTRATION FOR MULTISTATE LICENSURE PRIVILEGES;
4	PROVIDING FOR A NURSE LICENSURE COMPACT ADMINISTRATOR; AMENDING
	AND ENACTING SECTIONS OF THE NURSING PRACTICE ACT; MAKING AN
5	APPROPRIATION.
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7	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
8	Section 1. A new section of the Nursing Practice Act is enacted to read:
9	"COMPACT ENTERED INTOThe Nurse Licensure Compact is entered into
10	law and entered into with all other jurisdictions legally joining therein in a form
11	substantially as follows:
12	"NURSE LICENSURE COMPACT
	Article 1 - Findings and Purpose
13	A. The party states find that:
14	(1) the health and safety of the public are affected by the
15	degree of compliance with and the effectiveness of enforcement activities related to
16	state nurse licensure laws;
17	(2) violation of nurse licensure and other laws regulating the
18	practice of nursing may result in injury or harm to the public;
19	(3) the expanded mobility of nurses and the use of advanced
	communication technologies as part of our nation's health care delivery system require
20	greater coordination and cooperation among states in the areas of nurse licensure
21	and regulation;
22	(4) new practice modalities and technology make compliance
23	with individual state nurse licensure laws difficult and complex; and
24	(5) the current system of duplicative licensure for nurses
25	practicing in multiple states is cumbersome and redundant to both nurses and states.
	B. The general purposes of this compact are to:

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1	(1) facilitate the states' responsibility to protect the public's
2	health and safety;
3	(2) ensure and encourage the cooperation of party states in
4	the areas of nurse licensure and regulation;
	(3) facilitate the exchange of information between party states
5	in the areas of nurse regulation, investigation and adverse actions;
6	(4) promote compliance with the laws governing the practice of
7	nursing in each jurisdiction; and
8	(5) invest all party states with the authority to hold a nurse
9	accountable for meeting all state practice laws in the state in which the patient is
10	located at the time care is rendered through the mutual recognition of party state
11	licenses.
	ARTICLE 2 - Definitions
12	As used in the Nurse Licensure Compact:
13	<ul><li>A. "adverse action" means a home or remote state action;</li></ul>
14	B. "alternative program" means a voluntary, non-disciplinary
15	monitoring program approved by a licensing board;
16	C. "coordinated licensure information system" means an integrated
17	process for collecting, storing and sharing information on nurse licensure and
18	enforcement activities related to nurse licensure laws, which is administered by a
	nonprofit organization composed of and controlled by state licensing boards;
19	D. "current significant investigative information" means:
20	(1) investigative information that a licensing board, after a
21	preliminary inquiry that includes notification and opportunity for the nurse to respond if
22	required by state law, has reason to believe is not groundless and, if proved true,
23	would indicate more than a minor infraction; or
24	(2) investigative information that indicates that the nurse
25	represents an immediate threat to public health and safety regardless of whether the
	nurse has been notified and had an opportunity to respond;

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1	E. "home state" means the party state that is the nurse's primary state	S B
2	of residence;	
3	F. "home state action" means an administrative, civil, equitable or	1 8
4	criminal action permitted by the home state's laws that are imposed on a nurse by the	6 P
_	home state's licensing board or other authority, including actions against an	а
5	individual's license such as: revocation, suspension, probation or any other action	g e
6	that affects a nurse's authorization to practice;	3
7	G. "licensing board" means a party state's regulatory body responsible	Ū
8	for issuing nurse licenses;	
9	H. "multistate licensure privilege" means current, official authority from	
10	a remote state permitting the practice of nursing as either a registered nurse or a	
11	licensed practical or vocational nurse in such party state. All party states have the	
	authority, in accordance with existing state due process law, to take actions against	
12	the nurse's privilege such as: revocation, suspension, probation or any other action	
13	which affects a nurse's authorization to practice;	
14	I. "nurse" means a registered nurse or licensed practical or vocational	
15	nurse, as those terms are defined by each party state's practice laws;	
16	J. "party state" means a state that has adopted the Nurse Licensure	
17	Compact;	
18	K. "remote state" means a party state, other than the home state:	
	(1) where the patient is located at the time nursing care is	
19	provided; or	
20	(2) in the case of the practice of nursing not involving a	
21	patient, in such party state where the recipient of nursing practice is located;	
22	L. "remote state action" means:	
23	(1) an administrative, civil, equitable or criminal action	
24	permitted by a remote state's laws that are imposed on a nurse by the remote state's	
	licensing board or other authority, including actions against a nurse's multistate	
25	licensure privilege to practice in the remote state; and	

(2) cease and desist orders and other injunctive or equitable
orders issued by remote states or the licensing boards thereof;
M. "state" means a state, territory or possession of the United States,
the District of Columbia or the Commonwealth of Puerto Rico; and
N. "state practice laws" means an individual party state's laws and
regulations that govern the practice of nursing, define the scope of nursing practice
and create the methods and grounds for imposing discipline. "State practice laws"
does not include the initial qualifications for licensure or requirements necessary to

## ARTICLE 3 - General Provisions and Jurisdiction

obtain and retain a license, except for qualifications or requirements of the home state.

A. 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. A license to practice licensed practical or vocational 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 licensed practical or vocational nurse in such party state. In order to obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as well as all other applicable state laws.

B. A party state may, in accordance with state due process laws, limit or revoke a multistate licensure privilege of any nurse to practice in the state and may take any other action under applicable state laws necessary to protect the health and safety of state citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.

C. A nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but shall include all

2	of nursing will subject a nurse to the jurisdiction of the nurse licensing board and the
3	courts, as well as the laws, in that party state.
4	D. The Nurse Licensure Compact does not affect additional
	requirements imposed by a party state for advanced practice registered nursing.
5	However, a multistate licensure privilege to practice registered nursing granted by a
6	party state shall be recognized by other party states as a license to practice registered
7	nursing if one is required by state law as a precondition for qualifying for advanced
8	practice registered nurse authorization.
9	E. Individuals not residing in a party state shall continue to be able to
10	apply for nurse licensure as provided for under the laws of each party state. However,
11	the license granted to these individuals will not be recognized as granting the privilege
	to practice nursing in any other party state unless explicitly agreed to by that party
12	state.
13	ARTICLE 4 - Application for Licensure in a Party State
14	A. Upon application for a license, the licensing board in a party state
15	shall ascertain, through the coordinated licensure information system, whether the
16	applicant has ever held, or is the holder of, a license issued by any other state,
17	whether there are any restrictions on the multistate licensure privilege and whether
18	any other adverse action by any state has been taken against the license.
	B. A nurse in a party state shall hold licensure in only one party state
19	at a time, issued by the home state.
20	C. A nurse who intends to change primary state of residence may
21	apply for licensure in the new home state in advance of such change. However, new

licenses will not be issued by a party state until after the nurse provides evidence of

change in primary state of residence satisfactory to the new home state's licensing

D. When a nurse changes primary state of residence by:

(1) moving from one party state to another party state, and

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1 nursing practice as defined by the state practice laws of the party state. The practice

2	no longer valid;
3	(2) moving from a nonparty state to a party state, and obtains
4	a license from the new home state, the individual state license issued by the nonparty
	state is not affected and will remain in full force if so provided by the laws of the
5	nonparty state; or
6	(3) moving from a party state to a nonparty state, the license
7	issued by the prior home state converts to an individual state license, valid only in the
8	former home state, without the multistate licensing privilege to practice in other party
9	states.
10	ARTICLE 5 - Adverse Actions
11	In addition to the general provisions described in Article 3 of the Nurse Licensure
	Compact, the following provisions apply.
12	A. The licensing board of a remote state shall promptly report to the
13	administrator of the coordinated licensure information system any remote state
14	actions, including the factual and legal basis for such action, if known. The licensing
15	board of a remote state shall also promptly report any significant current investigative
16	information yet to result in a remote state action. The administrator of the coordinated
17	licensure information system shall promptly notify the home state of any such reports.
18	B. The licensing board of a party state shall have the authority to
	complete any pending investigations for a nurse who changes primary state of
19	residence during the course of such investigations. It shall also have the authority to
20	take appropriate actions, and shall promptly report the conclusions of such
21	investigations to the administrator of the coordinated licensure information system.

The administrator of the coordinated licensure information system shall promptly notify

licensure privilege to practice within that party state. However, only the home state

has the power to impose adverse action against the license issued by the home state.

C. A remote state may take adverse action affecting the multistate

the new home state of any such actions.

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obtains a license from the new home state, the license from the former home state is

D. For purposes of imposing adverse action, the licensing board of the
home state shall give the same priority and effect to reported conduct received from a
remote state as it would if such conduct had occurred within the home state. In so
doing, it shall apply its own state laws to determine appropriate action.
F The home state may take adverse action based on the factual

E. The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action.

F. Nothing in the Nurse Licensure Compact shall override a party state's decision that participation in an alternative program may be used in lieu of licensure action and that such participation shall remain nonpublic if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.

ARTICLE 6 - Additional Authorities Invested in Party State Licensing Boards Notwithstanding any other powers, a party state licensing board shall have authority to:

A. if otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;

B. issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a licensing board in a party state for the attendance and testimony of witnesses or the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state where the witnesses or evidence is located;

C. issue cease and desist orders to limit or revoke a nurse's authority

1	to practice in the state; and	
2	D. promulgate uniform rules and regulations as provided for in Article	
3	8 of the Nurse Licensure Compact.	
4	ARTICLE 7 - Coordinated Licensure Information System	
	A. All party states shall participate in a cooperative effort to create a	
5	coordinated database of all licensed registered nurses and licensed practical or	
6	vocational nurses. This system will include information on the licensure and	
7	disciplinary history of each nurse as contributed by party states, to assist in the	
8	coordination of nurse licensure and enforcement efforts.	

B. Notwithstanding any other provision of law, all party state licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action and denials of applications and the reasons for such denials to the coordinated licensure information system.

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- C. Current significant investigative information shall be transmitted through the coordinated licensure information system only to party state licensing boards.
- D. Notwithstanding any other provision of law, all party state licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with nonparty states or disclosed to other entities or individuals without the express permission of the contributing party state.
- E. Any personally identifiable information obtained by a party state licensing board from the coordinated licensure information system may not be shared with nonparty states or disclosed to other entities or individuals except to the extent permitted by the laws of the party state contributing the information.
- F. Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing the information shall also be expunded from the coordinated licensure

2	G. The compact administrators, acting jointly with each other and in
3	consultation with the administrator of the coordinated licensure information system,
	shall formulate necessary and proper procedures for the identification, collection and
4	exchange of information under the Nurse Licensure Compact.
5	ARTICLE 8 - Compact Administration and Interchange of Information
6	A. The executive head of the licensing board, or the executive head's
7	designee, of a party state shall be the administrator of the Nurse Licensure Compact
8	for the state.
9	B. The compact administrator of each party state shall furnish to the
10	compact administrator of every other party state any information and documents,
	including but not limited to a uniform data set of investigations, identifying information,
11	licensure data and disclosable alternative program participation information to facilitate
12	the administration of the Nurse Licensure Compact.
13	C. Compact administrators shall have the authority to develop uniform
14	rules to facilitate and coordinate implementation of the Nurse Licensure Compact.
15	These uniform rules shall be adopted by party states, under the authority invested
16	under Subsection D of Article 6 of the Nurse Licensure Compact.
<b>17</b>	ARTICLE 9 - Immunity
	A party state or the officers or employees or agents of a party state licensing board
18	who act in accordance with the provisions of the Nurse Licensure Compact shall not be
19	liable on account of any act or omission in good faith while engaged in the
20	performance of their duties under that compact. "Good faith" as used in this article
21	does not include willful misconduct, gross negligence or recklessness.
22	ARTICLE 10 - Entry into Force, Withdrawal and Amendment
23	A. The Nurse Licensure Compact shall enter into force and become
24	effective as to any state when it has been enacted into the laws of that state. Any
_ <del>-</del>	party state may withdraw from that compact by enacting a statute repealing the same,

but such withdrawal shall not take effect until six months after the withdrawing state

1 information system.

in a remote state involved; and an individual mutually agreed upon by the compact

administrators of all the party states involved in the dispute; and

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1	(2) the decision of a majority of the arbitrators shall be final
2	and binding."."
3	Section 2. A new section of the Nursing Practice Act is enacted to read:
4	"NURSE LICENSURE COMPACT ADMINISTRATORDUTIESThe Nurse
	Licensure Compact administrator shall be the executive director of the board or his
5	designee and shall:
6	A. develop rules and make recommendations to the board concerning
7	the administration of the Nurse Licensure Compact, including procedures for reporting
8	an adverse disciplinary action taken by the board against a nurse practicing pursuant
9	to a multistate licensure privilege;
10	B. work with Nurse Licensure Compact administrators from other party
	states to communicate, provide and exchange information pertinent to the
11	administration of the Nurse Licensure Compact; and
12	C. provide pertinent information to the administrator of the coordinated
13	licensure information system and compile, for the board's use, information received
14	from that administrator pursuant to the Nurse Licensure Compact."
15	Section 3. A new section of the Nursing Practice Act is enacted to read:
16	"MULTISTATE LICENSURE PRIVILEGEREGISTRATIONFEERENEWAL
17	A. A nurse not licensed to practice in this state, whose home state is
	not New Mexico and who wishes to practice in this state pursuant to a multistate
18	licensure privilege as provided in the Nurse Licensure Compact shall register with the
19	board within thirty days after beginning to practice nursing in New Mexico. The nurse
20	shall complete a registration form that contains:
21	(1) the nurse's full name, home state residence address, as
22	well as a temporary residence address in New Mexico, if applicable, and phone
23	number;
24	(2) the identity of the nurse's home state and the type of
	nursing license the nurse holds in the home state, as well as a declaration of whether
25	the license held is current and in good standing; and

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1	(3) the name, address and phone number of the nurse's place
2	of nursing employment in New Mexico.
3	B. A nurse registering with the board pursuant to Subsection A of this
4	section may be required by the board to pay a registration fee set by the board not to
	exceed twenty-five dollars (\$25.00).
5	C. A nurse who practices nursing in New Mexico pursuant to a
6	multistate licensure privilege as provided in the Nurse Licensure Compact who wishes
7	to cease practicing in the state shall notify the board in writing of the date upon which
8	the nurse will no longer practice."
9	Section 4. Section 61-3-1 NMSA 1978 (being Laws 1968, Chapter 44, Section
10	1) is amended to read:
	"61-3-1. SHORT TITLEChapter 61, Article 3 NMSA 1978 may be cited as
11	the "Nursing Practice Act"."
12	Section 5. Section 61-3-3 NMSA 1978 (being Laws 1991, Chapter 190,
13	Section 2, as amended) is amended to read:
14	"61-3-3. DEFINITIONSAs used in the Nursing Practice Act:
15	A. "advanced practice" means the practice of professional registered
16	nursing by a registered nurse who has been prepared through additional formal
17	education as provided in Sections 61-3-23.2 through 61-3-23.4 NMSA 1978 to
	function beyond the scope of practice of professional registered nursing, including
18	certified nurse practitioners, certified registered nurse anesthetists and clinical nurse
19	specialists;
20	B. "board" means the board of nursing;
21	C. "certified nurse practitioner" means a registered nurse who is
22	licensed by the board for advanced practice as a certified nurse practitioner and
23	whose name and pertinent information are entered on the list of certified nurse
24	practitioners maintained by the board;
	D. "certified registered nurse anesthetist" means a registered nurse
25	who is licensed by the board for advanced practice as a certified registered nurse

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2	certified registered nurse anesthetists maintained by the board;
3	E. "clinical nurse specialist" means a registered nurse who is licensed
4	by the board for advanced practice as a clinical nurse specialist and whose name and
	pertinent information are entered on the list of clinical nurse specialists maintained by
5	the board;
6	F. "collaboration" means the cooperative working relationship with
7	another health care provider in the provision of patient care, and such collaborative
8	practice includes the discussion of patient diagnosis and cooperation in the
9	management and delivery of health care;
10	G. "emergency procedures" means airway and vascular access
	procedures;
11	H. "licensed practical nurse" means a nurse who practices licensed
12	practical nursing and whose name and pertinent information are entered in the
13	register of licensed practical nurses maintained by the board or a nurse who practices
14	licensed practical nursing pursuant to a multistate licensure privilege as provided in
15	the Nurse Licensure Compact;
16	I. "licensed practical nursing" means the practice of a directed scope
17	of nursing requiring basic knowledge of the biological, physical, social and behavioral
	sciences and nursing procedures, which practice is at the direction of a registered
18	nurse, physician or dentist licensed to practice in this state. This practice includes but
19	is not limited to:
20	(1) contributing to the assessment of the health status of
21	individuals, families and communities;
22	(2) participating in the development and modification of the
23	plan of care;
24	(3) implementing appropriate aspects of the plan of care
	commensurate with education and verified competence;
25	(4) collaborating with other health care professionals in the

1 anesthetist and whose name and pertinent information are entered on the list of

1	management of health care; and	S
2	(5) participating in the evaluation of responses to	В
3	interventions;	1 8
4	J. "Nurse Licensure Compact" means the agreement entered into	6 P
5	between New Mexico and other jurisdictions permitting the practice of professional	а
	registered nursing or licensed practical nursing pursuant to a multistate licensure	g e
6	privilege;	1
7	<ul><li>K. "nursing diagnosis" means a clinical judgment about individual,</li></ul>	4
8	family or community responses to actual or potential health problems or life	
9	processes, which judgment provides a basis for the selection of nursing interventions	
10	to achieve outcomes for which the person making the judgment is accountable;	
11	L. "practice of nursing" means assisting individuals, families or	
12	communities in maintaining or attaining optimal health, assessing and implementing a	
	plan of care to accomplish defined goals and evaluating responses to care and	
13	treatment. This practice is based on specialized knowledge, judgment and nursing	
14	skills acquired through educational preparation in nursing and in the biological,	
15	physical, social and behavioral sciences and includes but is not limited to:	
16	<ol><li>initiating and maintaining comfort measures;</li></ol>	
17	(2) promoting and supporting optimal human functions and	
18	responses;	
19	(3) establishing an environment conducive to well-being or to	
	the support of a dignified death;	
20	(4) collaborating on the health care regimen;	
21	(5) administering medications and performing	
22	treatments prescribed by a person authorized in this state or in any other state in the	
23	United States to prescribe them;	
24	(6) recording and reporting nursing observations,	
25	assessments, interventions and responses to health care;	
-	<ul><li>(7) providing counseling and health teaching;</li></ul>	

1	(8) delegating and supervising nursing interventions that may	S
2	be performed safely by others and are not in conflict with the Nursing Practice Act;	В
3	and	1 8
4	(9) maintaining accountability for safe and effective nursing	6 P
	care;	а
5	M. "professional registered nursing" means the practice of the full	g e
6	scope of nursing requiring substantial knowledge of the biological, physical, social and	1
7	behavioral sciences and of nursing theory and may include advanced practice	5
8	pursuant to the Nursing Practice Act. This practice includes but is not limited to:	
9	(1) assessing the health status of individuals, families and	
10	communities;	
11	(2) establishing a nursing diagnosis;	
	(3) establishing goals to meet identified health care needs;	
12	(4) developing a plan of care;	
13	(5) determining nursing intervention to implement the plan of	
14	care;	
15	(6) implementing the plan of care commensurate with	
16	education and verified competence;	
17	<li>(7) evaluating responses to interventions;</li>	
18	(8) teaching based on the theory and practice of nursing;	
	<ul><li>(9) managing and supervising the practice of nursing;</li></ul>	
19	(10) collaborating with other health care	
20	professionals in the management of health care; and	
21	(11) conducting nursing research;	
22	N. "registered nurse" means a nurse who practices professional	
23	registered nursing and whose name and pertinent information are entered in the	
24	register of licensed registered nurses maintained by the board or a nurse who	
25	practices professional registered nursing pursuant to a multistate licensure privilege	
45	as provided in the Nurse Licensure Compact; and	

1	O. "scope of practice" means the parameters within which nurses
2	practice based upon education, experience, licensure, certification and expertise."
3	Section 6. Section 61-3-5 NMSA 1978 (being Laws 1968, Chapter 44, Section
4	4, as amended) is amended to read:
	"61-3-5. LICENSE REQUIRED
5	A. Except as otherwise provided in the Nursing Practice Act, no person
6	shall use the title "nurse" unless the person is licensed or has been licensed in the
7	past as a registered nurse or licensed practical nurse under the Nursing Practice Act.
8	B. Except as otherwise provided in the Nursing Practice Act, unless
9	licensed as a registered nurse under the Nursing Practice Act, no person shall:
10	(1) practice professional nursing;
11	(2) use the title "registered nurse", "professional nurse",
	"professional registered nurse" or the abbreviation "R.N." or any other abbreviation
12	thereof or use any other title, abbreviation, letters, figures, signs or devices to indicate
13	or imply that the person is a registered nurse; or
14	(3) engage in a nursing specialty as defined by the board.
15	C. Except as otherwise provided in the Nursing Practice Act, unless
16	licensed as a licensed practical nurse under the Nursing Practice Act, no person shall:
17	(1) practice licensed practical nursing; or
18	(2) use the title "licensed practical nurse" or the abbreviation
19	"L.P.N." or any other abbreviation thereof or use any other title, abbreviation, letters,
	figures, signs or devices to indicate or imply that the person is a licensed practical
20	nurse.
21	D. Unless licensed as a certified nurse practitioner under the Nursing
22	Practice Act, no person shall:
23	(1) practice as a certified nurse practitioner; or
24	(2) use the title "certified nurse practitioner" or the
25	abbreviations "C.N.P." or "N.P." or any other title, abbreviation, letters, figures, signs
	or devices to indicate or imply that the person is a certified nurse practitioner.

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1	E. Unless licensed as a certified registered nurse anesthetist under	S
2	the Nursing Practice Act, no person shall:	В
3	(1) practice as a nurse anesthetist; or	1 8
4	(2) use the title "certified registered nurse anesthetist" or the	6 P
	abbreviation "C.R.N.A." or any other title, abbreviation, letters, figures, signs or	а
5	devices to indicate or imply that the person is a certified registered nurse anesthetist.	g e
6	F. Unless licensed as a clinical nurse specialist under the Nursing	1
7	Practice Act, no person shall:	7
8	(1) practice as a clinical nurse specialist; or	
9	(2) use the title "clinical nurse specialist" or the abbreviation	
10	"C.N.S." or any other title, abbreviation, letters, figures, signs or devices to indicate or	
11	imply that the person is a clinical nurse specialist.	
	G. No licensed nurse shall be prohibited from identifying himself or his	
12	licensure status."	
13	Section 7. Section 61-3-10 NMSA 1978 (being Laws 1968, Chapter 44,	
14	Section 7, as amended) is amended to read:	
15	"61-3-10. POWERSDUTIESThe board:	
16	A. shall adopt and revise such rules and regulations as may be	
17	necessary to enable it to carry into effect the provisions of the Nursing Practice Act	
18	and to maintain high standards of practice;	
	B. shall prescribe standards and approve curricula for educational	
19	programs preparing persons for licensure under the Nursing Practice Act;	
20	C. shall provide for surveys of educational programs preparing	
21	persons for licensure under the Nursing Practice Act;	
22	D. shall grant, deny or withdraw approval from educational programs	
23	for failure to meet prescribed standards, if a majority of the board concurs in the	
24	decision;	
25	E. shall provide for the examination, licensing and renewal of licenses	
	of applicants;	

1	F. shall conduct hearings upon charges relating to discipline of a
2	licensee or nurse not licensed to practice in New Mexico who is permitted to practice
3	professional registered nursing or licensed practical nursing in New Mexico pursuant
4	to a multistate licensure privilege as provided in the Nurse Licensure Compact or the
	denial, suspension or revocation of a license in accordance with the procedures of the
5	Uniform Licensing Act;
6	G. shall cause the prosecution of all persons, including firms,
7	associations, institutions and corporations, violating the Nursing Practice Act and have
8	the power to incur such expense as is necessary therefor;
9	H. shall keep a record of all proceedings;
10	<ol> <li>shall make an annual report to the governor;</li> </ol>
	J. shall appoint and employ a qualified registered nurse, who shall not
11	be a member of the board, to serve as executive officer to the board, who shall define
12	the duties and responsibilities of the executive officer, except that the power to grant,
13	deny or withdraw approval for schools of nursing or to revoke, suspend or withhold
14	any license authorized by the Nursing Practice Act shall not be delegated by the
15	board;
16	K. shall provide for such qualified assistants as may be necessary to
17	carry out the provisions of the Nursing Practice Act. Such employees shall be paid a
	salary commensurate with their duties;
18	L. shall, for the purpose of protecting the health and well-being of the
19	citizens of New Mexico and promoting current nursing knowledge and practice, adopt
20	rules and regulations establishing continuing education requirements as a condition of
21	license renewal and shall study methods of monitoring continuing competence;
22	M. may appoint advisory committees consisting of at least one
23	member who is a board member and at least two members expert in the pertinent field
24	of health care to assist it in the performance of its duties. Committee members may
	be reimbursed as provided in the Per Diem and Mileage Act;
<b>25</b>	N. many adapt and varies when and regulations designed to register

N. may adopt and revise rules and regulations designed to maintain

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1	an inactive status listing for registered nurses and licensed practical nurses;
2	O. may adopt rules and regulations to regulate the advanced practice
3	of professional registered nursing and expanded practice of licensed practical
4	nursing;
	P. shall license qualified certified nurse practitioners, certified
5	registered nurse anesthetists and clinical nurse specialists;
6	Q. shall register nurses not licensed to practice in New Mexico who are
7	permitted to practice professional registered nursing or licensed practical nursing in
8	New Mexico pursuant to a multistate licensure privilege as provided in the Nurse
9	Licensure Compact; and
10	R. shall adopt rules and regulations establishing standards for
11	authorizing prescriptive authority to certified nurse practitioners and clinical nurse
	specialists."
12	Section 8. Section 61-3-28 NMSA 1978 (being Laws 1968, Chapter 44,
13	Section 24, as amended) is amended to read:
14	"61-3-28. DISCIPLINARY PROCEEDINGSJUDICIAL REVIEW
15	APPLICATION OF UNIFORM LICENSING ACTLIMITATION
16	A. In accordance with the procedures contained in the Uniform
17	Licensing Act, the board may deny, revoke or suspend any license held or applied for
18	under the Nursing Practice Act, reprimand or place a licensee on probation or deny,
	limit or revoke the multistate licensure privilege of a nurse desiring to practice or
19	practicing professional registered nursing or licensed practical nursing as provided in
20	the Nurse Licensure Compact upon grounds that the licensee, applicant or nurse:
21	(1) is guilty of fraud or deceit in procuring or attempting to
22	procure a license or certificate of registration;
23	(2) is convicted of a felony;
24	(3) is unfit or incompetent;
25	(4) is intemperate or is addicted to the use of habit-forming
	drugs;

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2	(6) is guilty of unprofessional conduct as defined by the rules
3	and regulations adopted by the board pursuant to the Nursing Practice Act;
4	(7) has willfully or repeatedly violated any provisions of the
	Nursing Practice Act, including any rule or regulation adopted by the board pursuant
5	to that act; or
6	(8) was licensed to practice nursing in any jurisdiction, territory
7	or possession of the United States or another country and was the subject of
8	disciplinary action as a licensee for acts similar to acts described in this subsection. A
9	certified copy of the record of the jurisdiction, territory or possession of the United
10	States or another country taking the disciplinary action is conclusive evidence of the
	action.
11	B. Disciplinary proceedings may be instituted by any person, shall be
12	by complaint and shall conform with the provisions of the Uniform Licensing Act. Any
13	party to the hearing may obtain a copy of the hearing record upon payment of costs
14	for the copy.
15	C. Any person filing a complaint shall be immune from liability arising
16	out of civil action if the complaint is filed in good faith and without actual malice.
17	D. The board shall not initiate a disciplinary action more than two
	years after the date that it receives a complaint.
18	E. The time limitation contained in Subsection D of this section shall
19	not be tolled by any civil or criminal litigation in which the licensee or applicant is a
20	party, arising substantially from the same facts, conduct, transactions or occurrences
21	that would be the basis for the board's disciplinary action.
22	F. The board may recover the costs associated with the investigation
23	and disposition of a disciplinary proceeding from the nurse who is the subject of the
24	proceeding if the nurse is practicing professional registered nursing or licensed
	practical nursing pursuant to a multistate licensure privilege as provided in the Nurse
25	Licensure Compact."

(5) is mentally incompetent;

1	Section 9. TEMPORARY PROVISIONREPORTThe board of nursing shall
2	submit a report containing a recommendation concerning the continuation of New
3	Mexico's participation in the provisions of the Nurse Licensure Compact to the
4	legislature no later than November 20, 2007.
5	Section 10. EFFECTIVE DATEThe effective date of the
	provisions of this act is January 1, 2004.
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