

2021 Regular Session

HOUSE BILL NO. 181

BY REPRESENTATIVE DUSTIN MILLER

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

NURSES/REGISTERED: Provides relative to admitting privileges for psychiatric mental health nurse practitioners

1 AN ACT

2 To amend and reenact R.S. 28:51.1(A)(3)(introductory paragraph), 52(B), (E), and (G)(1),  
3 52.2(A), 52.3(B), and 53(L)(2) and (P)(1)(b), and R.S. 37:913(3)(b), relative to  
4 psychiatric mental health practitioners; to provide that psychiatric mental health  
5 nurse practitioners shall be allowed to prepare and execute orders for the admission  
6 of patients to licensed psychiatric hospitals; and to provide for related matters.

7 Be it enacted by the Legislature of Louisiana:

8 Section 1. R.S. 28:51.1(A)(3)(introductory paragraph), 52(B), (E), and (G)(1),  
9 52.2(A), 52.3(B), and 53(L)(2) and (P)(1)(b) are hereby amended and reenacted to read as  
10 follows:

11 §51.1. Treatment facility; staff membership and institutional privileges; certain  
12 healthcare providers

13 A.

14 \* \* \*

15 (3) Staff membership, specifically delineated institutional privileges, which  
16 may include the ability to prepare and execute orders for the admission of patients  
17 to a treatment facility, or both, granted to a psychiatric mental health nurse  
18 practitioner shall be conditioned upon all of the following requirements:

19 \* \* \*

1 §52. Voluntary admissions; general provisions

2 \* \* \*

3 B. Admitting physicians and psychiatric mental health nurse practitioners are  
4 encouraged to admit persons who have a mental illness or persons suffering from a  
5 substance-related or addictive disorder to treatment facilities on voluntary admission  
6 status whenever medically feasible.

7 \* \* \*

8 E. Each person admitted on a voluntary basis shall be informed of any other  
9 medically appropriate alternative treatment programs and treatment facilities known  
10 to the admitting physician or psychiatric mental health nurse practitioner and be  
11 given an opportunity to seek admission to alternative treatment programs or  
12 facilities.

13 \* \* \*

14 G.(1) No admission may be deemed voluntary unless the admitting physician  
15 or psychiatric mental health nurse practitioner determines that the person to be  
16 admitted has the capacity to make a knowing and voluntary consent to the admission.

17 \* \* \*

18 §52.2. Formal voluntary admission

19 A. Any person who has a mental illness or person who is suffering from a  
20 substance-related or addictive disorder desiring admission to a treatment facility for  
21 diagnosis or treatment of a psychiatric disorder or a substance-related or addictive  
22 disorder and who is deemed suitable for formal voluntary admission by the admitting  
23 physician or psychiatric mental health nurse practitioner may be so admitted upon  
24 his written request.

25 \* \* \*

26 §52.3. Noncontested admission

27 \* \* \*

28 B. A noncontested admission may be made by a physician or psychiatric  
29 mental health nurse practitioner to a treatment facility in order to initiate a complete

1 diagnostic and evaluative study. The diagnosis and evaluation shall include  
2 complete medical, social, and psychological studies and, when medically indicated,  
3 any other scientific study which may be necessary in order to make decisions relative  
4 to the treatment needs of the patient. In the absence of specified medical reasons, the  
5 diagnostic studies shall be completed in fourteen days. Alternative community-  
6 based services shall be thoroughly considered.

7 \* \* \*

8 §53. Admission by emergency certificate; extension; payment for services rendered

9 \* \* \*

10 L.

11 \* \* \*

12 (2) Upon arrival at the treatment facility, the escorting peace officer shall  
13 then be relieved of any further responsibility and the person shall be immediately  
14 examined by a physician, preferably a psychiatrist, or a psychiatric mental health  
15 nurse practitioner who shall determine if the person shall be voluntarily admitted,  
16 admitted by emergency certificate, or discharged.

17 \* \* \*

18 P.(1) Notwithstanding any provision of law to the contrary, no claim for  
19 payment for inpatient behavioral health services provided to a person while admitted  
20 and detained in a facility that provides mental health services under an emergency  
21 certificate, issued in accordance with the provisions of this Section, shall be denied  
22 by Medicaid, an entity contracted with the state for the provision of Medicaid  
23 services, or any hospital, health, or medical expense insurance policy, hospital or  
24 medical service contract, employee welfare benefit plan, contract or other agreement  
25 with a health maintenance organization or a preferred provider organization, health  
26 and accident insurance policy, or any other insurance contract of this type in this  
27 state, including a group insurance plan, a self-insurance plan, and the Office of  
28 Group Benefits programs, on the basis of medical necessity if all of the following  
29 conditions are met:

30 \* \* \*

1 (b) The admitting physician or psychiatric mental health nurse practitioner  
2 and the evaluating psychiatrist or medical psychologist shall offer the subject of the  
3 emergency certificate the opportunity for voluntary admission pursuant to R.S.  
4 28:53.

5 \* \* \*

6 Section 2. R.S. 37:913(3)(b) is hereby amended and reenacted to read as follows:

7 §913. Definitions

8 As used in this Part:

9 \* \* \*

10 (3)

11 \* \* \*

12 (b) Advanced practice registered nursing may include certain acts of medical  
13 diagnosis, in accordance with R.S. 37:913(8) and (9), preparation and execution of  
14 orders for the admission of patients to a treatment facility, in accordance with R.S.  
15 28:2(39), or medical prescriptions of therapeutic or corrective nature, prescribing  
16 assessment studies, legend and certain controlled drugs, therapeutic regimens,  
17 medical devices and appliances, receiving and distributing a therapeutic regimen of  
18 prepackaged drugs prepared and labeled by a licensed pharmacist, and free samples  
19 supplied by a drug manufacturer, and distributing drugs for administration to and use  
20 by other individuals within the scope of practice as defined by the board and in  
21 accordance with this Paragraph.

22 \* \* \*

---

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

---

HB 181 Original

2021 Regular Session

Dustin Miller

**Abstract:** Provides admitting privileges to psychiatric mental health nurse practitioners for preparing and executing orders for the admission of patients to licensed psychiatric treatment facilities.

Present law provides that the governing body of a treatment facility may grant staff membership, specifically delineated institutional privileges, or both, to a psychiatric mental health nurse practitioner conditioned upon the nurse practitioner meeting certain requirements pursuant to present law.

Proposed law retains present law and adds that specifically delineated privileges may include the ability to prepare and execute orders for the admission of a patient to a treatment facility.

Present law provides that any person who has a mental illness or person who is suffering from a substance-related or addictive disorder may apply for voluntary admissions to a treatment facility. Further provides that admitting physicians are to admit persons suffering from a substance-related or addictive disorder to treatment facilities.

Proposed law retains present law and adds that psychiatric mental health nurse practitioners may admit persons with mental illness or suffering from a substance-related or addictive disorder pursuant to present law.

Present law provides that each patient admitted on a voluntary basis shall be informed of any other medically appropriate alternative treatment programs and facilities known to the admitting physician to seek admission to such programs or facilities.

Proposed law retains present law and adds that a psychiatric mental health nurse practitioner may also inform the patient of any treatment programs or facilities.

Present law provides that no admission by a patient shall be deemed voluntary unless the admitting physician determines the patient has the capacity to make such admission.

Proposed law retains present law and adds that a psychiatric mental health nurse practitioner shall also be able to determine if an admission by a patient is deemed voluntary based upon the patients capacity to make such admission.

Present law provides that upon the arrival of a patient to a treatment facility, the person shall be immediately examined by a physician, preferably a psychiatrist, who will determine if the person shall be voluntarily admitted, admitted by emergency certificate, or discharged.

Proposed law retains present law and adds that a psychiatric mental health nurse practitioner may also examine the person and determine if he shall be voluntarily admitted pursuant to present law.

Present law defines advanced practice registered nursing to include certain acts of medical diagnosis or medical prescriptions of therapeutic or corrective nature, prescribing assessment studies, legend and certain controlled drugs, therapeutic regimens, medical devices and appliances, receiving and distributing a therapeutic regimen of prepackaged drugs prepared and labeled by a licensed pharmacist, and free samples supplied by a drug manufacturer, and distributing drugs for administration to and use by other individuals within the scope of practice as defined by present law.

Proposed law retains present law and adds that advanced practice registered nursing shall also include preparation and execution of orders for the admission of patients to a treatment facility as defined by present law.

(Amends R.S. 28:51.1(A)(3)(intro. para.), 52(B), (E), and (G)(1), 52.2(A), 52.3(B), and 53(L)(2) and (P)(1)(b) and R.S. 37:913(3)(b))