



Alabama Department of Examiners of Public Accounts

Sunset Report **Board of Nursing** **Montgomery, Alabama**

October 1, 2019 through September 30, 2023

AUDEMUS JURA NOSTRA DEFENDERE
ALABAMA STATE HOUSE

Rachel Laurie Riddle, Chief Examiner



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Examiners of Public Accounts

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September 25, 2024

Representative Margie Wilcox
Chairman, Sunset Committee
Alabama State House
Montgomery, Alabama 36130

Dear Representative Wilcox:

This report was prepared to provide information for use by the Sunset Committee in conducting its review and evaluation of the operations of the Board of Nursing in accordance with the *Code of Alabama 1975*, Section 41-20-9.

The report contains unaudited information obtained from the management, staff, and records of the Board of Nursing in addition to information obtained from other sources.

Please contact me if you have any questions concerning this report.

Sincerely,

Rachel Laurie Riddle
Chief Examiner

Examiners
Charnelle Martin
Kierra Burston

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PROFILE

Purpose/Authority

The Board of Nursing (the “Board”) was created by Act Number 1965-867, Acts of Alabama. The mandated function of the Board of Nursing is to provide for the regulation and approval of schools of nursing and for the examination and licensing of professional and practical nurses. Current statutory authority for the Board is found in the *Code of Alabama 1975*, Sections 34-21-1 through 34-21-155.

In accordance with the *Code of Alabama 1975*, Sections 34-21-80 through 34-21-93.1 a Joint Committee of the Board of Nursing and the State Board of Medical Examiners for Advanced Practice Nurses was established to implement a collaborative agreement regarding advanced nursing practice. All applicants for approval to practice as certified registered nurse practitioners (CRNP) or certified nurse midwives (CNM) are reviewed and approved by the Joint Committee of the Board of Nursing and the State Board of Medical Examiners for Advanced Practice Nurses prior to licensure by the Board of Nursing.

The Board of Medical Examiners may grant a Qualified Alabama Controlled Substance Registration Certificate to certified nurse practitioners (CRNP) or certified nurse midwives (CNM) in accordance with the *Code of Alabama 1975*, Sections 20-2-250 through 20-2-259.

The following Acts passed since the last sunset review have been codified in the current statutory authority.

Act Number 2021-275, Acts of Alabama, to amend Section 34-21-2, *Code of Alabama 1975*, as amended by Act 2019-102, 2019 Regular Session, relating to the duties of the Board of Nursing; to authorize the Board, by rule, to establish standards for student nurse for student nurse apprenticeships and to issue student nurse apprentice permits to eligible students; and to authorize the Board, by rule, to establish standards for certified medication assistants and to issue certified medication assistants permits to eligible applicants. The Act became effective July 1, 2021.

Act Number 2021-317, Acts of Alabama, relating to nurses; to authorize the Alabama Board of Nursing to allow licensed nurses to delegate certain nursing care tasks to non-nurses and to prohibit an agency other the Alabama Board of Nursing from requiring licensed nurses to obtain additional certification or training in order to delegate nursing care tasks. This Act became effective July 1, 2021.

Act Number 2021-383, Acts of Alabama, relating to the controlled substances database, to amend Section 20-2-214, *Code of Alabama 1975*, to authorize the Alabama Board of Nursing to access the controlled substances database for inquiries related to investigations or disciplinary actions concerning nurses who prescribe controlled substances; and to make nonsubstantive, technical revisions to update the existing code language to current style.

Act Number 2022-379, Acts of Alabama, relating to the Board of Nursing; to amend Section 34-21-81, *Code of Alabama 1975*, to further provide for the definition of advanced practice nursing by a Certified Registered Nurse Anesthetist; and to specify that a certified Registered Nurse Anesthetist also practices in coordination with a licensed physician, podiatrist, or dentist. This Act became effective July 1, 2022.

Act Number 2023-317, Acts of Alabama, relating to the Board of Nursing; to amend Sections 34-21-96, 34-21-97, 34-21-98, and 34-21-99, *Code of Alabama 1975*, to remove the cap on the amount of loan awarded annually; to provide further for the definition of a critical need area; to remove certain penalties for defaulting, and to require the Board to consult with the Alabama Commission on the Evaluation of Services. This Act became effective August 1, 2023.

Act 2023-532 relating to the Board of Nursing; to add a new Article 8 to Title 34, Chapter 21, *Code of Alabama 1975*, to create the Alabama Loan Repayment Program for Nursing Education; to establish and describe the program; to provide for program funding from the Education Trust Fund; to provide definitions; to outline the procedure for the Board to award loans to applicants who contract with the Board to work as an instructor in a prelicense nursing education program; and to provide further for the powers of the Board under the program. This article shall be repealed on September 30, 2029, unless extended by act of the Legislature. This Act became effective September 1, 2023.

Act Number 2024-40, Acts of Alabama, relating to the Board of Nursing; to amend Section 34-21-98, *Code of Alabama 1975*, as amended by Act 2023-317 of the 2023 Regular Session, to correct an erroneous reference to a “nurse educator” to an “advanced practice nurse” under the Alabama Loan Payment Program for Advanced Practice Nursing. This Act became effective April 4, 2024.

The following Acts passed since the last sunset review and have not been codified in the current statutory authority.

Act Number 2024-249, Acts of Alabama, relating to the Board of Nursing, to amend Sections 34-21-2 and 34-21-25, *Code of Alabama 1975*, to authorize the Board by rule, to provide standards for the scope of practice for certified nursing support technicians and to issue permits to eligible applicants; to provide further for the nature and type of disciplinary actions the Board may impose; and to make nonsubstantive, technical revisions to update existing code language to current style. This Act will become effective October 1, 2024.

Act Number 2024-250, Acts of Alabama, relating to the Board of Nursing; to amend Section 34-21-2, *Code of Alabama 1975*, to revise the membership of the Board to include a certified registered nurse anesthetist who is approved to engage in advanced practice nursing; and to make nonsubstantive, technical revisions to update existing code language to current style. This Act will become effective October 1, 2024.

Act Number 2024-361, Acts of Alabama, relating to the Alabama Sunset Law, to terminate the existence and functioning of the Alabama Board of Massage Therapy; to create the Alabama Massage Therapy Licensing Board pursuant to a new Chapter 43A, Title 34, *Code of Alabama 1975*, to provide for the membership and organization of the new board under the initial temporary oversight of the Board of Nursing; to provide for the transfer of all powers, duties, rights, records and property from the former board to the new board; to temporarily extend the renewal date of certain licenses and registrations issued by the former board; and to repeal Chapter 43, Title 34, *Code of Alabama 1975*, providing for the Board of Massage Therapy. This Act became effective June 1, 2024.

<u>Characteristics</u>	
Members and Selection	<p>Thirteen members appointed by the Governor. Eight members of the Board shall be licensed professional nurses, four members of the Board shall be licensed practical nurses, and one consumer member.</p> <ul style="list-style-type: none"> • Eight licensed professional nurses, two of which shall be advanced practice nurses, shall be appointed from a list of nominees who are selected by the Board of Nursing Nomination Committee and furnished to the Governor by the Alabama State Nurses Association, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees as there are appointments to be made or vacancies to be filled. • Two licensed practical nurses selected from a list of nominees furnished him or her by the Board of Directors of the Licensed Practical Nurses Association of Alabama, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees for the vacancies to be filled. • Two licensed practical nurses from a list of nominees furnished him or her by the Board of Directors of the Alabama Federation of Licensed Practical Nurses, Incorporated, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees for the vacancies to be filled. • One consumer member appointed by the Governor. <p><i>Code of Alabama 1975, Section 34-21-2</i></p>
Term	<p>Members serve four-year terms. No member shall be appointed to more than two consecutive terms.</p> <p><i>Code of Alabama 1975, Section 34-21-2(a)</i></p>

<p>Qualifications</p>	<p><u>Licensed Professional Nurses</u></p> <ul style="list-style-type: none"> • Shall be a citizen of the United States and a resident of the State of Alabama. • Be a graduate of a state-approved educational program for the preparation of practitioners of professional nursing. • Be a currently licensed professional nurse in Alabama. • Have a minimum of five years' successful nursing experience in an administrative, teaching, clinical capacity, or advanced practice. • Be actively engaged in professional nursing in this state immediately preceding and during appointment. <p><u>Licensed Practical Nurses</u></p> <ul style="list-style-type: none"> • Shall be a citizen of the United States, a resident of the State of Alabama, and have all of these additional qualifications: • Hold a diploma from an accredited high school or its equivalent. • Be a graduate of a state-approved vocational educational program for the preparation of practitioners of licensed practical nursing. • Be a currently licensed practical nurse in Alabama. • Have a minimum of five years' successful nursing experience. • Be actively engaged in licensed practical nursing in this state immediately preceding and during appointment. <p><u>Consumer Member</u></p> <ul style="list-style-type: none"> • Shall not be a member of any of the health care professions and shall have no direct or financial interest in any healthcare facility, profession, agency, or insurer, or be, or have been a health care worker. <p><i>Code of Alabama 1975, Section 34-21-2</i></p>
<p>Consumer Representation</p>	<p>One consumer member is required by law. One consumer member is serving.</p> <p><i>Code of Alabama 1975, Section 34-21-2(f)</i></p>
<p>Racial Representation</p>	<p>No specific statutory requirement. Five minority members currently serving.</p>
<p>Geographical Representation</p>	<p>No specific statutory requirement.</p>
<p>Other Representation</p>	<p>The membership of the Board shall be inclusive and reflect the racial, gender, geographic, urban/rural, and economic diversity of the state.</p> <p><i>Code of Alabama 1975, Section 34-21-2(a)</i></p>

Compensation	<p>Each member of the Board shall receive the same per diem and travel allowance as is paid by law to state employees for each day's attendance at Board meetings in addition to any daily compensation or allowance, as may be determined by the Board.</p> <p>Each member of the Board shall receive daily compensation for each day that the member attends Board meetings or engages in other duties of the Board, including but not limited to hearings, survey visits, conferences, and other meetings.</p> <p>The Board has set daily compensation for Board members at \$300 per day for attending to Board business. Beginning in FY2022 the Board approved an additional \$300 per month for the Board president.</p> <p><i>Code of Alabama 1975</i>, Section 34-21-2(m) <i>Administrative Rule</i>, 610-X-1-.12(3)</p>
Attended Board Member Training	<p>Seven Board Members Fifteen Staff Members</p>
<u>Operations</u>	
Administrator	<p>Peggy Benson, Executive Officer Appointed by the Board Current annual salary: \$177,892.80, set by the Board.</p> <p><i>Code of Alabama 1975</i>, Section 34-21-2(j)(15) and (16)</p>
Location	<p>770 Washington Ave., Suite 250 Montgomery, Alabama 36104</p> <p>Office Hours: Monday through Friday, 8:00 a.m. to 4:30 p.m.</p>
Real Property	<p>The Board does not own any real property.</p>
Employees	<p>Sixty-five employees.</p>

Legal Counsel	<p>The Board utilized the following attorneys:</p> <ul style="list-style-type: none"> • Alice M. Henley, General Counsel, Deputy Attorney General, employed by the Board. • Patrick Samuelson, Senior Assistant General Counsel, Assistant Attorney General, employed by the Board. • Amy Rogers Williams, Assistant General Counsel, Assistant Attorney General, employed by the Board. • Mark Wilkerson, of Wilkerson & Bryan, a private attorney, serves as the Board’s hearing officer. • Dorman Walker, of Balch & Bingham LLP, a private attorney, provides advice, counsel and representation of the Board of Nursing and its members and employees regarding matters related to Board governance, enforcement actions, personnel matters, contractual disputes and other similar matters. • J. Matt Bledsoe, Assistant Attorney General, employed by the Alabama Attorney General’s office, for collection matters for scholarship and loans.
Subpoena Power	<p>The Board has the power to issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.</p> <p>Any accused person, complainant, or other party and the Board may subpoena witnesses or pertinent records for the hearing, and those subpoenas may be served by any sheriff of the State of Alabama.</p> <p><i>Code of Alabama 1975</i>, Sections 34-21-2(j)(10) and 34-21-25(e)</p>
Internet Presence	<p>https://www.abn.alabama.gov/</p> <p>The website contains the Board’s statutes, Board’s meeting dates, discipline, renewal, nursing practice information, nursing education information, licensee search tool, Board members, fee schedule, forms, FAQ, fines/fees and contact information.</p>
<u>Financial</u>	
Source of Funds	<p>Licensure fees, fines and penalties.</p> <p><i>Code of Alabama 1975</i>, Sections 34-21-2(j)(22), 34-21-24, and 34-21-25(a)</p>

State Treasury	<p>Yes. The Board operates from two funds maintained in the State Treasury:</p> <ul style="list-style-type: none"> • Special Revenue Fund – Operating Fund • Education Trust Fund – Scholarships and Loans. <p><i>Code of Alabama 1975</i>, Sections 34-21-4, 34-21-63, and 34-21-150.</p>																				
Required Distributions	None																				
Unused Funds	<p>Unused balances in the Board’s operating fund are retained for subsequent years’ expenditures.</p> <p><i>Code of Alabama 1975</i>, Section 34-21-4</p>																				
<u>Licensure</u>																					
Licensees	<p>As of July 30, 2024:</p> <table border="1" data-bbox="518 884 1330 1262"> <thead> <tr> <th data-bbox="524 884 1187 919">License Type</th> <th data-bbox="1187 884 1323 919">Number</th> </tr> </thead> <tbody> <tr> <td data-bbox="524 919 1187 955">Registered Nurse (RN)</td> <td data-bbox="1187 919 1323 955">85,386</td> </tr> <tr> <td data-bbox="524 955 1187 991">Licensed Practical Nurse (LPN)</td> <td data-bbox="1187 955 1323 991">14,359</td> </tr> <tr> <td data-bbox="524 991 1187 1026">Certified Registered Nurse Practitioners (CRNP)</td> <td data-bbox="1187 991 1323 1026">9,269</td> </tr> <tr> <td data-bbox="524 1026 1187 1062">Certified Nurse Midwife (CNM)</td> <td data-bbox="1187 1026 1323 1062">47</td> </tr> <tr> <td data-bbox="524 1062 1187 1098">Certified Registered Nurse Anesthetists (CRNA)</td> <td data-bbox="1187 1062 1323 1098">2,038</td> </tr> <tr> <td data-bbox="524 1098 1187 1134">Clinical Nurse Specialist (CNS)</td> <td data-bbox="1187 1098 1323 1134">51</td> </tr> <tr> <td data-bbox="524 1134 1187 1169">Medical Assistant, Certified (MAC)</td> <td data-bbox="1187 1134 1323 1169">1,364</td> </tr> <tr> <td data-bbox="524 1169 1187 1205">Student Nurse Apprentices (SNA)</td> <td data-bbox="1187 1169 1323 1205">428</td> </tr> <tr> <td data-bbox="524 1205 1187 1241">Total</td> <td data-bbox="1187 1205 1323 1241">112,942</td> </tr> </tbody> </table> <p><i>Source:</i> Board’s website</p>	License Type	Number	Registered Nurse (RN)	85,386	Licensed Practical Nurse (LPN)	14,359	Certified Registered Nurse Practitioners (CRNP)	9,269	Certified Nurse Midwife (CNM)	47	Certified Registered Nurse Anesthetists (CRNA)	2,038	Clinical Nurse Specialist (CNS)	51	Medical Assistant, Certified (MAC)	1,364	Student Nurse Apprentices (SNA)	428	Total	112,942
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<p>Licensure Qualifications</p>	<p>All applicants for licensure must:</p> <ul style="list-style-type: none"> • Be of good moral character. • Be a citizen of the United States or, if not a citizen of the United States, a person who is legally present. • Submit a full set of fingerprints to the Board for the purpose of obtaining a state and national criminal history background check. <p>License to Practice Professional Nursing (Registered Nurse-RN): An applicant must hold a diploma from an accredited high school and have successfully completed an educational program in a school of nursing approved by the Board. A license to practice professional nursing as a registered nurse may be obtained in the following manners:</p> <ul style="list-style-type: none"> • By Examination: The applicant shall be required to pass an examination on subjects as determined the Board and, upon successfully passing the examination, the Board shall issue such applicant a license. • By Endorsement: The Board may issue a license to practice professional nursing as a registered nurse to an applicant who has been duly licensed as a registered nurse under the laws of another state, territory, or foreign country, if the applicant meets the qualifications required of registered nurses in this state at the time of his or her graduation. • By Temporary Permit: The Board may issue temporary permits to practice professional nursing to graduates of approved schools of nursing pending completion of licensing procedures; to qualified applicants obtaining a license by endorsement pending completion of licensure procedures; and to those nurses licensed by other states who will practice in this state for a period of one year or less, subject to the discretion of the board.
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<p>Licensure Qualifications (continued)</p>	<p>License to Practice Practical Nursing (LPN): An applicant must hold a diploma from an accredited high school and have successfully completed an educational program of at least one year’s duration in a school of practical nursing, approved by the Board. A license to practice as a licensed practical nurse may be obtained in the following manners:</p> <ul style="list-style-type: none"> • By Examination: The applicant shall be required to pass an examination on subjects as determined the Board and, upon successfully passing the examination, the Board shall issue such applicant a license. • By Endorsement: The Board may issue a license to practice practical nursing as a licensed practical nurse to an applicant who has been duly licensed as a licensed practical nurse (irrespective of the title or designation granted when such license was issued) under the laws of another state, territory, or foreign country, if such applicant meets the requirements for licensed practical nurses in this state at the time of his or her graduation. • By Temporary Permit: The Board may issue a temporary permit to practice practical nursing as a licensed practical nurse to graduates of approved schools of practical nursing pending the completion of licensing procedures in Alabama and to qualified applicants obtaining a license by endorsement pending completion of licensure procedures. <p><i>Code of Alabama 1975</i>, Sections 34-21-20.1(a), 34-24-21(a) and 34-21-22(a)</p>
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Examinations

Applicants must pass the National Council Licensure Examination for Registered Nurse (NCLEX-RN) or the National Council Licensure Examination for Practical Nurse (NCLEX-PN). Examinations are prepared by the National Council of State Boards of Nursing and administered through Pearson Vue on a nationwide basis. Exams are offered in Alabama daily at Pearson Professional Centers located in Birmingham, Dothan, Decatur, Mobile, and Montgomery.

Examination fees are paid directly the National Council of State Boards of Nursing through Pearson Vue.

Pass/Fail rates for Alabama Educational Institution Candidates:

Registered Nurses

Calendar Year	# Taken	# Passed	% Passed
2020	3,405	2,990	88%
2021	3,502	2,993	85%
2022	3,589	3,310	92%
2023	3,752	3,631	97%

Licensed Practical Nurses

Calendar Year	# Taken	# Passed	% Passed
2020	811	769	95%
2021	673	639	95%
2022	947	909	96%
2023	1,181	1,151	97%

Pass/Fail rates by Alabama Educational Institutions can be found in Appendix IV of this report.

Code of Alabama 1975, Sections 34-21-21(b)(1) and 34-21- 22(b)(1)

Source: Executive Officer

<p>Reciprocity</p>	<p>Licensure by endorsement is available for both a licensed registered nurse and a licensed practical nurse. Applicants who have been duly licensed as a registered nurse or practical nurse under the laws of another state, territory, or foreign country, if, in the opinion of the Board, such applicant meets the qualifications required of registered nurses in this state at the time of his or her graduation.</p> <p>The Board participates in the Enhanced Nurse Licensure Compact (eLNC). The eLNC is a multistate license that allows registered nurses (RNs), licensed vocational nurses (LVNs), and other practitioners to practice nursing in participating states without obtaining a license in each state.</p> <p>The eLNC allows practitioners to practice across state lines as long as they remain residents of the state that issued the license. It also affects advanced practice registered nurses (APRNs) and other practitioners who hold an RN license with multi-state privileges, such as nurse practitioners (NPs), certified registered nurse anesthetists (CRNAs), certified nurse-midwives (CNMs), and clinical nurse specialists (CNSs).</p> <p><i>Code of Alabama 1975</i>, Sections 34-21-21(b)(2) and 34-21- 22(b)(2).</p>
<p>Renewals</p>	<p>Licenses are renewed biennially.</p> <p><u>Registered Nurses and Advanced Practice Registered Nurses</u> Single state licenses renew in even-numbered years. Multi-state licenses renew in odd-numbered years.</p> <p><u>Licensed Practical Nurses</u> Single state and multi-state licenses renew in odd-numbered years.</p> <p>100% of renewals are completed online.</p> <p><i>Code of Alabama 1975</i>, Section 34-21-23(a)(b) <i>Administrative Code</i> 610-X-4-.08 <i>Source:</i> Board Staff</p>

<p>Licensee Demographics</p>	<p>The Board conducts a voluntary workforce survey every two years. The following was contained in 2021-2022 survey results:</p> <table border="1" data-bbox="695 281 1281 585"> <tr> <td>Females</td> <td>88%</td> </tr> <tr> <td>White</td> <td>70%</td> </tr> <tr> <td>Black/African American</td> <td>17%</td> </tr> <tr> <td>Other</td> <td>1%</td> </tr> <tr> <td>Males</td> <td>12%</td> </tr> <tr> <td>White</td> <td>8%</td> </tr> <tr> <td>Black/African American</td> <td>3%</td> </tr> <tr> <td>Other</td> <td>1%</td> </tr> </table> <p><i>Source:</i> Executive Officer</p>	Females	88%	White	70%	Black/African American	17%	Other	1%	Males	12%	White	8%	Black/African American	3%	Other	1%
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<p>Continuing Education</p>	<p>A licensed nurse shall earn in each earning period not less than 24 contact hours of Board approved or Board-recognized continuing education as a condition for renewal of license for the subsequent license period.</p> <p><i>Code of Alabama 1975</i>, Sections 34-21-23(f), and 34-21-40 through 34-21-43 <i>Administrative Rule</i> 610-X-4-.08(3) and 610-X-4-.07 (1)(d)</p>																

SIGNIFICANT ISSUES

There are no significant issues.

SIGNIFICANT ISSUES FROM QUESTIONNAIRES

Significant Issue 2024-001: Six of the thirteen Board members responded to our survey and the following issues were noted from the responses:

- Two of the six (33%) Board members expressed concerns about the shortage of nurses.
- Two of the six (33%) Board members responding to our survey expressed concerns about the Board of Nursing taking over the Board of Massage Therapy.
- Two of the six (33%) Board members do not think the Board is adequately funded. One of these two Board members further expressed that this was because the Board had taken over operations of the Alabama Board of Massage Therapy.

Significant Issue 2024-002: Registered Nurse and Licensed Practical Nurse licensees who responded to our survey expressed the following concerns:

- Nine of the twenty (45%) Registered Nurses and seven of the sixteen (44%) Licensed Practical Nurses indicated a shortage of nurses as the most significant issue facing their profession.
- Five of the twenty (25%) Registered Nurses and eleven of the sixteen (69%) Licensed Practical Nurses indicated they are not adequately informed of changes to and interpretations of the Board's positions, policies, rules, and law.
- Six of the twenty (30%) Registered Nurses think some of the Board's laws, rules, or policies are an unnecessary restriction on the practice of their profession.
- Seven of the twenty (35%) Registered Nurses do not think mandatory continuing education is necessary.
- Five of the sixteen (31%) Licensed Practical Nurses indicated the rate of pay as the most significant issue facing their profession.

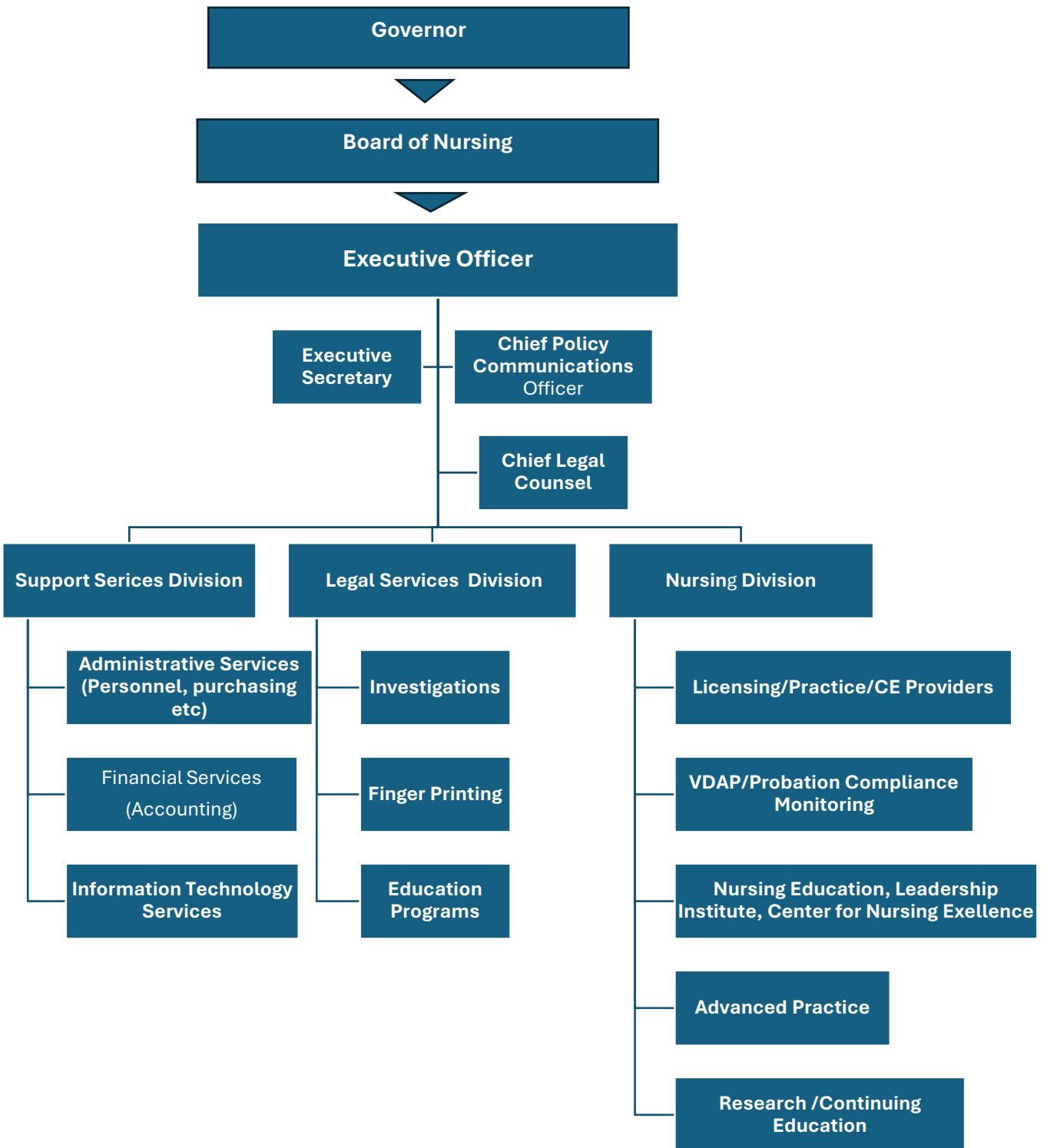
Significant Issue 2024-003: Complainants responding to our survey expressed the following concerns:

- Three of the thirteen (38%) complainants stated the Board did not communicate the results of its investigation into their complaint to them. *A review of a sample of the Board's complaint files showed letters of resolution were sent.*
- Eight out of thirteen (62%) complainants do not think the Board did everything it could to resolve their complaint.

STATUS OF PRIOR FINDINGS/SIGNIFICANT ISSUES

All prior findings/significant issues have been resolved.

ORGANIZATION



PERSONNEL

Employees

Schedule of Employees By Classification / Sex / Race									
Title	#	BF	WF	BM	WM	OF	OM	Salary or Salary Range	Vehicle Assigned
<u>Unclassified Merit System</u>									
Executive Officer	1		1					\$177,892.80	1
Deputy Attorney General	1		1					\$161,174.40	
<u>Non-Merit Exempt</u>									
Chief Information Officer	1				1			\$116,841.60	1
Nurse Consultant	1		1					\$122,846.40	
Regulatory Education Administrator	1	1						\$67,658.40	
<u>Classified Merit System</u>									
Administrative Service Officer II	1		1					\$58,404.00	5*
Executive Secretary	1		1					\$58,404.00	
Personnel Assistant III	1		1					\$56,971.20	
ASA I	1				1			\$30,086.40	
ASA II	7	4	2		1			\$31,610.40 - \$43,591.20	
ASA III	11	4	7					\$33,220.80 - \$54,290.40	
Clerk	1				1			13.77/hr	
Program Analyst II	1						1	\$66,028.80	
Programmer Analyst III	2	1			1			\$76,588.80 - \$78,549.60	
Programmer Analyst IV	2			1	1			\$108,403.20 - \$122,846.40	
IT Specialist III	2				1	1		\$95,800.80 - \$111,136.80	
IT System Specialist IV	1				1			\$132,180.00	
Legal Research Assistant	3	1	2					\$56,971.20 - \$61,377.60	
Attorney II	1		1					\$82,627.20	
Attorney III	1				1			\$122,846.40	1
Retired State Employee	3	1	2					\$18.98/hr - \$53.43/hr	
Departmental Operations Specialist	1	1						\$55,615.20	
Nurse Consultant	6	4	2					\$98,205.60- \$122,846.40	
Nursing Compliance Monitoring Manager	2		2					\$62,894.40 - \$64,437.60	
Nursing Consultant Coordinator	2	1	1					\$105,710.40 - \$132,180.00	
Special Investigations Chief	1			1				\$91,269.60	1
Special Investigator	4				3	1		\$56,971.20 - \$71,083.20	4
Senior Accountant	1	1						\$95,800.80	
Accounting Technician	1		1					\$43,591.20	
Account Clerk	1		1					\$34,927.20	
State Professional Trainee	1		1					\$37,612.80	
State Intern	1				1			\$16.79/hr - part time	
Total	65	19	28	2	13	2	1		13

B/M = Black Male, W/M = White Male, B/F = Black Female, W/F = White Female, O/M = Other Male, O/F = Other Female

*The Board has 5 pool vehicles: 1 vehicle is assigned to the Medical Assistant Certified/Student Nurse Apprentices Division for education site visits; 1 vehicle is used for mail, bank, errands; 1 vehicle is assigned for Alabama Board of Nursing Speaker Bureaus; 1 vehicle is for education program site visits; and 1 vehicle is used for Advance Practice Registered Nurse investigations/site visits.

Legal Counsel

Alice Henley, Deputy Attorney General, an employee of the Board, serves as the Board's General Counsel. Patrick Samuelson, Assistant Attorney General, an employee of the Board, serves as the Board's Senior Assistant General Counsel. Amy Williams, Assistant Attorney General, an employee of the Board, services as the Board's Assistant General Counsel.

The Board contracts with Mark Wilkerson, of Wilkerson & Bryan, P.C., to serve as the Board's hearing officer. The current contract is a two-year contract effective January 17, 2023. The pay rate is \$195.00 per hour for actual time spent in preparing, hearing, or ruling on contested cases, not to exceed a total of \$120,000.00 during the contract period. The services of law clerks and paralegal may be billed at a rate of \$65.00 per hour to a maximum of \$12,000.00 during the contract period. Additionally, the Board agrees to reimburse Mr. Wilkerson for reasonable and necessary expenses incurred in the performance of his duties as Hearing Officer, not to exceed \$9,000.00. The total dollar amount of the contract shall not exceed \$141,000.00.

The Board contracts with Dorman Walker, of Balch & Bingham, to provide advice, counsel and representation of the Board and its members and employees regarding matters related to Board governance, enforcement actions, personnel matters, contractual disputes, and other similar matters. The current contract is a two-year contract effective January 12, 2024. The pay rate is \$195.00 per hour for attorney services and \$65.00 per hour for paralegal services, with the total compensation for services and expenses not to exceed \$25,000.00 per year.

The Board has a second contract with Dorman Walker, of Balch & Bingham, to provide representation of current and former employees and agents of the Board in specific litigation. The current contract is a two-year contract effective December 10. The pay rate is \$195.00 per hour for attorney services and \$65.00 per hour for paralegal services, with the total compensation for services and expenses not to exceed \$25,000.00 per year.

J. Matt Bledsoe, Assistant Attorney General, an employee of the Attorney General's Office, provides services for collection matters for scholarships and loans. The Board will compensate the Office at the rate of \$150.00 per hour for all time spent providing legal services to or on behalf of the Board. The Board will compensate the Office at the rate of \$50 per hour for paralegal services to or on behalf of the Board. The Board agrees to compensate the Office for travel at the same rate state employees are reimbursed upon submission of proper forms. The compensation for legal services, travel, court reporters, and other expenses will be due upon invoice by the Office.

PERFORMANCE CHARACTERISTICS

Number of Licenses/Permits per Employee (FY 2023) – 1,737

Number of Licenses/Permits for the Past Four Fiscal Years

Type of Licenses/Permits	Fiscal Year			
	2020	2021	2022	2023
Registered Nurse (RN)	91,817	81,359	85,070	83,857
Licensed Practical Nurse (LPN)	16,329	17,324	15,025	16,337
Certified Registered Nurse Practitioner (CRNP)	6,784	7,490	8,227	9,012
Certified Registered Nurse Anesthetists (CRNA)	1,969	1,897	1,954	2,002
Certified Nurse Midwives (CNM)	31	33	38	42
Certified Nurse Specialist (CNS)	71	64	60	55
Medical Assistant, Certified (MAC)*		242	618	1,160
Student Nurse Apprentice (SNA)*			67	436
Total	117,001	108,409	111,059	112,901

*New license/permit category.

Operating Disbursements per License/Permit (FY 2023) – \$71.62

Fines/Penalties as a Percentage of Operating Receipts

	FY 2020	FY 2021	FY 2022	FY 2023
Total Receipts	\$ 5,795,270.23	\$ 10,576,636.69	\$ 7,590,203.02	\$ 9,072,529.01
Fines and Penalties	\$ 115,130.00	\$ 130,950.00	\$ 114,460.00	\$ 132,660.00
Percentage	1.99%	1.24%	1.51%	1.46%

Notification of Board Decisions to Amend Administrative Rules

The Board complied with notification procedures prescribed in the Administrative Procedure Act, which includes publication of proposed rules in the Administrative Monthly, and public hearings on proposed rules. Licensees are not specifically notified of proposed changes. Proposed rule changes are posted on the Board’s website.

COMPLAINT HANDLING

The *Code of Alabama 1975*, Section 34-21-25 and the Board’s *Administrative Rules* 610-X-8-.01 through 610-X-8.03 provide definitions and grounds for filing a complaint. *Administrative Rules* 610-X-8-.04 through 610-X-8-.09 provide procedures for receipt, documentation, and investigation of complaints received by the Board.

Initial Contact/Documentation	A complaint against a licensee of the Board must be submitted in writing. Complainants may use the online complaint form or may download and complete the complaint form to be returned electronically or by mail. Complaints by phone are not accepted unless the nurse self-reports. Anyone, including Board members and staff, may file complaints.
Anonymous Complaints Accepted	No
Investigative Process / Probable Cause Determination	<p>All incoming complaints are reviewed by the Executive Officer. The Executive Officer completes the initial subpoena duces tecum checklist and forwards the case to the Legal Research Assistant for processing. Upon receipt of a proper complaint, the Legal Research Assistant will review court records for any arrest/criminal history.</p> <p>Practice related complaints are forwarded to an attorney following nurse consultant review. Non-practice related complaints are forwarded to an attorney following investigation. Board members are not involved in the investigation.</p> <p>If the attorney finds sufficient evidence to support a violation, and if case is not eligible for a Letter of Admonishment, the attorney either drafts or reviews and revises the Findings of Fact and Conclusions of Law.</p> <p>If the attorney finds insufficient evidence to support a Nurse Practice Act violation, a note is made and the case is forwarded to a legal research assistant to close with letter of closure.</p> <p>The Board members make the final decision for disposition of all cases resolved by administrative hearing or consent order.</p>
Negotiated Settlements	Yes
Notification of Resolution to the Complainant	Complainants are notified by letter of the final disposition of the case.

Source: Executive Officer

Complaint Data

Schedule of Complaints Resolved Fiscal Year 2020 through 2023						
Year/Number of Complaints Received	Year/Number Resolved					Pending
	2020	2021	2022	2023	2024¹	
2020 / 1,178	845	288	25	20		
2021 / 1,438		1,071	311	56		
2022 / 1,242			934	308		
2023 / 925				924	1	
¹ As of August 2, 2024 <i>Source:</i> Board Staff						

Average Time to Resolve Complaints – 86 business days.

Disposition of Resolved Complaints

Number of Complaints	Resolution
1,612	Letter/Admonishment
1,262	Cleared
1,030	Consent Order
274	Voluntary Surrender Before Arrest/Conviction
220	Voluntary Disciplinary Alternative Agreement
145	Formal Hearing
129	Revocation by Order
63	Voluntary Surrender After Arrest/Conviction
33	Withdrew Application
13	Deceased
2	Application Expired

REGULATION IN CONJUNCTION WITH OTHER ENTITIES

The State Board of Medical Examiners and the Board of Nursing jointly regulate collaborative practices between physicians and certified registered nurse practitioners and certified nurse midwives in accordance with the *Code of Alabama 1975*, Section 34-21-80 through 34-21-93.

The *Code of Alabama 1975*, Section 34-21-81(7) dictates the Joint Committee of the State Board of Medical Examiners and the Board of Nursing for Advanced Practice Nurses shall be composed of two physicians licensed to practice medicine in the State of Alabama, one registered nurse licensed to practice professional nursing in the State of Alabama, one licensed physician engaged in a collaborative practice with a certified registered nurse practitioner or a certified nurse midwife in the State of Alabama, one certified registered nurse practitioner engaged in advanced practice with a physician in the State of Alabama, and one certified nurse midwife engaged in advanced practice with a physician in the State of Alabama.

The joint committee shall be the state authority designated to recommend rules and regulations to the State Board of Medical Examiners and the Board of Nursing for the purpose of regulating the collaborative practice of physicians and certified registered nurse practitioners and certified nurse midwives.

FINANCIAL INFORMATION

Source of Funds

Application fees, license fees, penalties, and fines are deposited into the Board of Nursing's Special Revenue Fund maintained in the State Treasury. In addition to license fees, the Board also receives an annual appropriation from the Education Trust Fund for scholarships and a loan repayment program for advanced practice nurses.

Schedule of Fees

Fee Type/Purpose	Statutory Authority	Administrative Rule	Amount Collected
Single State Licensure by Examination or Endorsement	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$125.00
Multistate Licensure by Examination or Endorsement	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$225.00
Disaster Temporary Permit	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$25.00
Biennial Renewal of Single State Registered Nurse or Licensed Practical Nurse License	34-21-2(j)(22) 34-21-23(b) 34-21-25(j)(2)	610-X-4-.14	\$100
Biennial Renewal of Multistate Registered Nurse or Licensed Practical Nurse License	34-21-2(j)(22) 34-21-23(b) 34-21-25(j)(2)	610-X-4-.14	\$200
Initial Approval of Advance Practice	34-21-2(j)(22) 34-84-(b)	610-X-4-.14	\$175.00
Certificate of Qualifications (Eligible for Collaborative Practice)	34-21-2(j)(22)	610-X-4-.14	\$100.00
Add Collaborative Practice	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$75.00
Biennial Approval of Advanced Practice	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$75.00
Student Nurse Apprentice Permit	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$50.00
New Nursing Education Program Fee	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$1,500.00
Out of State Program Conducting Clinical in Alabama	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$500.00
Initial and Renewal. Conducting Education Provider	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$400.00
Reinstatement of Lapsed Single State Licensure	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$250.00
Reinstatement of Lapsed Multistate Licensure	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$350.00
Reinstatement of Lapsed Advanced Practice Approval	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$75.00

Fee Type/Purpose	Statutory Authority	Administrative Rule	Amount Collected
Reinstatement of Lapsed Advanced Practice Approval (Non-Alabama Multi-State License – Registered Nurse)	34-21-2(j)(22) 34-21-24 34-21-84(b)	610-X-4-.14	\$150.00
Reinstatement of Lapsed Continuing Education Provider	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$500.00
Reinstatement of Suspended Licensure	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$250.00
Reinstatement of Revoked Licensure	34-21-2(j)(22) 34-21-24 34-21-23(c)	610-X-4-.14	\$750.00
Late Continuing Education Fee:			
First Time	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$150.00
Second Time	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$300.00
Three or more times	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$600.00
Coordinated Licensing Information System Report	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$50.00
Duplicate continuing education card	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$25.00
Non-Nurses Verification of License	34-21-2(j)(22) 34-21-24 34-21-25(j)(8)	610-X-4-.14	\$50.00
Public Records Requests/Document Retrieval and Preparation			
For the first hour or any portion thereof	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$5.00
Per each additional hour or any portion thereof per page fees:	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$20.00
Copies produced on standard 8.5 X 11 paper	34-21-2(j)(22) 34-21-24	610-X-4-.14	.50 per page

Fee Type/Purpose	Statutory Authority	Administrative Rule	Amount Collected
Resend Mail Fee	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$25.00
Group Online Licensure Verification Service (annual fee)			
Level I	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$100.00
Level II	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$750.00
Level III	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$1,500.00
Level IV	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$2,000.00
Processing Subpoena	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$10.00
Statutory Bad Check Charge	8-8-15	610-X-4-.14	\$30.00
Reactivation of retired single state license within two years of retired status	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$600.00
Reactivation of retired multistate license within two years of retired status	34-21-(j)(22) 34-21-24	610-X-4-.14	\$700.00
Reactivation of retired single rate license following two years of retired status	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$250.00
Reactivation of retired multistate license following two years of retired status	34-21-2(j)(22) 34-21-24	610-X-4-.14	\$350.00
Biennial Renewal of Medical Assistant – Certified Permit	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$50.00
Medical Assistant – Certified Permit by Examination or Endorsement	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$50.00
Reinstatement or a lapsed, revoked, or suspended Medical Assistant – Certified Permit	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$75.00
Medical Assistant – Certified Copies of Records	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$5.00 search fee plus .25 per page
Medical Assistant – Certified Resend Mail Fee	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$25.00
Medical Assistant – Certified Statutory Bad Check Charge	34-21-2(j)(22) 34-21-24	610-X-14-.12	\$30.00

Schedule of Receipts, Disbursements and Balances

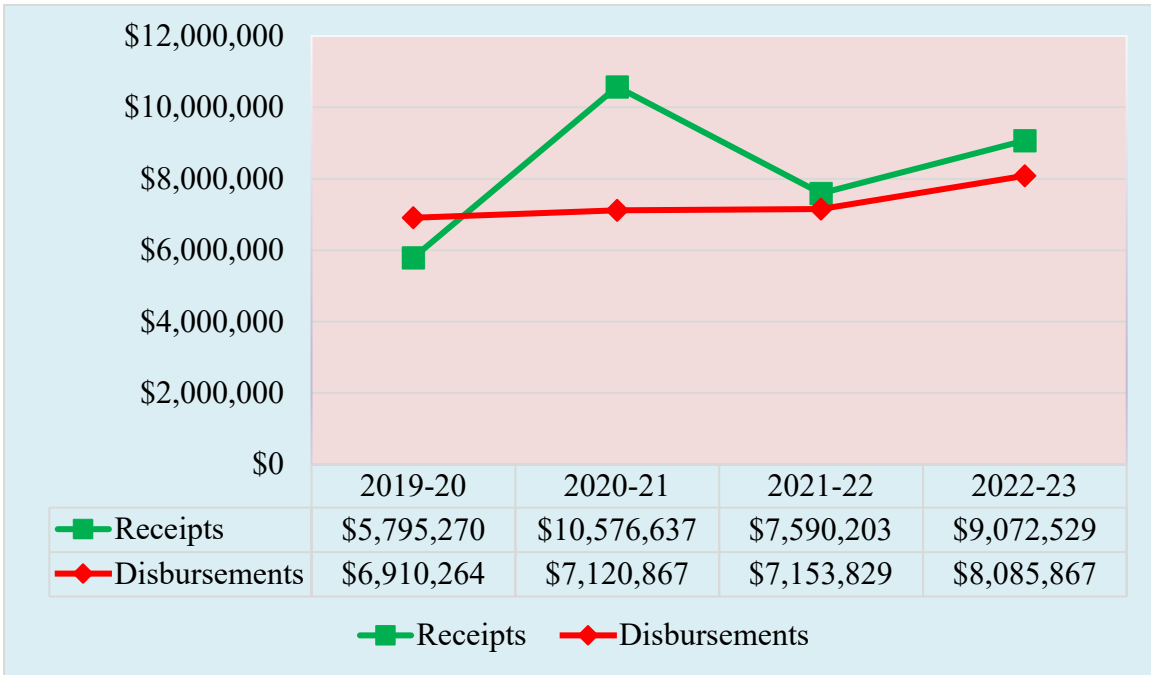
Board of Nursing Operating Fund
October 1, 2019 through September 30, 2023

	2019-2020	2020-2021	2021-2022	2022-2023
<u>Receipts</u>				
License Fees	\$4,340,460.00	\$9,118,450.00	\$6,534,925.01	\$7,949,925.00
Documents & Records*	296,777.97	194,523.15	176,448.00	177,900.75
Professional or Occupational Exam	777,850.00	821,100.00	763,278.49	802,400.00
Miscellaneous Fees **	13,850.00	9,060.75	1,027.00	6,740.01
Professional/Occupational Board Penalties	115,130.00	130,950.00	114,460.00	132,660.00
Grant Award	249,990.50	302,500.00		
Prior Year Refunds	684.37	1.37		721.87
Salvage Equipment or Other Party	527.39	51.42	64.52	2,181.38
Total	<u>5,795,270.23</u>	<u>10,576,636.69</u>	<u>7,590,203.02</u>	<u>9,072,529.01</u>
<u>Disbursements</u>				
Personnel Costs	3,486,302.79	3,708,497.12	3,732,740.98	4,145,775.75
Employee Benefits	1,407,077.85	1,441,608.17	1,443,761.21	1,544,780.81
Travel, In-State	18,451.72	17,034.76	20,417.71	24,310.13
Travel, Out-of-State	34,456.94		37,217.40	59,896.74
Repairs & Maintenance	813.00		1,930.50	255.53
Rentals & Leases	968,016.20	983,368.39	1,029,360.10	1,262,908.38
Utilities & Communications	69,457.65	59,314.97	61,738.64	66,013.63
Professional Services	374,390.46	514,450.48	434,389.11	429,777.77
Supplies, Materials, & Operating Expenses	150,843.67	273,338.50	192,409.40	235,919.58
Transportation Equipment Operations	15,812.38	20,939.33	35,358.65	27,625.07
Grants & Benefits	25.00	25.00	25.00	
Transportation Equipment Purchases			72,945.50	81,161.00
Other Equipment Purchases	384,615.87	102,289.97	91,534.48	207,442.95
Total	<u>6,910,263.53</u>	<u>7,120,866.69</u>	<u>7,153,828.68</u>	<u>8,085,867.34</u>
Excess (Deficiency) of Receipts over Disbursements	(1,114,993.30)	3,455,770.00	436,374.34	986,661.67
Cash Balance at Beginning of Year	<u>6,858,375.58</u>	<u>5,743,382.28</u>	<u>9,199,152.28</u>	<u>9,635,526.62</u>
Cash Balance at End of Year	5,743,382.28	9,199,152.28	9,635,526.62	10,622,188.29
Reserved for Year-End Obligations	<u>(966,350.42)</u>	<u>(602,660.73)</u>	<u>(619,778.53)</u>	<u>(421,971.76)</u>
Unobligated Cash Balance at End of Year	<u>\$4,777,031.86</u>	<u>\$8,596,491.55</u>	<u>\$9,015,748.09</u>	<u>\$10,200,216.53</u>

*Registration of continuing education courses, for the National Council Licensure Examination, and consultation fees.

**Includes duplicate cards, copies, provider application fees, Voluntary Disciplinary Alternative Program (VDAP) Mentoring fee, Notary fee, processing subpoena, subscription fees, reinstatement fee - CE provider, initial application for the new nursing education program, disciplinary admin penalty, and labels.

Operating Receipts vs. Operating Disbursements*



Schedule of Receipts, Disbursements and Balances

Education Trust Fund
Scholarships for Graduate Education of Nurses
October 1, 2019 through September 30, 2023

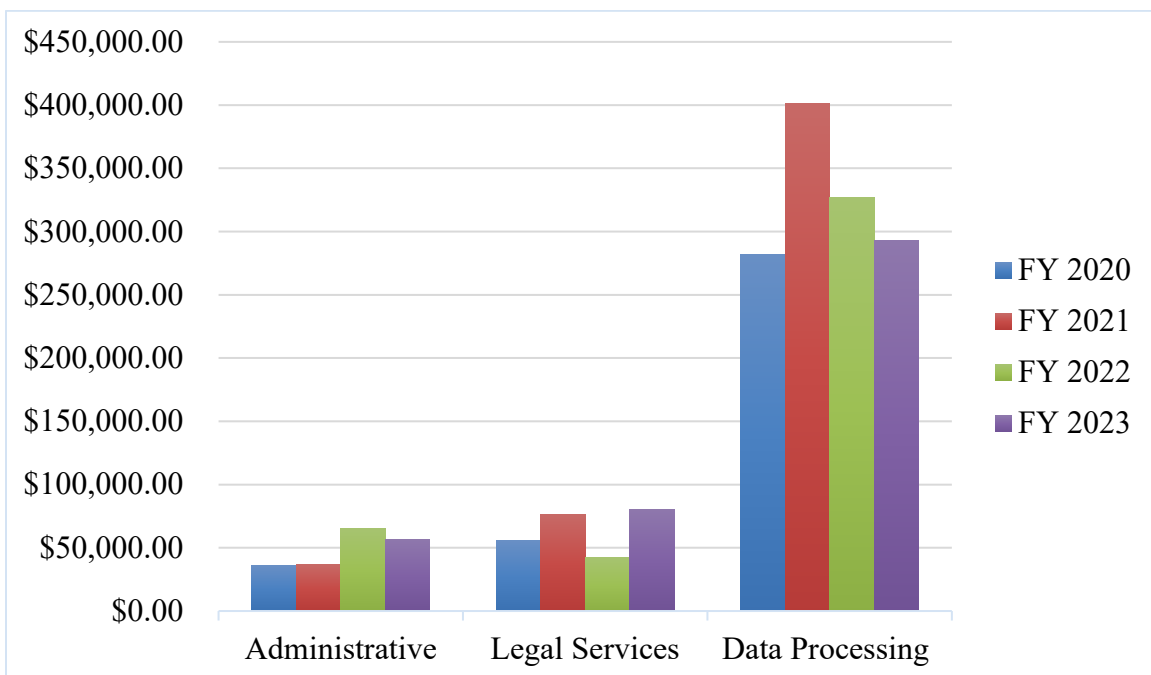
	<u>2019-2020</u>	<u>2020-2021</u>	<u>2021-2022</u>	<u>2022-2023</u>
<u>Receipts</u>				
Education Trust Fund	\$616,027.00	\$616,027.00	\$616,027.00	\$646,027.00
<u>Disbursements</u>				
Grants and Benefits	541,026.59	616,026.60	586,026.94	631,026.70
Current Year Reversion	75,000.41	0.40	30,000.06	15,000.30
Total	616,027.00	616,027.00	616,027.00	646,027.00
Unobligated Cash Balance at End of Year	\$	\$	\$	\$

Summary Schedule of Professional Services Disbursements*

As of September 30th				
Type of Service	FY 2020	FY 2021	FY 2022	FY 2023
Administrative	\$36,265.49	\$36,946.52	\$65,088.64	\$56,616.52
Legal Services	55,886.19	76,410.80	42,042.46	80,593.94
Data Processing	282,238.78	401,093.16	327,258.01	292,567.31
Total	\$374,390.46	\$514,450.48	\$ 434,389.11	\$429,777.77

*Detailed information presented in the Appendix III of this report.

Professional Services Disbursements Chart



QUESTIONNAIRES

Board Member Questionnaire

A letter was sent to all thirteen members of the Board of Nursing requesting participation in our survey. Six participated in our survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) currently facing the Board of Nursing and how is the Board addressing these issues?

Board Member #1 – “As a relatively new board member, I do not see any significant issues. The Board and Board Staff do a fine job, in my opinion, of handling any issue(s) that arise.”

Board Member #2 – “Nurse Practitioner (NP) Compact and NP independent practice.”

Board Member #3 – “The most significant issue facing the Alabama Board of Nursing appears to be the ongoing nursing shortage. To address this issue, the Board is

- Fostering collaborative practice among nurses
- Mandating continuing education for advanced practice nurses
- Leading discussions among stakeholders to address staffing issues
- Establishing the ABN Center for Nursing Excellence to provide training and workforce analysis
- Offering scholarship and employment opportunities through the ABN Workforce Center.”

Board Member #4 – “The ABN is seeking to provide safe nurses in the state of Alabama. The ABN has been active with the NCSBN in development of a new NCLEX which was implemented in April of 2023. That culminated an initiative nationwide that began over 10 years ago. The ABN has also worked on the nursing shortage to create innovative ways to encourage persons to enter nursing and support current nurses. That has resulted in a collaboration with the Governor's office in the development of an apprenticeship program and the medication assistant program (MAC). The Governor's office has also provided some grants to schools to support LPN programs. The newest challenge is safe certification and standardization of technicians which has resulted in the nursing support tech (NST) program which will be officially launched in the fall of 2024.”

Board Member #5 – “The most significant issue is expanding the scope of Nurse Practitioners to independent practice. We are addressing this issue by working collaboratively with the Joint Committee and professional associations to expand practice within the constraints of the law.”

Board Member #6 – “Public Safety.”

2. What, if any, changes to the Board’s laws are needed?

Board Member #1 – “Changes needed for laws are presented to the board for a vote as needed.”

Board Member #2 – “I cannot think of anything that needs to be changed unless it is the 2 topics I mentioned above.”

Board Member #3 – “None at this point.”

Board Member #4 – “I am not aware of any. Modifications are made when issues arise.”

Board Member #5 – “None.”

Board Member #6 – “I believe the Board updates as needed.”

3. Do you think the Board is adequately funded?

Yes	3	50%
No	2	33%
Unknown	1	17%

4. Do you think the Board is adequately staffed?

Yes	4	66%
No	1	17%
Unknown	1	17%

5. Does the Board receive regular reports on the operations of the board from the Executive Officer?

Yes	6	100%
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6. Has the Board experienced any significant changes to its operations?

Yes	3	50%
No	3	50%

7. Does the Board plan to make any significant changes in its operations?

Yes	3	50%
Unknown	3	50%

8. Do you have any additional comments you would like to make?

Board Member #1 – “Significant changes include the adoption of the Alabama Massage Therapy Licensing Board.”

Board Member #2 – “The reason I answered, 'no' to questions 3 & 4 and 'yes' to question 6 is because the BON has taken on the operation of Board of Massage Therapy and this has doubled the work for the BON. The BON has an excellent CEO in Ms. [REDACTED]. She is a pleasure to work with and I continuously learn from her. I think the BON was given the responsibility for the Massage Therapy Board because of Ms. [REDACTED] and the BON's expertise and leadership.”

Board Member #3 – “We have an amazing EO and Board Staff. Additionally, the Alabama Board of Nursing is also focusing on:

- Enhancing licensure and certification processes for nurses
- Improving healthcare access and equity, particularly in rural areas
- Addressing the opioid crisis through education and training
- Promoting nursing workforce diversity and inclusivity
- Encouraging nursing education and research initiatives

The Board is actively engaged in addressing these pressing issues to ensure the delivery of high-quality healthcare services in Alabama.

Thank you.”

Board Member #4 – “It has been a pleasure to work with such a professional group of individuals.”

Board Member #5 – “[REDACTED] has led us with character and integrity and has made the ABN a role model for other state's Boards of Nursing across the country. Because of this, we have received recognition on a national level for those efforts. I am also extremely grateful for the work of the Board staff to support the initiatives of the ABN.”

Board Member #6 – “None.”

Registered Nurse Licensee Questionnaire

A letter was sent to one hundred and twenty registered nurse licensees requesting participation in our survey. Twenty participated in the survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) currently facing your profession in Alabama?

Respondent #1 – “Just moved here from Illinois and transferred my license. Unfortunately I have not been able to find a nursing position yet.”

Respondent #2 – “Availability of enough RNs to care for our aging patient population. Being short staffed leads to early burnout and promotes taking short cuts that might not be in the best interest of our patients.”

Respondent #3 – “Nursing shortage.”

Respondent #4 – “Lack of nurses and aides.”

Respondent #5 – “A major issue in Alabama is the pay for nurses. The pay is better in other states so people are leaving to find better paying positions. I believe this is contributing somewhat toward the nursing shortage we are experiencing.”

Respondent #6 - “NA I am retired.”

Respondent #7 – “How hard nursing is on your mental health.”

Respondent #8 – “Excessive work hours.”

Respondent #9 – “The shortage of nurses. The time it takes to be approved to work under a new collaborating physician.”

Respondent #10 – “A reduction in the amount of nurses at bedside without nurse to patient ratio guidelines. This allows hospitals to put more work onto nurses which will lead to errors in care.”

Respondent #11 – “Nurses graduating without receiving adequate clinical training.”

Respondent #12 – “Shortage of staff.”

Respondent #13 – “Staffing shortage, mental health.”

Respondent #14 – “In my personal case , a RN on probation for events that occurred before my licensure, the unfair, and criminal treatment by the board and almost impossible hurdles to make it through probation. This includes an unjust restarting of my probation period, drug testing, and a suspension for a non-substance related character complaint. The Board used scare tactics and aggressive techniques when I formed a legal team to protect myself which ensured my signing their arbitrary board order, and paying them fines. I also think the board not employing nurses and then deciding the fates of peoples careers without checks and balances is criminal.”

Respondent #15 – “Staffing and leadership.”

Respondent #16 – “I do not live in Alabama. However, I have kept my nursing licensure current as I have family there in the event that I returned to the state.”

Respondent #17 – “This board doesn’t have many issues but the major issues with VDAP and Probation must be corrected. Good, experienced nurses are being treated like animals and losing their license because of this board and their lack of transparency as it relates to the program. The program for nurses suspected of substance abuse or mental health issues is broken. This is a public health and safety issue that is getting worse by the day. The current executive director promoted two unlicensed persons with absolutely no addiction or medical experience to be director of VDAP and director of probation. VDAP is used as a trap to get nurses to admit to a problem (that they may or may not have) and remove them from the nursing profession. Nurses who are on these ridiculous VDAP and probation orders cannot find or keep employment and are mistreated by the board, other nurses and employers. The board is quick to inform you of an investigation, but then will place you on the back burner for years until they notify you that nothing was found and the case will be closed. The board advertises that it wants to help and operate with transparency, but has proven that this is not the case.

EXAMPLE OF HOW IT NORMALLY GOES: Nurse has an issue at work. Workplace has been trained by the board to tell the nurse to self-report. Nurse is scared and doesn’t know what to do so self-reports. Nurses are led to believe that if they self-report then that will make it all better. Nurses may or may not actually have a problem that would cause any issues whatsoever as to safety with patients. Nurse goes for a \$5,000 evaluation. Board approved treatment provider finds a problem and requires 2 months of inpatient treatment and the nurse cannot afford the \$30,000 to \$60,000 so the nurse surrenders their license and moves on. Remember, this nurse probably didn’t even have an issue that would rise to the level of inpatient treatment but these absurd ASAM guidelines allow the board and treatment provider to get rid of nurses. This is a major contributor to the nursing shortage in Alabama.

MANDATE THAT ALL NURSES RECEIVE AN EXAMINERS/SUNSET SURVEY: The board did send out an email letting nurses know that examiners may be sending them a survey. I, and many of my colleagues, thought this was spam. That email should have included information so that I knew who to contact in order to request a survey myself. The law needs to be changed to reflect this. No nurses are aware or understand the sunset audit process and how we can participate and the board wants it this way. It should be mandated in statute that all nurses are required to receive a survey or at the very least given information on how to request one.

PUBLIC COMMENT PORTION OF MEETINGS: The board executive director will not allow nurses or members of the public to speak at board meetings and address the board directly. There must be a requirement in statute that anyone who wants to speak can sign up to speak and be permitted to do so.

PROGRAM DIRECTORS: The director of any addiction or wellness program at a board must have medical training and training in addiction and monitoring. This is imperative for a proper functioning program. Even the masters level supervisor that the board claims oversees everything has no training in addiction but simply sits on the board of an addiction group to meet the requirement.

OVERTREATMENT OF NURSES FOR FINANCIAL GAIN: These treatment providers even require in-patient treatment for nurses who have been sober for quite some time - the ONLY reason for this is so that the treatment providers can collect massive amounts of money from insurance companies.”

Respondent #18 – “The Alabama BON doesn’t have many issues but VDAP and Probation programs are major areas that need correction immediately. Innocent, good nurses are being treated horribly and are losing their licenses bc of the BON and their lack of transparency as it relates to the program. The program for nurses suspected of substance abuse or mental health issues is sadly broken. This program, if anything is causing worsening mental health on the nurse being investigated. The current executive director promoted two unlicensed persons with absolutely no addiction or medical experience to be director of VDAP and probation. VDAP is used as a trap to get nurses to admit to a problem and remove them from the nursing profession. Nurses are often falsely accused of drug problems and are being punished unfairly. Nurses who are on these unfair and unreasonable VDAP and probation orders cannot find or keep employment and are mistreated by the board, other nurses and employers. Thus causing mental health problems and ultimately hurting families and livelihoods. My story: I was falsely accused of stealing a co workers narcotics she had brought to work with her. I was forced to resign and self report. I was denied a drug test (which would have been negative) and lost the job I loved so much. I worked at this company for 9 years and was never accused of being under the influence. I was a charge nurse and was very respected. The nurse that accused me of stealing from her has a known history of drug use and they did not see a problem with her having narcotics with her at work. Yet I’m the one under investigation. The fact that my livelihood is at the hands of the BON and their ruthless probation and VDAP programs is the most unsettling thing I have ever experienced.”

Respondent #19 – “We as nurses don’t really have a voice.”

Respondent #20 – “Too much emphasis on computers rather than patient care.”

2. Do you think regulation of your profession by the Board of Nursing is necessary to protect the public welfare?

Yes	20	100%
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3. Do you think any of the Board’s laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	6	30%
No	9	45%
Unknown	5	25%

4. Are you adequately informed by the Board of changes to and interpretations of the Board’s positions, policies, rules, and laws?

Yes	14	70%
No	5	25%
Unknown	1	5%

5. Do you consider mandatory continuing education necessary for the competent practice of your profession?

Yes	13	65%
No	7	35%

6. Does the Board respond to your inquiries in a timely manner?

Yes	12	60%
No	1	5%
Unknown	7	35%

7. Has the Board performed your licensing and renewal in a timely manner?

Yes	19	95%
No	1	5%

8. Do you have any additional comments you would like to make?

Respondent #1 – “None.”

Respondent #2 – “I think the Alabama BON has done an exceptional job of making certain patients are cared for in a safe and professional fashion.”

Respondent #3 – “No.”

Respondent #4 – “Hospitals need to re- enact paying for your degree or at least the last 2 years- if BSN - and then the graduate agrees to work for them for 2 years. - put a lot of nurses aides back up on the floors to help out -especially male aides- put LPNs back in the hospital.”

Respondent #5 – “None.”

Respondent #6 – “No.”

Respondent #7 – “No.”

Respondent #8 – “N/A.”

Respondent #9 – “No.”

Respondent #10 – “No.”

Respondent #11 – “CEU process is a joke. Very concerned about cellphone usage by nurses while on duty.”

Respondent #12 – “No”

Respondent #13 – “No.”

Respondent #14 – “I would like to share a summary of my story and how I feel my treatment has been unfair. I graduated RN school in 2018 with good grades and no gaps or academic hurdles in my degree. Upon graduation and application for licensure we were instructed to divulge any legal troubles through our life on the application. In full transparency I was in a fraternity through my initial college undergrad years and got into alcohol related troubles. I have some arrests on my record. I divulged all my legal interactions and finished my application. In the meantime I had already secured a job in an emergency department which is my passion. Some months go by after all my colleagues have started their careers , I lost my RN position, and I get a letter saying my license process has been placed on hold until I go for an evaluation. I arrive to the evaluation sober and after hearing my story I am ordered to do the shortest treatment program they offer which is 2 months and costs tens of thousands of dollars. Thankfully I have a successful father and he paid for this. The whole system felt like a scam to make money. Not a single person I saw get evaluated got sent home without staying and paying. And I wasn’t even a RN yet. So I complete the program and the. The board tells me I must demonstrate sobriety for 6 months before I can even test. So I jump through the hoops, remain unemployed and pay for the drug tests. I finally am allowed to test which was extremely unfair after being out of school and the medical world for over a year. I pass and then am awarded a license full of restrictions. Now years later I have been sober for 6 years, and had my probation restarted from day one, after a 3 month suspension, due to a character complaint and unfair firing by a hospital a year after the fact. After paying thousands of dilapidated and forming a legal team I was told if I tried my case in court the board would just take my license. My director contacted the board and gave a character reference and pleaded and this did nothing as well. At this point I have been at my current position for 2.5 years with superb performance and am a top RN in my unit. Multiple attempts at requesting some restrictions be removed such are as work hour limits have been denied. I am still required to drug test , with continuously increasing costs, and report my travel and possibly drug test during travel to this day. This is ridiculous as well because I am not a vdap RN and have never diverted or mishandled medication or had any substance issues while holding this license. I also cannot pursue education or travel nursing while having an encumbrance which impedes my career and income. I feel like I am being treated like a criminal and am trapped by the board in a never ending cycle.”

Respondent #15 – “I think when it comes to issues that regard your license it should be more support for the nursing instead of automatically punishment. It is daily issues that we have to deal with personally and emotionally everyday and as a nurse that the board of nursing does not take into consideration I feel.”

Respondent #16 – “Alabama Bd of Nursing is more computerized and current than here in Ohio! ABON had renewal of licensure, changed laws for Contract Multi-Licensure, and checks CE licensure requirements easier than here in Ohio!”

Respondent #17 – “Treatment providers are unaware that the directors of probation and VDAP are unqualified and are not medical professionals or trained in addiction. So treatment providers communicate with board personnel about treatment decisions and recommendations that the unlicensed persons at the board should not be involved in. If this were in any setting other than a government board and addiction, it would be practicing medicine without a license. This should not be tolerated under any circumstance.

STATUTORY ALTERNATIVES: Alternative methods for addiction and mental health treatment should be available for nurses that need help rather than the current career ending options.

END USE OF ASAM GUIDELINES: Statute must be changed to abandon the requirement of ASAM Guidelines. If the board had a properly functioning support system for nurses and utilized proper personnel who are qualified, nurses could be properly helped and monitored without upending their lives. ASAM guidelines are old, outdated and were developed by and for the benefit of treatment providers who are making money through the overtreatment of nurses.

SAME ORGANIZATION HANDLING THE EVALUATION CANNOT ALSO PROVIDE THE TREATMENT: This is a conflict of interest and should not be permitted. Almost all nurses who have any issue should be monitored and still permitted to work while they complete out-patient treatment.”

Respondent #18 – “RULE AND STATUTE CHANGES NEEDED: MANDATE REQUIREMENTS FOR INPUT FROM LICENSEES THROUGH SUNSET AUDIT PROCESS VDAP PROGRAM SPECIFICATIONS AND REQUIREMENTS SHOULD BE OVERHAULED IN STATUTE AND NOT LEFT UP TO BOARD RULES PROGRAM DIRECTOR QUALIFICATIONS: Qualifications for the director of probation and VDAP should be mandated in statute and not left up to the board TREATMENT PROGRAM

QUALIFICATIONS: Qualifications for treatment providers should be mandated in statute and not left up to the board STATUTORY ALTERNATIVES: Alternative methods for addiction and mental health treatment should be available for nurses that need help rather than the current career ending options

END USE OF ASAM GUIDELINES: Statute must be changed to abandon the requirement of ASAM Guidelines. If the board had a properly functioning support system for nurses and utilized proper personnel who are qualified, nurses could be properly helped and monitored without upending their lives. ASAM guidelines are old, outdated and were developed by and for the benefit of treatment providers who are making money through the overtreatment of nurses.

SAME ORGANIZATION HANDLING THE EVALUATION CANNOT ALSO PROVIDE THE TREATMENT: This is a conflict of interest and should not be permitted. Almost all nurses who have any issue should be monitored and still permitted to work while they complete out-patient treatment.”

Respondent #19 – “I feel that even though we are put in place to provide and care for the public safety, we just don’t have a voice in our on practice that was not freely given it was well earned and can easily be threatened.”

Respondent #20 – “No.”

Licensed Practical Nurse Licensee Questionnaire

A letter was sent to one hundred and two licensed practical nurse licensees requesting participation in our survey. Sixteen participated in the survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) currently facing your profession in Alabama?

Respondent #1 – “Facilities that provide LPNs with certifications in house to get RN work out of them at LPN prices. (Uab).”

Respondent #2 – “Salary.”

Respondent #3 – “The nursing shortage and the lack of experience in specific areas.”

Respondent #4 – “Pay.”

Respondent #5 – “Under staffing.”

Respondent #6 – “Amount of nurses in the clinical setting.”

Respondent #7 – “Nothing.”

Respondent #8 – “Shortage of nurses and extensive paperwork that keeps you from doing the nursing part of your job.”

Respondent #9 – “Shortage of nurses.”

Respondent #10 – “I believe that in todays economy and inflation that our rate of pay is not sufficient to be able to live comfortably.”

Respondent #11 – “Too many patients placed on one nurse in nursing homes.”

Respondent #12 – “Increase in pay rate.”

Respondent #13 – “Proper training/education - nursing schools make it harder than it has to be. They seem to go all the way around so many subjects.”

Respondent #14 – “This board doesn't have many issues but the major issues with VDAP and Probation must be corrected. Good experienced nurses are being treated like animals and losing their license because of this board and their lack of transparency as it relates to the program. My story for instance: I am a nurse of 20 years experience. My health was being demolished because of my drinking at home (NOT ON THE JOB), I saw that I had a problem with alcohol addiction, I sought treatment on my own by placing myself into detox. My work place said I had to self report myself, so I did. What I didn't know is that I was going to be punished for getting the help I needed for my health. If someone voluntarily seeks treatment they should not be punished with fines and license suspension.”

Respondent #15 – “Fair pay, short staffed.”

Respondent #16 – “Safety.”

2. Do you think regulation of your profession by the Board of Nursing is necessary to protect the public welfare?

Yes	16	100%
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3. Do you think any of the Board’s laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	1	6%
No	11	69%
Unknown	4	25%

4. Are you adequately informed by the Board of changes to and interpretations of the Board’s positions, policies, rules, and laws?

Yes	1	6%
No	11	69%
Unknown	4	25%

5. Do you consider mandatory continuing education necessary for the competent practice of your profession?

Yes	14	88%
No	2	12%

6. Does the Board respond to your inquiries in a timely manner?

Yes	11	69%
No	1	6%
Unknown	4	25%

7. Has the Board performed your licensing and renewal in a timely manner?

Yes	16	100%
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8. Do you have any additional comments you would like to make?

Respondent #1 – “No.”

Respondent #2 – “No.”

Respondent #3 – “Alabama nurses are the best.”

Respondent #4 – “N/A.”

Respondent #5 – “I appreciate the board and all they do to ensure competency in Alabama nurses. This keeps patients safe and healthy.”

Respondent #6 – “none.”

Respondent #7 – “No.”

Respondent #8 – “No.”

Respondent #9 – “No.”

Respondent #10 – “No.”

Respondent #11 – “None at this time.”

Respondent #12 – “No.”

Respondent #13 – “I am just excited to have the opportunity to begin my career in helping people.”

Respondent #14 – “VDAP and probation are used as traps for the board to mislead licensees into participation and then make it impossible to complete. The director of any addiction or wellness program at a board should have training in addiction and monitoring as well as medical training. When a nurse is asked to self report or is suspected of an issue, hardly any information is provided to the nurse by the board. The VDAP/probation process is not explained to the nurse. The cost of the evaluation is not explained nor is the cost of treatment explained to the nurse. Back to my situation, if I would have took the consent order proposed by the board I would be out of pocket near \$5000 just for an evaluation, when I have had over 90 days of sobriety at this point. Another thing that the board does not tell you is that the board approved facility is going to most likely recommend inpatient treatment according to ASAM guidelines because the nurse is in a safety sensitive profession. So here I would be out another \$20,000 or more plus a fine and my license would be suspended. Without a license how can anyone afford to pay that when the nurse is not working. And the board gives an option of "You can surrender your license." That should not even be an option for a nurse who has been in practice for 20 years. Especially with the nursing shortage we have today. VDAP program specifications and requirements should be overhauled in statue and not left up to the board rules. Alternative methods for addiction and mental health treatment should be available for nurses that need help rather than the current career ending options. A nurse should be able to seek treatment on their own and not be punished for doing so.”

Respondent #15 – “No.”

Respondent #16 – “Nursing is a profession that is getting difficult to fill needed positions.”

Complainant Questionnaire

A letter was sent to one hundred complainants requesting participation in our survey. Thirteen participated in the survey. The percentages are based on the number who responded to the question.

1. Was the receipt of your complaint acknowledged by the Board?

Yes	11	84%
No	1	8%
Unknown	1	8%

2. Approximately how long after filing your complaint did the Board contact you?

Within 15 days	6	46%
Within 30 days	1	8%
More than 60 days	2	15%
Unknown	4	31%

3. Did the Board communicate the results of its investigation into your complaint to you?

Yes	8	62%
No	5	38%

4. Do you think the Board did everything it could to resolve your complaint?

Yes	1	8%
No	8	62%
Unknown	4	30%

5. Do you have any additional comments you would like to make?

Respondent #1 – “The man who handled my case was incredibly rude, dismissive, and he thought I was a liar before I even said my story just because I waited to report it. Hope you guys remember my case when the nurse I reported inevitably gets reported again in the future for breaking HIPAA and telling confidential information about patients to others as gossip. Nothing I said was taken seriously and she continues to harm her patients emotionally and mentally. You guys should do better because you did absolutely nothing to resolve the matter.”

Respondent #2 – “No.”

Respondent #3 – “My Complaint was against [REDACTED] [REDACTED]. She was convicted of 2 domestic charges against me and was indicted by the grand jury and pleaded out for theft in [REDACTED] Alaama of my home. She paid Me restitution. No idea what the nursing board did. Please let me know

[REDACTED] [REDACTED] [REDACTED]
Or [REDACTED] or [REDACTED] or [REDACTED]
I need closure.”

Respondent #4 – “When I filed complaint they were the ones that noticed my sister’s marks on her leg from being tied down. We sent all the pictures and told them that the nursing home disregarded our rights to visit my sister at any time and we were only allowed in the waiting room between 2 and 4. We also were not allowed to have her medical records when we were taking her home with us.”

Respondent #5 – “I thought the first thing medical professionals learned was to do no harm? Allowing a nurse to engage in sexual activity with patients that are in the midst of treatment is questionable judgement. I wouldn't want someone that manipulates patients to engage in further patient treatment.”

Respondent #6 – “I do not think my complaint was resolved as it should have been but I did not expect anything more.”

Respondent #7 – “They communicated about my complaint thoroughly.”

Respondent #8 – “No.”

Respondent #9 – No response.

Respondent #10 – “My concerns were never addressed.”

Respondent #11 – “I am a retired nurse a nurse should have higher standards and morals on the job and out in public. The person that I reported has either.”

Respondent #12 – “I’m sure I’m not supposed to know the outcome, but I wish I could know this outcome. And I would also suggest looking into every nurse at all Noland nursing facilities. Very, very poor care and non compliance.”

Respondent #13 – “No additional comments.”

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APPENDICES

Appendix I Applicable Statutes

CHAPTER 21 NURSES.

Article 1 General Provisions.

Section 34-21-1 Definitions.

For purposes of this chapter, the following terms shall have the respective meanings ascribed by this section:

- (1) **ADVISORY COUNCILS.** Advisory councils provided for under the terms of this chapter.
- (2) **BOARD.** The Board of Nursing created hereunder.
- (3) **COMPACT.** The Enhanced Nurse Licensure Compact provided in Article 7.
- (4) **COORDINATED LICENSE INFORMATION SYSTEM.** A licensing integrated database and process for collecting, storing, and sharing nurse licensure and enforcement information that includes all licensed registered nurses and licensed practical/vocational nurses. The system includes all disciplinary history of each nurse, as administered by a nonprofit organization and controlled by licensing boards.
- (5) **LICENSED PRACTICAL NURSE.** A person who is currently licensed to practice practical nursing. For the purposes of the Enhanced Nurse Licensure Compact, practical nursing includes practice as a licensed practical nurse, licensed vocational nurse, or other similarly qualified licensed nurse in any state participating in the compact.
- (6) **LICENSED PROFESSIONAL NURSE.** A person who is currently licensed to practice professional nursing.
- (7) **MULTISTATE LICENSE.** A license to practice as a registered nurse or licensed practical nurse issued by a home state licensing board that allows a licensed nurse to practice in any state authorized to grant multistate licensure privileges under the Enhanced Nurse Licensure Compact.
- (8) **MULTISTATE LICENSURE PRIVILEGE.** A legal authorization associated with a multistate license that allows the practice of nursing as a registered nurse or licensed practical nurse in any state participating in the Enhanced Nurse Licensure Compact.
- (9) **PRACTICE OF PROFESSIONAL AND PRACTICAL NURSING.** Nursing is a profession the practice of which is defined as:
 - a. **Practice of Professional Nursing.** The performance, for compensation, of any act in the care and counselling of persons or in the promotion and maintenance of health and prevention of illness and injury based upon the nursing process which includes systematic data gathering, assessment, appropriate nursing judgment and evaluation of human responses to actual or potential health problems through such services as case finding, health teaching, and health counselling; and provision of care supportive to or restorative of life and well-being, and executing medical regimens including administering medications and treatments prescribed by a licensed or otherwise legally authorized physician or dentist. A nursing regimen shall be consistent with and shall not vary any existing medical regimen. Additional acts requiring appropriate education and training designed to maintain access to a level of health care for the consumer may be performed under emergency or other conditions which are recognized by the nursing and medical professions as proper to be performed by a registered nurse.

b. Practice of Practical Nursing. The performance, for compensation, of acts designed to promote and maintain health, prevent illness and injury, and provide care utilizing standardized procedures and the nursing process, including administering medications and treatments, under the direction of a licensed professional nurse or a licensed or otherwise legally authorized physician or dentist. Such practice requires basic knowledge of the biological, physical, and behavioral sciences and of nursing skills but does not require the substantial specialized skill, independent judgment, and knowledge required in the practice of professional nursing. Additional acts requiring appropriate education and training may be performed under emergency or other conditions which are recognized by the nursing and medical professions as proper to be performed by a licensed practical nurse.

(10) SINGLE STATE LICENSE. A nurse license issued by a state participating in the Enhanced Nurse Licensure Compact that authorizes practice only within the issuing state and does not include a multistate licensure privilege to practice in any other state.

(Acts 1965, No. 867, p. 1615, §2; Acts 1975, No. 427, p. 1024, §1; Acts 1983, No. 83-642, p. 989, §1; Act 2019-102, §1.)

Section 34-21-2 Board of Nursing Generally.

Amended By Act 2024-249 And 2024-250, Effective October 1, 2024. See Version Labeled Pending.

(a) There is created the Board of Nursing, which shall be composed of 13 members to be appointed and have the duties and powers enumerated in this section. The membership of the board shall be inclusive and reflect the racial, gender, geographic, urban/rural, and economic diversity of the state. In order to insure continuity of administration, the nine board members provided for by Section 3 of Act 427, Regular Session 1975, shall continue to serve to the completion of the term for which they are serving. The Governor, within 60 days of January 1, 1984, shall appoint a tenth member who shall be a licensed practical nurse for a term of four years from a list of nominees furnished him or her by the Alabama Federation of Licensed Practical Nurses, Incorporated, or its successor organization. As the terms of all board members expire, their successors shall be appointed for terms of four years each. Vacancies in unexpired terms shall be filled in the same manner as original appointments are made. No member shall be appointed to more than two consecutive terms of four years each. Eight members of the board shall be licensed professional nurses, and four members of the board shall be licensed practical nurses.

(b)(1) The Governor shall appoint the members of the board who are licensed professional nurses from a list of nominees who are selected by the Board of Nursing Nomination Committee and furnished to the Governor by the Alabama State Nurses Association, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees as there are appointments to be made or vacancies to be filled. The Alabama State Nurses Association, or its successor organization, on or before December 1 of each year, or at such other times as necessary, shall furnish the Governor with a list of licensed professional nurses qualified for appointment to the board. In the nominating and appointing process, due care shall be taken to ensure the maintenance of qualified representation from the fields of nursing education, nursing administration, clinical nursing, and advanced practice nursing.

(2) The Governor shall appoint two of the members of the board who are to be licensed practical nurses from a list of nominees furnished him or her by the Board of Directors of the Licensed Practical Nurses Association of Alabama, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees for the vacancies to be filled. The Board of Directors of the Licensed Practical Nurses Association of Alabama, or its successor organization, on or before December 1 of each year in which the term of office of a board member or a nominee of the Board of Directors shall expire, or at such other time as necessary, shall furnish the Governor with the list of licensed practical nurses qualified for appointment to the board.

(3) The Governor shall appoint two members on the board who are to be licensed practical nurses from a list of nominees furnished him or her by the Board of Directors of the Alabama Federation of Licensed Practical Nurses, Incorporated, or its successor organization, and the list, when furnished, shall contain at least twice the number of nominees for the vacancies to be filled. The Board of Directors of the Alabama Federation of Licensed Practical Nurses, Incorporated, or its successor organization, on or before December 1 of each year in which the term of office of the board member filled by the nominee of the board of directors shall expire, or at such other times as necessary, shall furnish the Governor with a list of licensed practical nurses qualified for appointment to the board.

(c) The Governor may remove any member from the board for neglect of duty of the board, incompetency, or unprofessional or dishonorable conduct.

(d) Each person appointed to the board as a licensed professional nurse shall be a citizen of the United States, a resident of the State of Alabama, and have all of these additional qualifications:

(1) Be a graduate of a state-approved educational program for the preparation of practitioners of professional nursing.

(2) Be a currently licensed professional nurse in Alabama.

(3) Have a minimum of five years' successful nursing experience in an administrative, teaching, clinical capacity, or advanced practice.

(4) Be actively engaged in professional nursing in this state immediately preceding and during appointment.

(e) Each person appointed to the board as a licensed practical nurse shall be a citizen of the United States, a resident of the State of Alabama, and have all of these additional qualifications:

(1) Hold a diploma from an accredited high school or its equivalent.

(2) Be a graduate of a state-approved vocational educational program for the preparation of practitioners of licensed practical nursing.

(3) Be a currently licensed practical nurse in Alabama.

(4) Have a minimum of five years' successful nursing experience.

(5) Be actively engaged in licensed practical nursing in this state immediately preceding and during appointment.

(f) There shall be one member of the board who is a consumer and who is not a member of any of the health care professions. The consumer member shall be appointed by the Governor effective January 1, 1998, and shall serve for a term of four years. His or her successor shall be appointed in a like manner at the expiration of each term or upon a vacancy for the remainder of an unexpired term of office. The consumer member of the board shall have, presently or formerly, no direct financial interest in any health care facility, profession, agency, or insurer, or be, or have been, a health care worker.

(g) There shall be two advanced practice nurse positions to be filled effective January 1, 1998, in the same manner as all other professional nurse positions. One advanced practice nurse position shall be served for an initial five-year term and successors shall serve four-year terms. The remaining member appointed to an advance practice nurse position shall serve an initial four-year term and successors shall serve four-year terms.

(h) All members of the board shall enjoy immunity from individual civil liability while acting within the scope of their duties as board members.

(i) The board shall have the following powers and perform the following duties: It shall meet at least once a year and shall, at its organizational meeting and at its annual meetings thereafter, elect from its members a president, a vice president, and a secretary. It may hold such other and additional meetings during any year as it deems necessary for the transaction of business. A majority of the board, including one officer, shall constitute a quorum at any meeting.

(j) The board may:

(1) Adopt and, from time to time, revise such rules, not inconsistent with law, as may be necessary to carry out this chapter.

(2) Prescribe standards and approve curricula for nursing educational programs preparing persons for licensure under this chapter.

(3) Provide for surveys and evaluations of such programs at such times as it may deem necessary.

(4) Approve such nursing educational programs as meet the requirements of this chapter and the board. Nothing in this chapter shall be construed to diminish the power of the State Board of Education or other constitutionally or legislatively established state agencies to govern the schools under their respective jurisdictions.

(5) Deny or withdraw approval from educational programs for failure to meet prescribed standards. Withdrawal of approval shall be effected only after a hearing in accordance with board rules.

(6) Examine, license, and renew the licenses of duly qualified applicants and require employers to submit listings of personnel covered by this chapter to the board upon request including, but not limited to, personnel practicing nursing in Alabama under a multistate license, a single state license, or a multistate licensure privilege. The board may issue qualified applicants either a single state license or a multistate license.

(7) Adopt and, from time to time, revise rules providing standards including, but not limited to, scope of practice for student nurse apprenticeships and the issuance of student nurse apprentice permits by the board to eligible students.

(8) Adopt and, from time to time, revise rules providing standards including, but not limited to, scope of practice for certified medication assistants and the issuance of certified medication assistant permits by the board to eligible applicants. For purposes of this chapter, a certified medication assistant is an unlicensed assistive personnel who has successfully completed a board-approved curriculum for assistance with medications, or a comparable program in another state, and who holds a valid certification as a medication assistant. Practice by a certified medication assistant is limited to employment in health care or educational facilities that are licensed, certified, or operated by this state.

(9) Conduct investigations, hearings, and proceedings concerning alleged violations of this section or of the rules of the board.

(10) Have the power to issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.

(11) Cause the prosecution of all persons violating this chapter and incur such necessary expenses therefor.

(12) Keep a public record of all of its proceedings.

(13) Keep a register of all licensees.

(14) Make an annual report to the Governor.

(15) Appoint and employ a qualified person, not subject to the state Merit System, who shall not be a member of the board, to serve as executive officer and administrator and commissioner of the Enhanced Nurse Licensure Compact for Alabama.

(16) Define the duties and fix the compensation of the executive officer and administrator and commissioner of the Enhanced Nurse Licensure Compact for Alabama, with the approval of the Governor and the State Personnel Board as provided in Section 36-6-6.

(17) Employ such other persons as may be necessary to carry on the work of the board and provide for appropriate bonding of employees. Regular employees of the board shall be employed subject to the state Merit System in effect on January 1, 1966, or at the time of employment.

(18) Employ consultants, specialists, counsel, or other specially qualified persons under contract or on a part-time basis to assist it in administering this chapter and without regard to the state Merit System in effect on or after January 1, 1966, and pay for the services of such persons.

(19) Accept gifts and grants upon terms and conditions imposed by it through official resolutions.

(20) Perform such other duties, not inconsistent with law, as required by this chapter to foster and improve nursing and the regulation thereof and the public health of this state.

(21) Expend funds of the board in exercising its powers and duties and in administering this chapter.

(22) Determine and collect reasonable fees.

(23) Adopt standards for registered and practical nursing practice and for continued competency of licensees.

(24) Join organizations that develop and regulate the national nursing licensure examinations and promote the improvement of the legal standards of the practice of nursing for the protection of the public health, safety, and welfare.

(k) The executive officer employed by the board shall be a citizen of the United States, a person of the highest integrity, and possess these additional qualifications: Be a licensed professional nurse in Alabama or eligible for licensure, be a graduate of a professional nursing program approved by the state in which the program was completed, hold a master's degree, and have had a varied experience in nursing, including at least five years' experience in an administrative or teaching capacity.

(l) The executive officer shall be bonded for the faithful performance of the duties of the office in the sum of not less than five thousand dollars (\$5,000), and the premium of the bond shall be paid out of the funds of the board.

(m) Each member of the board shall receive the same per diem and travel allowance as is paid by law to state employees for each day's attendance at the board meetings incurred in the discharge of his or her duties as a board member in addition to any daily compensation or allowance, if any, as may be provided by the board, in such amount as may be determined by the board. Any member of the board engaged in duties under the direction of the board shall receive the per diem and travel expenses and daily compensation or allowance authorized by the board.

(n) Nothing in this chapter shall limit the rights of affected parties to appeal decisions of the board with regard to rules adopted pursuant to this chapter.

(o) Participation by the state in the compact provided in Article 7 shall be subject to review and evaluation by the Sunset Committee pursuant to Chapter 20 of Title 41, with the first review occurring in 2024. The Sunset Committee shall determine whether continued participation in the compact is in the best interests of the board or the licensees of the board. The Sunset Committee shall also review and evaluate participation in the compact within one year after the occurrence of any of the following:

(1) The annual assessment charged the board for participation in the compact exceeds one-half of one percent of the gross revenue of the board for the fiscal year immediately preceding the levying of the annual assessment.

(2) The state, the board, or members or employees of the state or board are named defendants in a suit brought in any court of law or equity by the Interstate Commission of Nurse Licensure Compact Administrators pursuant to Article 7.

(3) The passage of a resolution by either house of the Legislature requesting review pursuant to subsection (d) of Section 41-20-3.

(Acts 1965, No. 867, p. 1615, §3; Acts 1975, No. 427, p. 1024, §1; Acts 1983, No. 83-642, p. 989, §2; Acts 1989, No. 89-243, p. 349, §3; Acts 1997, No. 97-598, p. 1054, §1; Act 2009-15, p. 29, §3; Act 2017-46, §3; Act 2019-102, §1; Act 2021-275, §1.)

Section 34-21-2.1 Delegation of Certain Nursing Care Tasks to Non-Nurses.

(a) The Alabama Board of Nursing, by rule, may do the following:

(1) Determine what nursing care tasks may or may not be delegated by licensed nurses who provide nursing care in a residential community health setting to unlicensed health care workers, provided specific tasks that require the exercise of independent nursing judgment or intervention may not be delegated.

(2) Establish standards of practice by a licensed nurse who delegates nursing care tasks pursuant to subdivision (1).

(b) No department, board, or other agency, other than the Alabama Board of Nursing, may require licensed nurses who provide nursing care in a residential community health setting to receive any additional certification or training in order to delegate nursing care tasks to unlicensed health care workers.

(Act 2021-317, §1.)

Section 34-21-3 Advisory Councils.

The board shall appoint advisory councils as the board shall, from time to time, deem advisable to represent health disciplines and consumers. Each member of such advisory council appointed by the board shall receive \$30 per day for attendance at meetings of such advisory council or for attendance at the board meetings or otherwise engaged under the direction of the board, together with necessary travel and other expenses incurred in the discharge of such duties.

(Acts 1965, No. 867, p. 1615, §4; Acts 1975, No. 427, p. 1024, §1.)

Section 34-21-4 Funds of Board; Transfer of Duties, Powers, Etc., of Board of Nurses' Examiners and Registration to Board of Nursing.

All funds and revenues of whatever kind authorized or collected under the provisions of this chapter or the regulations of the board shall be collected by the board and shall be handled in accordance with existing regulations and accounting procedures of state departments and deposited in the board's trust fund in the State Treasury. Disbursements and withdrawals of such funds by the board shall be made in accordance with existing regulations and accounting procedures of state departments. The board shall pay all of its expenses from its own funds, and no expenses shall be borne by the State of Alabama from general funds of the state.

All the rights, duties, powers, and authority now or hereafter vested by law in the Board of Nurses' Examiners and Registration are hereby transferred to and vested in the Board of Nursing, and all rights, powers, duties, and authorities, whether clerical, executive, administrative, judicial, or quasi-judicial, now vested by law in the Board of Nurses' Examiners and Registration, shall be vested in the Board of Nursing hereby created and shall be exercised by it, together with any additional rights, powers, and authorities herein given or created by this chapter. The jurisdiction, functions, funds, effects, and personnel of the Board of Nurses' Examiners and Registration are hereby transferred to the Board of Nursing and covered with their current status. No unexpended funds of the Board of Nurses' Examiners and Registration or the Board of Nursing shall ever revert to the State of Alabama but shall remain the property of the Board of Nursing.

(Acts 1965, No. 867, p. 1615, §9.)

Section 34-21-5 Nursing Educational Programs.

An institution desiring to conduct a nursing educational program to prepare professional or practical nurses shall apply to the board and submit evidence that: It is prepared to carry out the prescribed minimum standards to educate students in professional nursing or in practical nursing and that it is prepared to meet such other standards as shall be established by this chapter or by the board.

The board shall cause a survey to be made of the institution and its proposed educational program. If the survey reveals and the board is of the opinion that all requirements for an approved nursing educational program are met, it shall approve the institution.

The board, as often as deemed necessary, shall survey all nursing educational programs in the state. Should such survey reveal that the institution conducting such nursing educational program is not maintaining the standards required by the board, notice shall be given to the institution in writing, specifying deficiencies. Should an institution fail to correct the deficiencies to the satisfaction of the board within a reasonable length of time, the board shall disapprove the nursing educational program of such institution; provided, the institution may again qualify for approval if all requirements and standards are met.

(Acts 1965, No. 867, p. 1615, §10.)

Section 34-21-6 Exemptions.

This chapter does not prohibit: The furnishing of nursing assistance in an emergency; the practice of any legally qualified nurse of another state, who is employed by the United States government or any bureau, division, or agency thereof, while in the discharge of his or her official duties; the practice of nursing by students enrolled in approved schools of nursing, as may be incidental to their course of study, nor shall it prohibit such students working as nursing aides; the practice of any currently licensed registered nurse or licensed practical nurse of another state whose employment responsibilities include transporting patients into, out of, or through this state or who is presenting educational programs or consultative services within this state not to exceed 30 days; persons, including nursing aides, orderlies, and attendants, carrying out duties necessary for the support of nursing services, including those duties which involve supportive nursing services performed in hospitals and elsewhere under the direction of licensed physicians or dentists, or under the supervision of professional nurses licensed hereunder, nor gratuitous nursing of the sick by friends or members of the family, nor the care of the sick when done in accordance with the practice of religious principles or tenets of any well recognized church or denomination which relies upon prayer or spiritual means alone for healing.

(Acts 1965, No. 867, p. 1615, §12; Acts 1983, No. 83-642, p. 989, §3.)

Section 34-21-7 Violations and Penalties.

Any person or persons, firm, partnership, association, or corporation, who shall sell or fraudulently obtain or furnish any nursing diploma, license, or license renewal or aid or abet therein; or practices nursing as defined in this chapter under cover of any diploma, license, or renewal license fraudulently obtained or issued under fraudulent misrepresentation or, after January 1, 1968, practices professional nursing as defined in this chapter or, after January 1, 1971, practices practical nursing as defined in this chapter, unless duly licensed to do so under the provisions hereof; or uses in connection with his or her name any designation implying or tending to imply that he or she is a licensed professional nurse and licensed to practice as a registered nurse, or a practical nurse licensed to practice practical nursing as a licensed practical nurse, unless duly licensed to practice under the provisions of this chapter; or after January 1, 1968, practices professional nursing or, after January 1, 1971, practices practical nursing during the time his or her license issued under the provisions of this chapter shall be suspended, revoked, or has expired; or conducts a nursing education program for the preparation of professional or practical nurses, purporting eligibility of its graduates for license hereunder, unless the program has been approved by the board; or knowingly conceals information relating to violations of this chapter; or otherwise violates any of the provisions of this chapter, shall be guilty of a Class A misdemeanor and upon conviction, shall be punished in accordance with the laws of the State of Alabama.

(Acts 1965, No. 867, p. 1615, §13; Acts 1983, No. 83-642, p. 989, §4.)

Section 34-21-8 Payment of License And Fees By Personal Check.

Notwithstanding any other provision of law, the Board of Nursing may accept personal checks from licensees for the payment of license and other fees required by the board. The board may also promulgate the necessary rules and regulations to penalize any licensee who issues a worthless check to the board.

(Act 2001-239, p. 281, §5.)

Article 2 Licenses.

Section 34-21-20 Required Generally.

In order to safeguard life and health, any person practicing or offering to practice professional nursing or practical nursing in this state, for compensation, shall hereafter be required to submit evidence that he or she is qualified so to practice and shall be licensed as hereinafter provided. After January 1, 1968, it shall be unlawful for any person not licensed under the provisions hereof to practice or offer to practice professional nursing, for compensation, in this state. After January 1, 1971, it shall be unlawful for any person not licensed under the provisions hereof to practice or offer to practice practical nursing, for compensation, in this state. It shall be unlawful for any person employed for compensation and not licensed under the provisions hereof to use any sign, card, or device to indicate that such person is a professional registered nurse or a licensed practical nurse.

(Acts 1965, No. 867, p. 1615, §1.)

Section 34-21-20.1 Submission and Use of Fingerprints for Criminal History Background Check; Costs; Confidentiality.

(a) Each applicant for a multistate license as a registered nurse or licensed practical nurse, and each applicant for initial licensure by endorsement as a registered nurse or licensed practical nurse, shall submit a full set of fingerprints to the board for the purpose of obtaining a state and national criminal history background check.

(b) Fingerprints obtained pursuant to subsection (a) may be exchanged by the board, the Alabama State Law Enforcement Agency or any successor entity thereof, or any channeler approved by the board, with the Federal Bureau of Investigation for the purpose of obtaining a state and national criminal history background check.

(c) The applicant or licensee shall be responsible for all costs associated with the submission of his or her fingerprints and obtaining a state and national criminal history background check. The board may incorporate those costs into the cost of licensure or may charge the applicant or licensee a separate fee, which may be payable to the board, the Alabama State Law Enforcement Agency or any successor entity thereof, or the approved channeler, as appropriate.

(d) Information received by the board pursuant to a state and national criminal history background check shall be confidential and shall not be a public record, except that any information received by and relied upon by the board in denying the issuance of a license or revoking, suspending, or disciplining a license or licensee may be disclosed as necessary to support the denial or revocation, suspension, or other disciplinary action.

(Act 2019-102, §2.)

Section 34-21-21 License to Practice Professional Nursing; Use of Title "Registered Nurse."

(a) An applicant for a license to practice professional nursing as a registered nurse shall submit to the board written evidence of qualification, verified by oath, that such applicant is of good moral character, holds a diploma from an accredited high school or, in the opinion of the board, the equivalent thereof, has successfully completed an educational program in a school of nursing approved by the board, and is a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government.

(b) A license to practice professional nursing as a registered nurse may be obtained in the following manners:

(1) BY EXAMINATION. The applicant shall be required to pass an examination on such subjects as the board may determine; and, upon successfully passing such examination, the board shall issue such applicant a license.

(2) BY ENDORSEMENT. The board may issue a license to practice professional nursing as a registered nurse to an applicant who has been duly licensed as a registered nurse under the laws of another state, territory, or foreign country, if, in the opinion of the board, such applicant meets the qualifications required of registered nurses in this state at the time of his or her graduation. There shall be no license to practice professional nursing granted by the previously known waiver method.

(3) BY TEMPORARY PERMIT. The board may issue temporary permits to practice professional nursing to graduates of approved schools of nursing pending completion of licensing procedures; to qualified applicants pending licensure procedures under subdivision (2); and to those nurses licensed by other states who will practice in this state for a period of one year or less, subject to the discretion of the board.

(c) Any person who holds a license to practice professional nursing as a registered nurse in this state shall have the right to use the title "registered nurse" and the abbreviation "R.N." No other person shall assume or use such title or abbreviation or other words, letters, signs, or devices to indicate that the person using the same is licensed to practice professional nursing as a registered nurse.

(d) Any person holding a license or certificate of original registration to practice nursing as a registered nurse, issued by the Alabama Board of Nurses' Examiners and Registration and which was valid on December 31, 1965, shall be eligible for licensing to practice professional nursing as a registered nurse under this chapter.

(e) An applicant for a license to practice professional nursing in Alabama may apply for either a single state license or a multistate license.

(Acts 1965, No. 867, p. 1615, §15; Acts 1975, No. 427, p. 1024, §1; Act 2009-15, p. 29, §3; Act 2019-102, §1.)

Section 34-21-22 License to Practice Practical Nursing; Use of Title "Licensed Practical Nurse."

(a) An applicant for a license to practice practical nursing as a licensed practical nurse shall submit to the board written evidence of qualification, verified by oath, that the applicant is of good moral character, is a high school graduate and holds a diploma from an accredited high school, or in the opinion of the board, the equivalent thereof, has successfully completed an educational program of at least one year's duration in a school of practical nursing, approved by the board, and is a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government.

(b) A license to practice as a licensed practical nurse may be obtained in the following manners:

(1) BY EXAMINATION. The applicant shall be required to pass an examination on such subjects as the board may determine; and, upon successfully passing such examination, the board shall issue such applicant a license.

(2) BY ENDORSEMENT. The board may issue a license to practice practical nursing as a licensed practical nurse to an applicant who has been duly licensed as a licensed practical nurse (irrespective of the title or designation granted when such license was issued) under the laws of another state, territory, or foreign country, if, in the opinion of the board, such applicant meets the requirements for licensed practical nurses in this state at the time of his or her graduation. There shall be no license to practice practical nursing granted by the previously known waiver method.

(3) BY TEMPORARY PERMIT. The board may issue a temporary permit to practice practical nursing as a licensed practical nurse to graduates of approved schools of practical nursing pending the completion of licensing procedures in Alabama and to qualified applicants pending licensing procedures under subdivision (2).

(c) Any person who holds a license to practice practical nursing as a licensed practical nurse in this state shall have the right to use the title "licensed practical nurse" and the abbreviation "L.P.N." No other person shall assume or use such title or abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is licensed to practice practical nursing as a licensed practical nurse.

(d) Any person holding a license or certificate of original registration to practice practical nursing as a licensed practical nurse, issued by the Alabama Board of Nurses' Examiners and Registration and issued by the board and which was valid on December 31, 1965, shall hereafter be eligible for licensing to practice practical nursing as a licensed practical nurse under the provisions of this chapter.

(e) An applicant for a license to practice practical nursing in Alabama may apply for either a single state license or a multistate license.

(Acts 1965, No. 867, p. 1615, §6; Acts 1975, No. 427, p. 1024, §1; Acts 1983, No. 83-642, p. 989, §5; Act 2009-15, p. 29, §3; Act 2019-102, §1.)

Section 34-21-23 Renewal of License; Continuing Education.

(a) The license of every professional nurse licensed under the provisions of this chapter shall be renewed biennially, and the term of the license shall be two years. Applicants for renewal shall apply for and complete the renewal application and forward same to the board, along with the renewal fee, during the renewal period that shall from time to time be specified by the board. The board shall examine and verify the accuracy of the application and, if in order, shall issue a renewal receipt for a license period of two years.

(b) The license of every practical nurse licensed as a licensed practical nurse under the provisions of the chapter shall be renewed biennially, and the term of the license shall be two years. Applicants for renewal shall apply for and complete the renewal application and forward same to the board, along with the renewal fee, during the renewal period that shall from time to time be specified by the board. The board shall examine and verify the accuracy of the application and, if in order, shall issue a renewal receipt for a license period of two years.

(c) Any person practicing nursing who allows his or her license to lapse by failing to renew, as hereinafter provided, may be reinstated and licensed by the board upon satisfactory explanation of such failure and upon payment of the required fees. The board is hereby authorized under its rule-making powers to provide for an inactive license status for licensees under this chapter and to collect such fees as the board determines for such inactive license.

(d) It shall be unlawful for any person to practice professional nursing in this state during the time his or her license to practice has lapsed, and such person shall be subject to the penalties of this chapter. It shall be unlawful for any person to practice practical nursing in this state during the time his or her license so to practice has lapsed, and such person shall be subject to the penalties of this chapter.

(e) A nurse not actively practicing professional nursing in Alabama, or not actively practicing practical nursing in Alabama, shall not be required to renew his or her license; but such person shall, prior to resuming the practice of professional nursing, or the practice of practical nursing, submit evidence of continued competence satisfactory to the board and secure a renewal license before reengaging in the active practice of professional nursing or in the active practice of practical nursing, as the case may be.

(f) The board shall adopt a continuing education program by October 1, 1991. After that date, successful completion of the continuing education requirements shall be a requisite for license renewal.

(g) Provided, however, under the provisions of this section, continuing education shall not result in a passing or failing grade.

(Acts 1965, No. 867, p. 1615, §7; Acts 1975, No. 427, p. 1024, §1; Acts 1983, No. 83-642, p. 989, §6; Acts 1989, No. 89-243, p. 349, §§3, 4.)

Section 34-21-24 Fees and Charges.

The board shall set the fees and charges annually for the services under this chapter.

(Acts 1965, No. 867, p. 1615, §8; Acts 1975, No. 427, p. 1024, §1; Acts 1983, No. 83-642, p. 989, §7.)

Section 34-21-25 Denial, Suspension, or Revocation of License; Administrative Fines; Voluntary Disciplinary Alternative Program.

Amended By Act 2024-249, Effective October 1, 2024. See Version Labeled Pending.

(a) For disciplinary purposes, the board may adopt, levy, and collect administrative fines not to exceed one thousand dollars (\$1,000) per violation and may institute any legal proceedings necessary to effect compliance with this chapter against its licensees.

(b)(1) The board may also deny, revoke, or suspend any license issued by it or otherwise discipline a licensee, or holder of a multistate privilege to practice in Alabama, upon proof of any of the following regarding the licensee:

a. Is guilty of fraud or deceit in procuring or attempting to procure a license.

b. Has been convicted of a felony.

c. Is guilty of a crime involving moral turpitude or of gross immorality that would tend to bring reproach upon the nursing profession.

d. Is unfit or incompetent due to the use of alcohol, or is addicted to the use of habit-forming drugs to such an extent as to render him or her unsafe or unreliable as a licensee.

e. Is unable to practice nursing with reasonable skill and safety to patients by reason of illness, inebriation, excessive use of drugs, narcotics, alcohol, chemicals, or any other substance, or as a result of any mental or physical condition.

f. Has been convicted of any violation of a federal or state law relating to controlled substances.

g. Is guilty of unprofessional conduct of a character likely to deceive, defraud, or injure the public in matters pertaining to health.

h. Has willfully or repeatedly violated this article, as defined by board rules.

i. Has been sentenced to a period of continuous incarceration serving a penal sentence for the commission of a misdemeanor or felony. The disciplinary action shall remain in effect until the board acts upon the application of the licensee for reinstatement of the license.

(2) The board may refrain from or delay taking disciplinary action under this subsection if a licensee can be voluntarily treated or rehabilitated pursuant to subsection (j).

(c) Whenever a written complaint is made to the board that a person has committed any of the acts or has come within any of the provisions enumerated in subsection (b), the board shall investigate the complaint and may bring an action in its own name to hear and determine the complaint. The hearing shall be held in Montgomery. The person whose qualification is under consideration shall have not less than 20 days' written notice of the time and place of the initial hearing, and the notice shall be accompanied by a copy of the complaint. The notice may be served upon the accused person by any sheriff of the State of Alabama. If the accused person is out of the state, evades service, or cannot be served in person, then service may be made by mailing, by registered or certified mail, the notice and a copy of the complaint to the accused person at his or her last known post-office address in this state, and the return shall show that service has been made in this manner.

(d) At the hearing, the complainant, the person whose qualification is under consideration, and any other person permitted by the board, may introduce all oral or written testimony, or both, as the board deems relevant to the issues involved, and may be heard in person or by counsel, or both. The board may permit the complaint to be amended, but no amendment shall be permitted which is not germane to the charge or charges sought to be amended or which materially alters the nature of any offense charged. The board may determine all questions as to the sufficiency of the complaint, procedure, and admissibility and weight of evidence. If the person whose qualification is under consideration is absent, the hearing may proceed in his or her absence.

- (e) Any accused person, complainant, or other party and the board may subpoena witnesses or pertinent records for the hearing, and those subpoenas may be served by any sheriff of the State of Alabama. Witnesses may be sworn by the president of the board or by the person discharging the duties of the president. Witnesses testifying at a hearing shall upon discharge as a witness be paid by the party requesting the subpoena an amount not to exceed the per diem expense allowed to Alabama state employees for in-state travel and the actual cost of transportation to and from the place of the hearing, not to exceed the mileage rate allowed to Alabama state employees for in-state travel.
- (f) Evidence may also be taken by deposition, and the law and practice as to depositions in circuit courts shall be followed in all reasonable respects.
- (g) If the accused person is found guilty of the charges, the board may refuse to issue a license, may revoke or suspend a license, or may otherwise discipline a licensee. A revoked license may be considered for reinstatement after one year in accordance with board rules.
- (h) Any person whose license is ordered suspended or revoked may appeal to the circuit court or a court of like jurisdiction of Montgomery County, from any order of the board under this section, within 30 days from date of the decision of the board. The trial of appeals shall be conducted in like manner, as nearly as may be, as provided for in the Alabama Administrative Procedure Act.
- (i) Any organization, registered nurse, licensed practical nurse, or other person who in good faith reports information to the board alleging that any person licensed or applying for a license to practice nursing may be guilty of the acts, offenses, or conditions set out in Section 34-21-7 or subsection (b), shall not be liable to any person for any statement or opinion made in that report.
- (j) Not later than October 1, 1994, the board shall establish a voluntary Disciplinary Alternative Program to promote early identification, intervention, treatment, and rehabilitation of any licensed nurse whose competence is found to be impaired or compromised because of the use or abuse of drugs, alcohol, controlled substances, chemicals, or other substances or as a result of a physical or mental condition rendering the person unable to meet the standards of the nursing profession. The intent of the program is to provide a voluntary alternative to traditional disciplinary actions.
- (1) When a registered nurse or licensed practical nurse voluntarily seeks treatment for use or abuse of drugs, controlled substances, alcohol, chemicals, or other substances, or has a physical or mental condition that would render the individual unable to meet the standards of the nursing profession, the board may refrain from taking disciplinary action under subsection (b) if it determines that the licensee can be treated or rehabilitated effectively and that there is no danger to the public. Upon voluntarily seeking treatment, the licensee is subject to the requirements of the Disciplinary Alternative Program established by the board.
- (2) The board may establish, develop, adopt, and revise rules, and may adjust the license renewal fee as necessary to implement this subsection.
- (3) The board may appoint an Advisory Council for the Disciplinary Alternative Program pursuant to Section 34-21-3.
- (4) The board may contract with specially qualified persons or corporations, or both, to assist it in administering the Disciplinary Alternative Program.
- (5) The board shall establish by rule criteria for eligibility to participate in the Disciplinary Alternative Program and requirements for successful participation in and completion of the program.

(6) Subject to Section 34-21-125, all records of a licensee who successfully completes the Disciplinary Alternative Program shall be confidential, not subject to public disclosure, and not available for court subpoena or for discovery proceedings. The records of a licensee who fails to comply with the program agreement or who leaves the state prior to the successful completion of the program are not confidential. Information regarding the participation of a licensee in the Disciplinary Alternative Program reported to the coordinated licensure information system pursuant to Section 34-21-125 shall be made available solely to other state boards of nursing and shall not be disclosed to the public by the coordinated licensure information system. Upon successful completion of the Disciplinary Alternative Program, all information regarding participation of the licensee in the Disciplinary Alternative Program shall be expunged from the coordinated licensure information system.

(7) Nonpublic or confidential data submitted to the coordinated licensure information system by the board may not be distributed to any nonparty state, organization, person, or entity, or any foreign government or an agent, entity, or representative of a foreign government, without the express written approval of the board.

(8) On request and payment of a certified verification fee, the board shall provide a registered nurse or licensed practical nurse licensed by this state with a copy of any information regarding the nurse maintained by the coordinated licensure information system under Article 7.

(9) The board is not obligated to provide information that is not otherwise available to the board or information that is not available to the nurse under the laws of the state contributing the information to the coordinated licensure information system or that has been designated as available only to other boards of nursing by the state contributing the information to the coordinated licensure information system.

(10) Nothing in this subsection shall limit the authority of the board to discipline an impaired individual subject to its jurisdiction.

(k) The board may adopt rules imposing a nondisciplinary administrative penalty for designated violations of this chapter.

(Acts 1965, No. 867, p. 1615, §11; Acts 1983, No. 83-642, p. 989, §8; Acts 1989, No. 89-243, p. 349, §3; Acts 1993, No. 93-183, p. 272, §3; Act 2009-15, p. 29, §3; Act 2019-102, §1.)

Section 34-21-26 Practice of Nursing By Unlicensed Persons Declared Public Nuisance; Injunctive Relief.

After January 1, 1968, the practice of professional nursing by any person who has not been issued a license under the provisions of this article, or whose license has been suspended, revoked, or has expired, is hereby declared to be inimical to the public welfare and to constitute a public nuisance. After January 1, 1971, the practice of practical nursing by any person who has not been issued a license under the provisions of this article, or whose license has been suspended, revoked, or has expired, is hereby declared to be inimical to the public welfare and declared to be a public nuisance. After January 1, 1968, the Board of Nursing of the State of Alabama may apply to any court of competent jurisdiction for an injunction to enjoin any person from practicing professional nursing, who has not been issued a license to practice professional nursing or whose license therefor has been suspended or revoked or has expired, and after January 1, 1971, the Board of Nursing of the State of Alabama may apply to any court of competent jurisdiction for an injunction to enjoin any person from practicing practical nursing who has not been issued a license to practice practical nursing or whose license therefor has been suspended or revoked or has expired.

Injunctions under this section shall be applied for in accordance with the civil remedies and procedures of the State of Alabama under Article 10 of Chapter 6 of Title 6 of this code and under the Alabama Rules of Civil Procedure.

Applications for injunctions hereunder shall be in addition to and not in lieu of all penalties and other remedies provided for in this chapter.

(Acts 1965, No. 867, p. 1615, §14.)

Article 3 Continuing Education.

Section 34-21-40 Duty of Board of Nursing To Provide Programs, Seminars, and Workshops.

To meet the health care needs of the citizens of Alabama and to cope with the rapidly changing methods of health care delivery, the Alabama Board of Nursing is authorized and directed to provide quality continuing education programs, seminars, and workshops to acquaint and educate nurses in the most current and modern nursing procedures. These continuing education programs in nursing shall be designed to insure that nurses will be educated in the latest technics of health care delivery.

(Acts 1976, No. 749, p. 1030, §1; Acts 1977, No. 758, p. 1298, §1.)

Section 34-21-41 Grants, Contracts, Etc., With Individuals, Institutions, and Agencies.

The Alabama Board of Nursing is authorized and directed to develop continuing education programs designed to meet the criteria outlined in Section 34-21-40. The Alabama Board of Nursing is authorized to make grants, contracts, appropriations, and to otherwise arrange with qualified individuals, institutions, or agencies to develop and implement comprehensive nursing education programs, seminars, and workshops that will insure the promotion, dissemination, and availability of modern nursing and health care technics to the citizens of Alabama.

(Acts 1976, No. 749, p. 1030, §2; Acts 1977, No. 758, p. 1298, §2.)

Section 34-21-42 Plans, Programs, and Criteria.

The Board of Nursing is hereby authorized and directed to establish plans, programs, and criteria sufficient to carry out continuing education programs for nurses outlined in Sections 34-21-40 and 34-21-41.

(Acts 1976, No. 749, p. 1030, §3; Acts 1977, No. 758, p. 1298, §3.)

Section 34-21-43 Source of Funds.

All expenses in developing and conducting educational programs, seminars, and workshops under this article shall be paid from funds of the Board of Nursing. No expenses shall be borne by the State of Alabama from the General Fund of the state.

(Acts 1976, No. 749, p. 1030, §4; Acts 1977, No. 758, p. 1298, §4.)

Article 4 Post-Baccalaureate Scholarships.

Section 34-21-60 Established; Number.

There shall be established for the fiscal year ending September 30, 2012, scholarships for graduate education of nurses. These scholarships shall be awarded to applicants from the State of Alabama at large. They shall be distributed, insofar as practicable, throughout the state. The number of scholarships shall equal five percent of the total enrollment in graduate nursing programs in Alabama. Each scholarship is limited to ten thousand dollars (\$10,000).

(Acts 1977, 1st Ex. Sess., No. 68, p. 1491, §1; Act 2012-262, p. 507, §1.)

Section 34-21-61 Qualifications of Applicants; Applications; Administration.

(a) To be eligible to receive a scholarship provided by this article, an applicant shall satisfy all of the following requirements:

(1) Be a resident of the State of Alabama for a period of at least one year immediately preceding the time of making application.

(2) Be a person of good character.

(3) Have an active, unencumbered license as a professional nurse in Alabama.

(4) Be accepted for an Alabama graduate program conducted by an accredited college or university.

(5) Agree to practice professional nursing or become a nursing instructor in the State of Alabama for at least two years after completing the graduate degree.

(b) The recipient of these scholarships may apply to the Board of Nursing for a waiver from these requirements for extenuating circumstances beyond the control of the recipient.

(c) Preference shall be given to applicants pursuing a career in nursing education.

(d) These scholarships shall be available to applicants seeking master's or doctorate degrees in nursing. Doctorate degrees in education are also acceptable provided the applicant holds a graduate degree in nursing.

(e) Application for these scholarships shall be made to the Alabama Board of Nursing. The Board of Nursing shall receive five percent of the total appropriation to administer the scholarships.

(Acts 1977, 1st Ex. Sess., No. 68, p. 1491, §2; Act 2012-262, p. 507, §1.)

Section 34-21-62 Amount of Scholarships; Criteria for Selection of Recipients; Renewal of Scholarships; Failure to Complete Course or Service as a Nurse.

Each scholarship provided for by this article shall not exceed ten thousand dollars (\$10,000) per year, payable from funds appropriated to the Alabama Board of Nursing for this purpose. Contingent upon subsequent legislative funding of this program, a scholarship may either be renewed by the Alabama Board of Nursing for the same student or awarded to another applicant for the scholarship. Criteria for the selection of recipients and awarding of the scholarships shall be established by the Alabama Board of Nursing. These criteria shall be used as guides in the selection of the scholarship recipients from the various geographical areas of the state. In case a scholarship student fails to complete the course prescribed for a graduate degree in nursing, that student shall repay the amount of any scholarship funds received hereunder to the State Treasury. In the event of the scholarship recipient's death, the obligation for funds disbursed and not repaid shall be cancelled. In the event the scholarship recipient becomes mentally or physically impaired and is unable to complete a graduate course in nursing, or has received a graduate degree but is unable to complete one year of service as a nurse due to such disability, the obligation for funds disbursed and not repaid shall be cancelled.

(Acts 1977, 1st Ex. Sess., No. 68, p. 1491, §3; Act 2012-262, p. 507, §1.)

Section 34-21-63 Appropriations.

Any appropriation made to fund the scholarships may be made through the Education Trust Fund to the Alabama Board of Nursing for each fiscal year.

(Acts 1977, 1st Ex. Sess., No. 68, p. 1491, §4; Act 2012-262, p. 507, §1.)

Article 5 Advanced Practice Nursing.

Section 34-21-80 Declaration of Legislature.

The Legislature of the State of Alabama declares that the recognition and regulation of all areas of advanced practice nursing and the collaborative practices between licensed physicians and certified registered nurse practitioners and certified nurse midwives are essential to protect and maintain the public health and safety.

(Acts 1995, No. 95-263, p. 464, §1.)

Section 34-21-81 Definitions.

As used in this article, the following terms shall have the following meanings:

(1) **ADVANCED PRACTICE NURSE.** A registered nurse who has gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles and has been certified by the Board of Nursing to engage in the practice of advanced practice nursing. There shall be four categories of advanced practice nurses: Certified registered nurse practitioners (CRNP), certified nurse midwives (CNM), certified registered nurse anesthetists (CRNA), and clinical nurse specialists (CNS). Certified registered nurse practitioners and certified nurse midwives are subject to collaborative practice agreements with an Alabama physician. Certified registered nurse anesthetists and clinical nurse specialists are not subject to collaborative practice agreements with an Alabama physician and are not subject to the requirements of Sections 34-21-82, 34-21-83, and 34-21-85 to 34-21-92, inclusive, and are prohibited from engaging in any of the acts or functions of a certified registered nurse practitioner (CRNP) or a certified nurse midwife (CNM) as established by this article and rules adopted under this article.

(2) **ADVANCED PRACTICE NURSING.** The delivery of health care services by registered nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles as certified registered nurse practitioners, certified nurse midwives, certified nurse anesthetists, and clinical nurse specialists:

a. Practice as a certified registered nurse practitioner (CRNP) means the performance of nursing skills by a registered nurse who has demonstrated by certification that he or she has advanced knowledge and skills in the delivery of nursing services within a health care system that provides for consultation, collaborative management, or referral as indicated by the health status of the client.

b. Practice as a certified nurse midwife (CNM) means the performance of nursing skills by a registered nurse who has demonstrated by certification that he or she has advanced knowledge and skills relative to the management of women's health care focusing on pregnancy, childbirth, the postpartum period, care of the newborn, family planning, and gynecological needs of women, within a health care system that provides for consultation, collaborative management, or referral as indicated by the health status of the client.

c. Practice as a certified registered nurse anesthetist (CRNA) means the performance of or the assistance in any act involving the determination, preparation, administration, procedural ordering, or monitoring of any drug used to render an individual insensible to pain for surgical and other therapeutic or diagnostic procedures. The nurse anesthetist is qualified in accordance with Section 27-46-3 and is licensed by the Board of Nursing and functions under the direction of or in coordination with a physician licensed to practice medicine, a podiatrist, or a dentist, who is immediately available. Nothing in this paragraph shall be construed to restrict the authority of a health care facility to adopt policies relating to the provision of anesthesia and analgesia services.

d. Practice of clinical nurse specialist (CNS) nursing means the performance of nursing skills by a registered nurse who, through study and supervised practice at the graduate level and as evidenced by certification, has advanced knowledge and practice skills in a specialized area of practice, except that a clinical nurse specialist may not do any of the following:

1. Perform delegated medical acts or engage in collaborative practice as described in this article.

2. Perform any of the functions of a certified registered nurse practitioner or a certified nurse midwife as described in this article and the rules adopted under this article, whether or not performed within a collaborative practice relationship.

3. Prescribe drugs of any type. A clinical nurse specialist may perform nursing services permitted under this subdivision as an independent contractor.

(3) **BOARD OF MEDICAL EXAMINERS.** The State Board of Medical Examiners established pursuant to Section 34-24-53.

(4) **BOARD OF NURSING.** The Board of Nursing established under Section 34-21-2.

(5) **COLLABORATION.** A formal relationship between one or more certified registered nurse practitioners and certified nurse midwives and a physician or physicians under which these nurses may engage in advanced practice nursing as evidenced by written protocols approved in accordance with the requirements of this article or exempted in accordance with requirements of this article. The term collaboration does not require direct, on-site supervision of the activities of a certified registered nurse practitioner or a certified nurse midwife by the collaborating physician. The term does require such professional oversight and direction as may be required by the rules of the State Board of Medical Examiners and the Board of Nursing.

(6) **COORDINATION WITH.** When an anesthesiologist is not physically present, the working relationship between a physician, a podiatrist, or a dentist and a certified registered nurse anesthetist licensed to practice in this state. Each contributes his or her respective expertise in the provision of patient care, which includes the discussion of patient treatment, diagnosis, and consultation.

(7) **JOINT COMMITTEE OF THE STATE BOARD OF MEDICAL EXAMINERS AND THE BOARD OF NURSING FOR ADVANCED PRACTICE NURSES.** The Joint Committee of the State Board of Medical Examiners and the Board of Nursing for Advanced Practice Nurses shall mean and shall be a committee composed of all of the following:

a. Two physicians licensed to practice medicine in the State of Alabama.

b. One registered nurse licensed to practice professional nursing in the State of Alabama.

c. One licensed physician engaged in a collaborative practice with a certified registered nurse practitioner or a certified nurse midwife in the State of Alabama.

d. One certified registered nurse practitioner engaged in advanced practice with a physician in the State of Alabama.

e. One certified nurse midwife engaged in advanced practice with a physician in the State of Alabama.

(8) **LEGEND DRUG.** Any drug, medicine, chemical, or poison bearing on the label the words, "Caution, Federal Law prohibits dispensing without prescription" or similar words indicating that the drug, medicine, chemical, or poison may be sold or dispensed only upon the prescription of a licensed practitioner, except that the term legend drug shall not include any drug, substance, or compound which is listed in Schedules I through V of the Alabama Uniform Controlled Substances Act.

(9) **PHYSICIAN or COLLABORATING PHYSICIAN.** A doctor of medicine or a doctor of osteopathy licensed to practice medicine in Alabama who agrees in writing to practice in collaboration with one or more certified registered nurse practitioners or certified nurse midwives in accordance with the rules adopted by the State Board of Medical Examiners and the Board of Nursing.

(10) **PRESCRIBE or PRESCRIBING.** The act of issuing a written prescription for a legend drug.

(11) **PRESCRIPTION.** An order for a legend drug which is written and signed by a practitioner authorized by law to prescribe and administer such drugs and which is intended to be filled, compounded, or dispensed by a pharmacist.

(12) **PROCEDURAL ORDERING.** The ordering of the anesthesia plan, including the ordering of medications and tests before, during, or after analgesia or anesthesia in accordance with the anesthesia plan.

(13) **PROTOCOL.** A document approved in accordance with Section 34-21-87 establishing the permissible functions and activities to be performed by certified registered nurse practitioners and certified nurse midwives and signed by collaborating physicians and any nurse practitioners or nurse midwives practicing with those physicians.

(Acts 1995, No. 95-263, p. 464, §2; Act 2001-239, p. 281, §3; Act 2022-379, §1.)

Section 34-21-82 Joint Committee - Appointment, Terms of Office, Office of Chairperson, and Meetings.

(a)(1) The physician members of the joint committee shall be appointed by the State Board of Medical Examiners and shall serve three-year terms as set out below.

(2) The registered nurse members of the joint committee shall be appointed by the Board of Nursing and shall serve three-year terms as set out below.

(b)(1) In order to stagger the terms of office, the Board of Nursing and the State Board of Medical Examiners will each appoint to the initial joint committee one member for a term of one year, one member for a term of two years, and one member for a term of three years. Should a vacancy occur on the committee, a successor will be appointed to serve the unexpired term. The committee shall select one of its members to serve as chairperson for a one-year term.

(2) The office of chairperson shall alternate between a physician member of the committee and a nurse member of the committee.

(3) The committee shall meet annually, or more frequently if requested by the State Board of Medical Examiners or the Board of Nursing. Members of the committee shall receive per diem at a rate of \$100 per day or any portion thereof that such a committee member shall be in attendance at an official meeting or function of the committee and in addition shall receive reimbursement for subsistence and travel in accordance with state law for each day actively engaged in the duties of their offices. The State Board of Medical Examiners and the Board of Nursing shall pay per diem and expenses of the members each appoints to the joint committee and shall furnish necessary clerical and administrative support for operation of the committee.

(Acts 1995, No. 95-263, p. 464, §3.)

Section 34-21-83 State Board of Medical Examiners to Establish Qualifications for Physicians Engaged in Collaborative Practice with Advanced Practice Nurses.

The State Board of Medical Examiners shall establish the qualifications for physicians who are engaged in collaborative practice with certified registered nurse practitioners and certified nurse midwives. The board may adopt rules and regulations to accomplish the purposes of this section.

(Acts 1995, No. 95-263, p. 464, §4.)

Section 34-21-84 Board of Nursing to Establish Qualifications for Advanced Practice Nurses; Rules and Regulations Establishing Procedures for Certification.

(a) The Board of Nursing shall be the sole state authority designated to establish the qualifications necessary for a registered nurse to be certified to engage in advanced practice nursing. The Board of Nursing shall recognize the educational qualifications and training of advanced practice nurses by the issuance of a certification of qualification to engage in advanced practice nursing. To be eligible for certification, an applicant shall be currently licensed as a registered nurse in Alabama and shall meet the requirements for certification as an advanced practice nurse as defined in the rules and regulations established by the Board of Nursing.

(b) Pursuant to subsection (a), the Board of Nursing may adopt rules and regulations establishing the procedures for individuals to be certified to engage in advanced practice nursing, as well as grounds for denial or termination of certification or both, and the fees to be paid to the Board of Nursing in connection with an application for certification.

(Acts 1995, No. 95-263, p. 464, §5.)

Section 34-21-85 Joint Committee Designated to Recommend Rules and Regulations; Requirements to Engage in Advanced Practice Nursing.

The joint committee shall be the state authority designated to recommend rules and regulations to the State Board of Medical Examiners and the Board of Nursing for the purpose of regulating the collaborative practice of physicians and certified registered nurse practitioners and certified nurse midwives. No person may practice as a certified registered nurse practitioner or a certified nurse midwife in this state unless that person possesses a certificate of qualification issued by the Board of Nursing and practices under written protocols approved by the State Board of Medical Examiners and the Board of Nursing and signed by a qualified collaborating physician or physicians and certified registered nurse practitioner or certified nurse midwife or is exempt from the requirement of a written protocol according to rules promulgated by the State Board of Medical Examiners and the Board of Nursing. The joint committee shall recommend to the State Board of Medical Examiners and the Board of Nursing rules and regulations designed to govern the collaborative relationship between physicians and certified registered nurse practitioners and certified nurse midwives certified by the Board of Nursing to engage in these areas of advanced practice nursing. These rules and regulations shall be finally adopted by July 1, 1996. These rules and regulations and any and all additions, deletions, corrections, or changes thereto shall be considered rules and regulations requiring publication under the Alabama Administrative Procedure Act; however, the following shall not be considered rules or regulations under the Administrative Procedure Act:

- (1) Protocols for use by certified registered nurse practitioners and certified nurse midwives certified to engage in these two areas of advanced practice nursing in collaboration with a physician; and
- (2) The formulary of legend drugs that may be prescribed by certified registered nurse practitioners and certified nurse midwives authorized to do so.

(Acts 1995, No. 95-263, p. 464, §6.)

Section 34-21-86 Prescribing Legend Drugs; Initiating Call-In Prescriptions; Administering Legend Drugs.

(a) Certified registered nurse practitioners and certified nurse midwives, engaged in collaborative practice with physicians practicing under protocols approved in the manner prescribed by this article may prescribe legend drugs to their patients, subject to both of the following conditions:

- (1) The drug type, dosage, quantity prescribed, and number of refills shall be authorized in an approved protocol signed by the collaborating physician; and
- (2) The drug shall be on the formulary recommended by the joint committee and adopted by the State Board of Medical Examiners and the Board of Nursing.

(b) A certified registered nurse practitioner or a certified nurse midwife may not initiate a call-in prescription in the name of a collaborating physician for any drug, whether legend or controlled substance, which the nurse practitioner or certified nurse midwife is not authorized to prescribe under the protocol signed by the collaborating physician and certified registered nurse practitioner or certified nurse midwife and approved under this section unless the drug is specifically ordered for the patient by the physician, either in writing or by a verbal order which has been reduced to writing, and which has been signed by the physician within a time specified in the rules and regulations approved by the State Board of Medical Examiners and the Board of Nursing.

(c) Registered nurses and licensed practical nurses are authorized to administer any legend drug that has been lawfully ordered or prescribed by an authorized practitioner including certified registered nurse practitioners, certified nurse midwives, and/or assistants to physicians.

(Acts 1995, No. 95-263, p. 464, §7.)

Section 34-21-87 Joint Committee to Recommend Model Practice Protocols, Formulary of Legend Drugs, and Certain Rules and Regulations.

Notwithstanding any other provisions of this article, the joint committee shall recommend model practice protocols to be used by certified registered nurse practitioners and certified nurse midwives and a formulary of legend drugs that may be prescribed by these advanced practice nurses, subject to approval by both the State Board of Medical Examiners and the Board of Nursing. The joint committee shall also recommend rules and regulations to establish the ratio of physicians to certified registered nurse practitioners and certified nurse midwives; provided, however, that the rules and regulations shall not limit the ratio to less than two nurse practitioners or midwives to one physician or one certified registered nurse practitioner and one certified nurse midwife to one physician and shall provide for exceptions. The joint committee shall also recommend rules and regulations that establish the manner in which a collaborating physician may designate a covering physician when temporarily unavailable as the collaborating physician.

(Acts 1995, No. 95-263, p. 464, §8.)

Section 34-21-88 Acts Which Constitute Grounds for Termination.

The following acts shall constitute grounds for the termination by the Board of Nursing of a certified registered nurse practitioner's or a certified nurse midwife's certificate of qualification to engage in these areas of advanced practice nursing and for the termination of the approval of the State Board of Medical Examiners of the collaborating practice of a physician and certified registered nurse practitioner or a certified nurse midwife, or both:

- (1) Prescribing in violation of this article or the rules and regulations of the State Board of Medical Examiners or the Board of Nursing.
- (2) For a certified registered nurse practitioner or a certified nurse midwife to engage in any act or render any services not authorized in his or her protocol or for a physician to require or to knowingly permit or condone such an act.
- (3) Failure on the part of a certified registered nurse practitioner or a certified nurse midwife to maintain current licensure with the Board of Nursing or failure of a physician to maintain current licensure with the Medical Licensure Commission.
- (4) The commission of any act by a certified registered nurse practitioner or a certified nurse midwife which would constitute a violation of Section 34-21-25(b) or any act by a physician which would constitute a violation of Section 34-24-360.

(Acts 1995, No. 95-263, p. 464, §9.)

Section 34-21-89 Boards Permitted to Initiate Disciplinary Actions for Violations of Section; Requirements Before Action Taken.

The Board of Nursing may initiate disciplinary actions against a certified registered nurse practitioner or a certified nurse midwife for violations of Section 34-21-86. The State Board of Medical Examiners may initiate disciplinary actions against a physician for violation of Section 34-21-86. Before either board takes such disciplinary action, it shall give the licensee against whom the action is contemplated a notice of the proposed action and an opportunity for a hearing before the respective board. All hearings shall be governed by the Alabama Administrative Procedure Act.

(Acts 1995, No. 95-263, p. 464, §10.)

Section 34-21-90 Requirements for Engaging in Practice.

No person shall engage in practice as a certified registered nurse practitioner or certified nurse midwife or in any of the acts or functions described in this article and the regulations adopted under this article in this state unless that person is certified by the Board of Nursing as an advanced practice nurse in a category of certified registered nurse practitioner or certified nurse midwife and is practicing in collaboration with a physician following protocols which have been approved in accordance with this article or has been exempted from the requirement of practicing in collaboration with a physician following protocols as provided in Section 34-21-85.

(Acts 1995, No. 95-263, p. 464, §11.)

Section 34-21-91 Injunctive Proceedings by Boards Against Persons Violating Article.

Both the State Board of Medical Examiners and the Board of Nursing in addition to the powers and duties otherwise expressed in this article, may commence and maintain in their own names in any circuit court having jurisdiction of any person within this state who is unlawfully engaging in advanced practice nursing as a certified registered nurse practitioner or a certified nurse midwife action in the nature of quo warranto as provided for in Section 6-6-590, et seq., to order the person to cease and desist from continuing to engage in these areas of advanced practice nursing within the State of Alabama, and jurisdiction is conferred upon the circuit courts of this state to hear and determine all such cases. The boards may commence and maintain such actions without the filing of bond or security and without the order or direction of a circuit judge. An injunction shall be issued upon proof that the person is now engaged in advanced practice nursing as a certified registered nurse practitioner or a certified nurse midwife in violation of this article without requiring proof of actual damage sustained by any person. In any case of violation of any injunction issued under this section, the court or any judge thereof may summarily try, and punish the offender for contempt of court. Injunctive proceedings as authorized in this section shall be in addition to, and not in lieu of, all penalties and other remedies prescribed by law.

(Acts 1995, No. 95-263, p. 464, §12.)

Section 34-21-92 Waiver of Requirements Until Adoption of Rules and Regulations.

Until the State Board of Medical Examiners and the Board of Nursing adopt the rules and regulations necessary to effectuate the provisions of this article, the State Board of Medical Examiners and the Board of Nursing shall waive the requirements of Sections 34-21-84 and 34-21-85 and shall grant the appropriate certification to any nurse practitioner or nurse midwife who is currently certified or is eligible for certification to be a certified registered nurse practitioner or certified nurse midwife and will continue to engage in practice under the existing rules and regulations. Until the State Board of Medical Examiners and the Board of Nursing adopt the rules and regulations necessary to effectuate the provisions of this article, the State Board of Medical Examiners and the Board of Nursing shall waive the requirements of Sections 34-21-84 and 34-21-85 and shall grant the appropriate approval to a collaborating physician submitting a request for approval of a collaborative practice agreement. Notwithstanding the provisions of Section 15 of Acts 1995, No. 95-263, nurse practitioners and nurse midwives are prohibited from prescribing until final rules and regulations are adopted by the State Board of Medical Examiners and the Board of Nursing in accordance with Section 34-21-87.

(Acts 1995, No. 95-263, p. 464, §13.)

Section 34-21-93 Construction of Article With Sections 34-19-2 to 34-19-10.

The provisions of this article shall be applied and construed in pari materia with Sections 34-19-2 to 34-19-10. Upon final adoption of rules and regulations by the State Board of Medical Examiners and the Board of Nursing as authorized by this article, any inconsistent portions of Sections 34-19-2 to 34-19-10 are superseded.

(Acts 1995, No. 95-263, p. 464, §14.)

Section 34-21-93.1 Signature Authority for Health Care Forms, Etc.

(a) When any law or rule requires a signature, certification, stamp, verification, affidavit, or endorsement by a physician, the document shall be deemed to authorize a signature, certification, stamp, verification, affidavit, or endorsement by a certified registered nurse practitioner or certified nurse midwife for the items listed in this section. The authority in this section for a certified registered nurse practitioner and a certified nurse midwife shall be subject to an active collaboration agreement. This section applies to all of the following:

(1) Certification of disability for patients to receive special access parking or disability access parking tags or placards.

(2) A signature required for any of the following:

a. The following documents that require a complete history and physical examination consistent with the examining provider's scope of practice and certification:

1. Physicals for bus drivers in this state using State of Alabama forms.

2. Physicals to verify eligibility for students to participate in the Special Olympics.

3. Employment and pre-employment physicals for Transportation Security Agency (TSA) employees at an airport or for governmental employees such as firefighters and law enforcement officers.

4. Adoptive parent applications.

5. College or trade school physicals.

6. Boy Scout or Girl Scout physicals or physical required by similar organizations.

b. Forms excusing a potential jury member due to an illness.

c. Forms relating to absenteeism for employment or school purposes, including, but not limited to, documents associated with the federal Family and Medical Leave Act.

d. Authorizations for durable medical equipment.

e. Authorizations for diabetic testing supplies.

f. Authorization for diabetic shoes.

g. Home health recertification orders after initial certification.

h. Within the state Medicaid system, any and all forms for the ordering of medications, nutritional supplements, or infant formulas, or referrals to providers of medical specialties, home health services, and physical or occupation therapy.

i. Death certificates.

j. Forms, including physical examination forms, needed for certifications in residential or inpatient dwellings within the Department of Mental Health.

k. Forms for ambulance transport.

l. Forms for donor breast milk.

m. Required documentation allowing a diabetic to renew or obtain a driver's license.

(b) Additional forms may be approved by rule under the Alabama Administrative Procedure Act by the State Board of Medical Examiners, after consulting with the state professional society of nurse practitioners, the state professional society of nurse midwives, the state professional society of physicians, or the Joint Committee of the State Board of Medical Examiners and the Board of Nursing for Advanced Practice Nurses as established by Section 34-21-81, whichever is appropriate.

(c) This section shall not be construed to expand the scope of practice for any certified registered nurse practitioner or certified nurse midwife.

(d) This section does not expand the scope of a collaborative physician's responsibility with regard to nurse practitioners or nurse midwives under the laws of this state.

(Act 2018-474, §1.)

Article 6 Loan Repayment Program for Advanced Practice Nursing.

Section 34-21-94 Loan Repayment Program Established.

There is hereby created and established the Alabama Loan-Repayment Program for Advanced-Practice Nursing. The program shall be administered by the Alabama Board of Nursing. The Loan Repayment Program shall be funded by direct appropriation from the Education Trust Fund.

(Act 2016-353, §1.)

Section 34-21-95 Definitions.

As used in this article, the following terms shall have the following meanings, respectively, unless the context clearly indicates otherwise:

(1) AREA OF CRITICAL NEED. An area with a critical need for more advanced-practice nurses, as determined by the board.

(2) BOARD. The Alabama Board of Nursing.

(3) PARTICIPANT. Any person who applies for and is awarded a loan as provided in this article.

(4) PROGRAM. The Alabama Loan-Repayment Program for Advanced-Practice Nursing.

(Act 2016-353, §1.)

Section 34-21-96 Awarding of Loans and Terms of Repayment.

(a)(1) The board shall establish and award loans to provide for the training of qualified applicants for admission to or students in accredited nursing education programs approved by the board who are pursuing, or have completed within the five years immediately preceding the current loan term, a graduate degree to become a certified registered nurse practitioner (CRNP), a certified nurse midwife (CNM), or a certified registered nurse anesthetist (CRNA), but only for individuals who have signed contracts as provided in subsection (b). The board may permit eligible individuals to apply for a loan under the Alabama Loan-Repayment Program for Advanced-Practice Nursing in any scholastic year and for any previously completed scholastic year.

(2) The board may award to an eligible individual, for as many as three years for an individual pursuing or holding an eligible master's degree and as many as four years for a person pursuing or holding an eligible doctorate degree, an annual loan. For the first year of operation of the program, the maximum annual loan limit shall not exceed fifteen thousand dollars (\$15,000). For subsequent years, the board may increase the maximum annual loan amount by no more than five percent annually.

(3) The board shall make a careful and thorough investigation of the ability, character, and qualifications of each applicant for loans under the program, and shall award a loan or loans under the requirements of the program.

(4) An individual who has signed a contract with the board may postpone choosing an area of critical need in which to work to a time set by the board.

(b) A loan or loans under this program may be awarded only to individuals who have signed contracts with the board to repay amounts received under the program by working following graduation, or immediately in the case of a then currently approved CRNP, CNM, or CRNA, in full-time practice as a CRNA, CRNP, or CNM in an area of critical need for 18 months for each year he or she received a loan under the program.

(c) A participant, subject to approval by the board, may change the area of critical need where he or she will work to repay loans under this program, but in no case shall the applicant work in full-time practice for less than three years in the new area of critical need.

(Act 2016-353, p. 864, §1; Act 2019-301, §1; Act 2023-317, §1.)

Section 34-21-97 Areas of Critical Need.

(a) An area of critical need, as determined by the board, shall be physically located within this state and shall satisfy one of the following:

(1) Be located within a primary care health professional shortage area (HPSA) for a geographic area, recognized by the Health Resources and Services Administration, or its successor organization, or by the Alabama Office of Primary Care and Rural Health, or its successor organization.

(2) Be a Federally Qualified Health Center or designated Indian Health Service, Tribal Health, and Urban Indian Health Organization located anywhere within the state, with a primary care HPSA score of 14 or more.

(3) Be located within an eligible Alabama Rural Medical Service Awards rural community as defined most recently by the Alabama Office of Primary Care and Rural Health, or its successor organization.

(b) The board shall adopt rules under the Administrative Procedure Act to implement this section.

(Act 2016-353, p. 864, §1; Act 2023-317, §1.)

Section 34-21-98 Provisions for Default or Other Failure to Honor a Contract with the Board.

(a) In the event that the participant defaults on or otherwise fails to honor a loan repayment contract with the board for any reason, the individual shall be liable for immediate repayment of the total principal loan amount plus interest at the rate of eight percent, or the prime lending rate, whichever is greater, accruing from the date of default or other failure to honor the contract.

(b) If, for any reason, after graduation with a graduate degree to become an advanced practice nurse and prior to completion of the repayment obligation set forth in Section 34-21-96, a participant defaults on or otherwise fails to honor a loan repayment contract with the board, the participant shall pay an additional penalty equal to 20 percent of the total principal amount of all loans received by the participant.

(c) The failure of a participant to honor his or her contract with the board or to pay the amount he or she is liable for under this article shall constitute grounds for the revocation of his or her license to practice nursing.

(d) The board may excuse repayment of a loan, in whole or in part, upon the death of a participant, the participant becoming disabled to the extent that he or she is no longer able to engage in the practice of nursing, or some other extreme hardship not the fault of the participant.

(Act 2016-353, p. 864, §1; Act 2023-317, §1; Act 2024-40, §1.)

Section 34-21-99 Other Requirements and Powers of the Board.

(a) The board annually shall report on the condition and accomplishments of the program to the Governor, Lieutenant Governor, Speaker of the House, President Pro Tempore of the Senate, and the Chairs of the House and Senate Health Committees. The report shall include for the reporting year the locations where participants agreed to serve or where they were serving to repay loans.

(b) The board shall consult with the Alabama Commission on the Evaluation of Services to develop performance metrics and other measures of success to include in the annual report required pursuant to subsection (a). During the 2028 fiscal year, the program shall undergo an evaluation by the Alabama Commission on the Evaluation of Services to determine whether the program is impacting the determined measures of success.

(c) The board shall adopt reasonable rules to implement and administer the program.

(d) The board shall use any monies it receives from or for the operation of the program, including repayments, interest, and penalties paid because of default or other failure to honor a contract, to fund loans.

(Act 2016-353, p. 864, §1; Act 2023-317, §1.)

Article 7 Enhanced Nurse Licensure Compact.

Section 34-21-120 Findings; Purpose.

(a) The party states find and declare all of the following:

(1) The health and safety of the public are affected by the degree of compliance with and the effectiveness of enforcement activities related to state nurse licensure laws.

(2) Violations of nurse licensure and other laws regulating the practice of nursing may result in injury or harm to the public.

(3) The expanded mobility of nurses and the use of advanced communication technologies as part of a national health care delivery system requires greater coordination and cooperation among states in the areas of nurse licensure and regulation.

(4) New practice modalities and technology make compliance with individual state nurse licensure laws difficult and complex.

(5) Uniformity of nurse licensure requirements throughout the states promotes public safety and public health benefits.

(b) The general purpose of this compact is to achieve all of the following:

(1) Facilitate the responsibility of each state to protect public health and safety.

(2) Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation.

(3) Facilitate the exchange of information between party states in the areas of nurse regulation, investigation, and adverse actions.

(4) Promote compliance with the laws governing the practice of nursing in each jurisdiction.

(5) Invest all party states with the authority to hold a nurse accountable for satisfying all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.

(6) Decrease redundancies in the consideration and issuance of nurse licenses.

(7) Provide opportunities for interstate practice by nurses who meet uniform licensing requirements.

(Act 2019-102, §3.)

Section 34-21-121 Definitions.

For the purposes of this article, the following terms shall have the following meanings:

(1) **ADVERSE ACTION.** Any administrative, civil, equitable, or criminal action permitted by the law of a state which is imposed by a licensing board or other authority against a nurse, including actions against the license or multistate licensure privilege of an individual, including revocation, suspension, probation, monitoring of a licensee, limitations on the practice of the licensee, the bringing of a cease and desist action against the licensee, or any other encumbrance on licensure affecting the authorization of a nurse to practice.

(2) **ALTERNATIVE PROGRAM.** A nondisciplinary monitoring program approved by a licensing board.

(3) **COMMISSION.** The Interstate Commission of Nurse Licensure Compact Administrators.

(4) **COMPACT.** The Enhanced Nurse Licensure Compact created by this article.

(5) **COORDINATED LICENSURE INFORMATION SYSTEM.** An integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws that is administered by a nonprofit organization composed of and controlled by licensing boards.

(6) **CURRENT SIGNIFICANT INVESTIGATIVE INFORMATION.** Includes any of the following:

a. 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.

b. Investigative information indicating that a nurse represents an immediate threat to public health and safety, regardless of whether the nurse has been notified and has had an opportunity to respond.

(7) **ENCUMBRANCE.** A revocation or suspension of, or any limitation on, the full and unrestricted practice of nursing imposed by a licensing board.

(8) **HOME STATE.** The party state which is the primary state of residence of a nurse.

(9) **LICENSING BOARD.** The regulatory body of a party state that is responsible for issuing nurse licenses.

(10) **MULTISTATE LICENSE.** A license to practice as a registered nurse or licensed practical nurse issued by a home state licensing board that allows a licensed nurse to practice in any state authorized to grant multistate licensure privileges under the compact.

(11) **MULTISTATE LICENSURE PRIVILEGE.** A legal authorization associated with a multistate license that allows the practice of nursing as a registered nurse or licensed practical nurse in a remote state.

(12) **NURSE.** A registered nurse or licensed practical nurse as those terms are defined by the practice laws of the party state.

(13) **PARTY STATE.** Any state that has adopted this compact.

(14) **REMOTE STATE.** A party state, other than the home state.

(15) **SINGLE STATE LICENSE.** A nurse license issued by a state participating in the compact that authorizes practice only within the issuing state and does not include a multistate licensure privilege to practice in any other state.

(16) **STATE.** A state, territory, or possession of the United States and the District of Columbia.

(17) **STATE PRACTICE LAWS.** The laws, rules, and regulations of a party state that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. The term does not include requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

(Act 2019-102, §3.)

Section 34-21-122 General Provisions and Jurisdiction.

(a) A multistate license to practice registered or licensed practical nursing issued by a home state to a resident in that state shall be recognized by each party state as authorizing a nurse to practice as a registered nurse or as a licensed practical nurse, under a multistate licensure privilege, in each party state.

(b) A state shall implement procedures for considering the criminal history records of applicants for initial multistate licensure or licensure by endorsement. The procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining the criminal history record information of an applicant from the Federal Bureau of Investigation and the agency responsible for retaining the criminal records of that state.

(c) Each party state shall require an applicant to satisfy all of the following to obtain or retain a multistate license in his or her home state:

(1) Satisfies the qualifications for licensure or renewal of licensure of the home state, as well as all other applicable state laws.

(2) Satisfies either of the following:

a. Has graduated or is eligible to graduate from a licensing board-approved registered nurse or licensed practical nurse prelicensure education program.

b. Has graduated from a foreign registered nurse or licensed practical nurse prelicensure education program that (i) has been approved by the authorized accrediting body in the applicable country and (ii) has been verified by an independent credentials review agency to be comparable to a licensing board-approved prelicensure education program.

(3) Has, if a graduate of a foreign prelicensure education program not taught in English or if English is not the native language of the applicant, successfully passed an English proficiency examination that includes the components of reading, speaking, writing, and listening.

(4) Has successfully passed an NCLEX-RN or NCLEX-PN Examination, or recognized predecessor examination, as applicable.

(5) Is eligible for or holds an active, unencumbered license.

(6) Has submitted, in connection with an application for initial multistate licensure or licensure by endorsement, fingerprints, or other biometric data for the purpose of obtaining criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining the criminal records of that state.

(7) Has not been convicted or found guilty, or has entered into an agreed disposition, of a felony offense under applicable state or federal criminal law.

(8) Has not been convicted or found guilty, or has entered into an agreed disposition, of a misdemeanor offense related to the practice of nursing as determined on a case-by-case basis.

(9) Is not currently enrolled in an alternative program.

(10) Is subject to self-disclosure requirements regarding current participation in an alternative program.

(11) Has a valid United States Social Security number.

(d) A party state, in accordance with existing state due process law, may take adverse action against the multistate licensure privilege of a nurse including revocation, suspension, probation, or any other action that affects the authorization of the nurse to practice under a multistate licensure privilege, including a cease and desist action. If a party state takes adverse action, the state 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 adverse action by a remote state.

(e) A nurse practicing in a party state shall comply with the state practice laws of the state in which the client is located at the time service is provided. The practice of nursing is not limited to patient care, and shall include all nursing practice as defined by the practice laws of the party state in which the client is located. The practice of nursing in a party state under a multistate licensure privilege shall subject a nurse to the jurisdiction of the licensing board, the courts, and the laws of the party state in which the client is located at the time service is provided.

(f) Individuals not residing in a party state shall continue to be able to apply for a single state license in a party state as provided under the laws of the party state. A single state license granted to these individuals will not be recognized as granting the privilege to practice nursing in any other party state. Nothing in this compact shall affect the requirements established by a party state for the issuance of a single state license.

(g) Any nurse holding a home state multistate license, on the effective date of this compact, may retain and renew the multistate license issued by his or her then-current home state, provided that:

(1) A nurse, who changes his or her primary state of residence after the effective date of this compact, shall satisfy all applicable requirements of this section to obtain a multistate license from a new home state.

(2) A nurse who fails to satisfy the multistate licensure requirements in this section due to a disqualifying event occurring after the effective date of this compact shall be ineligible to retain or renew a multistate license, and the multistate license of that nurse shall be revoked or deactivated in accordance with applicable rules adopted by the Interstate Commission of Nurse Licensure Compact Administrators.

(Act 2019-102, §3.)

Section 34-21-123 Applications for Licensure in a Party State.

(a) Upon application for a multistate license, the licensing board in the issuing party state shall ascertain, through the coordinated licensure information system, all of the following:

(1) Whether the applicant has ever held, or is the holder of, a license issued by any other state.

(2) Whether there are any encumbrances on any license or multistate licensure privilege held by the applicant.

(3) Whether any adverse action has been taken against any license or multistate licensure privilege held by the applicant.

(4) Whether the applicant is currently participating in an alternative program.

(b) A nurse may hold a multistate license, issued by the home state, in only one party state at a time.

(c) If a nurse changes his or her primary state of residence by moving between two party states, the nurse shall apply for licensure in the new home state, and the multistate license issued by the prior home state shall be deactivated in accordance with applicable rules adopted by the commission.

(1) The nurse may apply for licensure in advance of a change in primary state of residence.

(2) A multistate license may not be issued by the new home state until the nurse provides satisfactory evidence of a change in primary state of residence to the new home state and satisfies all applicable requirements to obtain a multistate license from the new home state.

(d) If a nurse changes his or her primary state of residence by moving from a party state to a nonparty state, the multistate license issued by the prior home state shall convert to a single state license, valid only in the former home state.

(Act 2019-102, §3.)

Section 34-21-124 Additional Powers of Party State Licensing Boards.

(a) In addition to the other powers conferred by state law, a licensing board shall have the authority to do all of the following:

(1) Take adverse action against the multistate licensure privilege of a nurse to practice within that party state.

a. Only the home state shall have the power to take adverse action against the license of a nurse issued by the home state.

b. For purposes of taking adverse action, the home state licensing board 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, the home state shall apply its own state laws to determine appropriate action.

(2) Issue cease and desist orders or impose an encumbrance on the authority of a nurse to practice within that party state.

(3) Complete any pending investigations of a nurse who changes his or her primary state of residence during the course of such investigations. The licensing board may also take any appropriate actions and shall promptly report the conclusions of any investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any actions.

(4) Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses, as well as 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 in which the witnesses or evidence are located.

(5) Obtain and submit, for each applicant for a multistate license, fingerprint or other biometric-based information to the Federal Bureau of Investigation for criminal background checks, receive the results of the Federal Bureau of Investigation record search on criminal background checks, and use the results in making licensure decisions.

(6) 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.

(7) Take adverse action based on the factual findings of the remote state, provided that the licensing board follows its own procedures for taking the adverse action.

(b) If adverse action is taken by the home state against the multistate license of a nurse, the multistate licensure privilege to practice in all other party states shall be deactivated until all encumbrances have been removed from the multistate license. All home state disciplinary orders that impose adverse action against the multistate license of a nurse shall include a statement that the multistate licensure privilege of the nurse is deactivated in all party states during the pendency of the order.

(c) Nothing in this compact shall override the decision of a party state that participation in an alternative program may be used in lieu of adverse action. The home state licensing board shall deactivate the multistate licensure privilege under the multistate license of any nurse for the duration of his or her participation in an alternative program.

(Act 2019-102, §3.)

Section 34-21-125 Coordinated Licensure Information System; Exchange of Information.

(a) All party states shall participate in a coordinated licensure information system of all licensed registered nurses and licensed practical nurses. This system shall include information on the licensure and disciplinary history of each nurse, as submitted by party states, to assist in the coordination of nurse licensure and enforcement efforts.

(b) The commission, in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection, and exchange of information under this compact.

(c) All licensing boards shall promptly report to the coordinated licensure information system any adverse action, any current significant investigative information, denials of applications with the reasons for the denials, and nurse current participation in alternative programs known to the licensing board, regardless of whether the participation is deemed nonpublic or confidential under state law.

(d) Current significant investigative information and participation in nonpublic or confidential alternative programs shall be transmitted through the coordinated licensure information system only to party state licensing boards.

(e) 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 state.

(f) Any personally identifiable information obtained from the coordinated licensure information system by a party state licensing board 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.

(g) Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information shall also be expunged from the coordinated licensure information system.

(h) The compact administrator of each party state shall furnish a uniform data set to the compact administrator of all other party states, which shall include, at a minimum, all of the following:

(1) Identifying information.

(2) Licensure data.

(3) Information related to alternative program participation.

(4) Other information that may facilitate the administration of this compact, as determined by commission rules.

(i) The compact administrator of a party state shall provide all investigative documents and information requested by another party state.

(Act 2019-102, §3.)

Section 34-21-126 Interstate Commission of Nurse Licensure Compact Administrators.

(a) The party states hereby create and establish a joint public entity known as the Interstate Commission of Nurse Licensure Compact Administrators.

(1) The commission is an instrumentality of the party states.

(2) Venue is proper, and judicial proceedings by or against the commission shall be brought solely and exclusively, in a court of competent jurisdiction where the principal office of the commission is located. The commission may waive venue and jurisdictional defenses to the extent the commission adopts or consents to participate in alternative dispute resolution proceedings.

(3) Nothing in this compact shall be construed to be a waiver of sovereign immunity.

(b) Membership, voting, and meetings.

(1) Each party state shall have and be limited to one administrator. The head of the state licensing board for each party state, or his or her designee, shall be the administrator of this compact for that state. An administrator may be removed or suspended from office as provided by the law of the state from which the administrator is appointed. Any vacancy occurring in the commission shall be filled in accordance with the laws of the party state in which the vacancy exists.

(2) Each administrator shall be entitled to one vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the commission. An administrator shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for the participation of an administrator in meetings by telephone or other means of communication.

(3) The commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws or rules of the commission.

(4) All meetings of the commission shall be open to the public, and public notice of meetings shall be given in the same manner as required under the rulemaking provisions in Section 34-21-127.

(5) The commission may convene in a closed, nonpublic meeting if the commission must discuss any of the following:

a. Noncompliance of a party state with its obligations under this compact.

b. The employment, compensation, discipline, or other personnel matters, practices, or procedures related to specific employees or other matters related to the internal personnel practices and procedures of the commission.

c. Current, threatened, or reasonably anticipated litigation.

d. Negotiation of contracts for the purchase or sale of goods, services, or real estate.

e. Accusing any person of a crime or formally censuring any person.

f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential.

g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy.

h. Disclosure of investigatory records compiled for law enforcement purposes.

i. Disclosure of information related to any reports prepared by or on behalf of the commission for the purpose of investigation of compliance with this compact.

j. Matters specifically exempted from disclosure by federal or state statute.

(6) If a meeting, or portion of a meeting, is closed pursuant to this subsection, the legal counsel of the commission, or his or her designee, shall certify that the meeting may be closed and shall reference each relevant exempting provision. The commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefor, including a description of the views expressed. All documents considered in connection with an action shall be identified in the minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the administrators or order of a court of competent jurisdiction.

(c) The commission, by a majority vote of the administrators, shall prescribe bylaws or rules to govern its conduct as may be necessary or appropriate to carry out the purposes and exercise the powers of this compact including, but not limited to, all of the following:

(1) Establishing the fiscal year of the commission.

(2) Providing reasonable standards and procedures for all of the following:

a. For the establishment and meetings of other committees.

b. Governing any general or specific delegation of any authority or function of the commission.

(3) Providing reasonable procedures for calling and conducting meetings of the commission, ensuring reasonable advance notice of all meetings, and providing an opportunity for attendance of the meetings by interested parties, with enumerated exceptions designed to protect the interest of the public, the privacy of individuals, and proprietary information, including trade secrets. The commission may meet in closed session only after a majority of the administrators vote to close a meeting, in whole or in part. As soon as practicable, the commission shall make public a copy of the vote to close the meeting revealing the vote of each administrator, with no proxy votes allowed.

(4) Establishing the titles, duties, and authority and reasonable procedures for the election of the officers of the commission.

(5) Providing reasonable standards and procedures for the establishment of personnel policies and programs for the commission. Notwithstanding any civil service or other similar laws of any party state, the bylaws shall exclusively govern the personnel policies and programs of the commission.

(6) Providing a mechanism for winding up the operations of the commission and the equitable disposition of any surplus funds that may exist after the termination of this compact after the payment or reserving of all of its debts and obligations.

(d) The commission shall publish its bylaws and rules, and any amendments thereto, in a convenient form on the website of the commission.

(e) The commission shall maintain its financial records in accordance with the bylaws.

(f) The commission shall meet and take such actions as are consistent with this compact and the bylaws.

(g) The commission shall have all of the following powers:

(1) To promulgate uniform rules to facilitate and coordinate implementation and administration of this compact. The rules shall have the force and effect of law and shall be binding in all party states.

(2) To bring and prosecute legal proceedings or actions in the name of the commission, provided that the standing of any licensing board to sue or be sued under applicable law shall not be affected.

(3) To purchase and maintain insurance and bonds.

(4) To borrow, accept, or contract for services of personnel including, but not limited to, employees of a party state or nonprofit organizations.

(5) To cooperate with other organizations that administer state compacts related to the regulation of nursing including, but not limited to, sharing administrative or staff expenses, office space, or other resources.

(6) To hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of this compact, and to establish the personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters of the commission.

(7) To accept any and all appropriate donations, grants, and gifts of money, equipment, supplies, materials, and services, and to receive, utilize, and dispose of the same; provided that at all times the commission shall avoid any appearance of impropriety or conflict of interest.

(8) To lease, purchase, or accept appropriate gifts or donations of, or otherwise to own, hold, improve, or use, any property, whether real, personal, or mixed; provided that at all times the commission shall avoid any appearance of impropriety.

(9) To sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property, whether real, personal, or mixed.

(10) To establish a budget and make expenditures.

(11) To borrow money; provided that the borrowing of money shall not be constituted as a debt of the State of Alabama in violation of Section 213 of the Constitution of Alabama of 1901, as amended by Amendment 26, now appearing as Section 213 of the Official Recompilation of the Constitution of Alabama of 1901, as amended.

(12) To appoint committees, including advisory committees comprised of administrators, state nursing regulators, state legislators or their representatives, and consumer representatives, and other interested persons.

(13) To provide and receive information from, and to cooperate with, law enforcement agencies.

(14) To adopt and use an official seal.

(15) To perform other functions as may be necessary or appropriate to achieve the purposes of this compact consistent with the state regulation of nurse licensure and practice.

(h) Financing of the commission.

(1) The commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

(2) The commission may also levy on and collect an annual assessment from each party state to cover the cost of its operations, activities, and staff in its annual budget as approved each year. The aggregate annual assessment amount, if any, shall be allocated based upon a formula to be determined by the commission, which shall adopt a rule that is binding upon all party states.

(3) The commission may not incur obligations of any kind before securing the funds adequate to meet the same; nor shall the commission pledge the credit of any of the party states, except by, and with the authority of, the party state.

(4) The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the commission.

(i) Qualified immunity, defense, and indemnification.

(1) In accordance with Section 36-1-12, the administrators, officers, executive director, employees, and representatives of the commission shall be immune from suit and liability.

(2) The commission shall defend any administrator, officer, executive director, employee, or representative of the commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities; provided that nothing in this compact shall be construed to prohibit that person from retaining his or her own counsel; and provided further that the actual or alleged act, error, or omission did not result from his or her intentional, willful, or wanton misconduct.

(3) The commission shall indemnify and hold harmless any administrator, officer, executive director, employee, or representative of the commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that the person had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional, willful, or wanton misconduct of that person.

(Act 2019-102, §3.)

Section 34-21-127 Rulemaking Authority.

(a) The commission shall exercise its rulemaking powers pursuant to the criteria set forth in this compact and the rules adopted under this compact. Rules and amendments shall become binding as of the date specified in each rule or amendment and shall have the same force and effect as this compact.

(b) Rules or amendments to the rules shall be adopted at a regular or special meeting of the commission.

(c) Before the adoption of a final rule by the commission, and at least 60 days in advance of the meeting at which the rule shall be considered and voted upon, the commission shall file a notice of proposed rulemaking on the website of the commission and on the website of each licensing board or the publication in which each party state would otherwise publish proposed rules.

(d) The notice of proposed rulemaking shall include all of the following:

(1) The proposed time, date, and location of the meeting in which the rule shall be considered and voted upon.

(2) The text of the proposed rule or amendment and the reason for the proposed rule or amendment.

(3) A request for comments on the proposed rule from any interested person.

(4) The manner in which interested persons may submit notice to the commission of their intention to attend the public hearing and any written comments.

(e) Before adoption of a proposed rule, the commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.

(f) The commission shall grant an opportunity for a public hearing before it adopts a rule or amendment to a rule.

(g) The commission shall publish the place, time, and date of the scheduled public hearing.

(1) Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing. All hearings shall be recorded, and a copy of the recording shall be made available upon request.

(2) Nothing in this section shall be construed as requiring a separate hearing on each rule. Proposed new rules or amendments to existing rules may be grouped together for the convenience of the commission at hearings required by this section.

(h) If no one appears at a public hearing, the commission may proceed with the adoption of a proposed rule.

(i) Following a scheduled hearing date, or by the close of business on the scheduled hearing date if a hearing was not conducted, the commission shall consider all written and oral comments received.

(j) The commission, by majority vote of all administrators, shall take final action on a proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.

(k) Upon determination that an emergency exists, the commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in this compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than 90 days after the effective date of the rule. For the purposes of this subsection, an emergency rule is a rule that is adopted immediately to do any of the following:

(1) Satisfy an imminent threat to public health, safety, or welfare.

(2) Prevent a loss of commission or party state funds.

(3) Satisfy a deadline for the promulgation of an administrative rule that is required by federal law or rule.

(4) The commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revision shall be posted on the website of the commission. The revision shall be subject to challenge by any person for a period of 30 days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing, and delivered to the commission, before the end of the notice period. If no challenge is made, the revision shall take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the commission.

(Act 2019-102, §3.)

Section 34-21-128 Oversight, Dispute Resolution, Enforcement, etc.

(a) Oversight.

(1) Each party state shall enforce this compact and take any action necessary and appropriate to effectuate the purposes and intent of this compact.

(2) The commission shall receive service of process in any proceeding that may affect the powers, responsibilities, or actions of the commission, and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process in a proceeding to the commission shall render the judgment or order void as to the commission, this compact, or promulgated rules.

(b) Default, technical assistance, and termination.

(1) If the commission determines that a party state has defaulted in the performance of its obligations or responsibilities under this compact or the adopted rules, the commission shall do all of the following:

a. Provide written notice to the defaulting state and other party states of the nature of the default, the proposed means of curing the default, or any other action to be taken by the commission.

b. Provide remedial training and specific technical assistance regarding the default.

(2) If a state in default fails to cure the default, the membership of the defaulting state in this compact may be terminated upon an affirmative vote of a majority of the administrators, and all rights, privileges, and benefits conferred by this compact may be terminated on the effective date of termination. A cure of the default does not relieve the defaulting state of obligations or liabilities incurred during the period of default.

(3) Termination of membership in this compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate membership shall be given by the commission to the governor of the defaulting state and to the executive officer of the licensing board of the defaulting state and each of the party states.

(4) A state whose membership in this compact has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

(5) The commission may not bear any costs related to a state that is found to be in default or whose membership in this compact has been terminated unless agreed upon in writing between the commission and the defaulting state.

(6) The defaulting state may appeal the action of the commission by petitioning the United States District Court for the District of Columbia or the federal district in which the commission has its principal offices. The prevailing party shall be awarded all costs of litigation, including reasonable attorneys fees.

(c) Dispute resolution.

(1) Upon request by a party state, the commission shall attempt to resolve disputes related to this compact that arise among party states and between party and nonparty states.

(2) The commission shall adopt a rule providing for both mediation and binding dispute resolution for disputes, as appropriate.

(3) In the event the commission cannot resolve disputes among party states arising under this compact:

a. The party states may submit the issues in dispute to an arbitration panel, which shall be comprised of individuals appointed by the compact administrator in each of the affected party states and an individual mutually agreed upon by the compact administrators of all the party states involved in the dispute.

b. The decision of a majority of the arbitrators shall be final and binding.

(d) Enforcement.

(1) The commission, in the reasonable exercise of its discretion, shall enforce this compact and any rules adopted pursuant to this compact.

(2) By majority vote of the administrators, the commission may initiate legal action in the federal district in which the commission has its principal offices against a party state that is in default to enforce compliance with this compact and rules or bylaws adopted pursuant to this compact. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of the litigation, including reasonable attorneys fees.

(3) The remedies provided in this article shall not be the exclusive remedies of the commission. The commission may pursue other remedies available under federal or state law.

(Act 2019-102, §3.)

Section 34-21-129 Effective Date; Withdrawal or Termination; Amendments.

(a) This compact shall become effective and binding on the earlier of the date of legislative enactment of this compact into law by not less than 26 states or December 31, 2019. All party states that also participated in the prior Nurse Licensure Compact, which is superseded by this compact, shall be deemed to have withdrawn from the Nurse Licensure Compact on the first day of the sixth month after the effective date of this compact.

(b) Each party state shall continue to recognize the multistate licensure privilege of a nurse to practice in that party state issued under the Nurse Licensure Compact until the party state has withdrawn from the Nurse Licensure Compact.

(c) A party state may withdraw from this compact by enacting a general law repealing this compact. Withdrawal by a party state may not take effect until six months after the effective date of the repeal.

(d) The withdrawal or termination of a party state shall not affect the continuing requirement of the state licensing board of that state to report adverse actions and significant investigations occurring before the effective date of the withdrawal or termination.

(e) Nothing contained in this compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a nonparty state that is made in accordance with any other provision of this compact.

(f) This compact may be amended by the party states. No amendment to this compact shall become effective and binding upon the party states until it is enacted by all party states.

(g) Representatives of nonparty states shall be invited to participate in the activities of the commission, on a nonvoting basis, before the adoption of this compact by all states.

(Act 2019-102, §3.)

Section 34-21-130 Construction; Severability.

This compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this compact shall be severable, and if any phrase, clause, sentence, or provision of this compact is declared to be contrary to the constitution of any party state or of the United States, or if the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this compact and the applicability thereof to any government, agency, person, or circumstance shall not be affected thereby. If this compact shall be held to be contrary to the constitution of any party state, this compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.

(Act 2019-102, §3.)

Article 8 Loan Repayment Program for Nursing Education.

Section 34-21-150 (Repealed By Act 2023-532, § 2, Effective September 30, 2029) Creation, Administration, and Funding.

The Alabama Loan Repayment Program for Nursing Education is created. The program shall be administered by the board and funded by direct appropriation from the Education Trust Fund.

(Act 2023-532, §2.)

Section 34-21-151 (Repealed By Act 2023-532, § 2, Effective September 30, 2029) Definitions.

As used in this article, the following terms have the following meanings:

- (1) PARTICIPANT. Any individual who applies for and is awarded a loan pursuant to this article.
- (2) PROGRAM. The Alabama Loan Repayment Program for Nursing Education.
- (3) QUALIFIED NURSING EDUCATION PROGRAM. An accredited prelicensure nursing education program conducted by a public two-year or four-year institution of higher education in this state.

(Act 2023-532, §2.)

Section 34-21-152 (Repealed By Act 2023-532, § 2, Effective September 30, 2029) Establishment and Awarding of Loans.

(a)(1) The board shall establish and award loans to any of the following qualified individuals:

a. An applicant for admission to a qualified nursing education program approved by the board, who has signed a contract as provided in subsection (b).

b. A student attending a qualified nursing education program approved by the board who is pursuing, or has completed within the five years immediately preceding the current loan term, a graduate degree to become a nurse educator in a qualified nursing education program, who has signed a contract as provided in subsection (b).

(2) An application for a nursing education loan under the program may be submitted to the board for any scholastic year, including previously completed scholastic years.

(3) A loan may be granted by the board to an individual who is pursuing or holding an eligible master's degree for up to three years and to an individual pursuing or holding an eligible doctorate degree for up to four years.

(4) For the first year of operation of the program, the maximum annual loan amount shall not exceed fifteen thousand dollars (\$15,000). For subsequent years, the board may increase the maximum annual loan amount by no more than five percent annually.

(5) The board shall conduct a careful and thorough investigation of the ability, character, and qualifications of each loan applicant and shall award loans pursuant to the requirements of the program.

(6) An individual who has signed a contract with the board may postpone his or her choice of qualified nursing education programs to work with until a time set by the board.

(b) A loan may only be awarded under the program to those individuals who have signed a contract with the board to repay all amounts received under the program by working following graduation as a full-time nursing instructor in a qualified nursing education program, for a period of 24 months for each annual loan received under the program.

(Act 2023-532, §2.)

Section 34-21-153 (Repealed by Act 2023-532, § 2, Effective September 30, 2029) Default of Failure to Honor a Loan Repayment Contract.

(a) If for any reason a participant defaults on or otherwise fails to honor a loan repayment contract with the board, the individual shall be liable for immediate repayment of the total principal loan amount, plus interest, at the rate of eight percent, or the prime lending rate, whichever is greater, accruing from the date of default or other failure to honor the contract.

(b) If for any reason after graduation with a graduate degree to become a nurse educator and prior to completion of the repayment obligation set forth in Section 34-21-152, a participant defaults on or otherwise fails to honor a loan repayment contract with the board, the participant shall pay an additional penalty equal to 20 percent of the total principal amount of all loans received by the participant.

(c) Failure of a participant to honor his or her contract with the board or to pay the amount he or she is liable for under this article shall constitute grounds for the revocation of his or her license to practice nursing.

(d) The board may excuse repayment of a loan, in whole or in part, upon the death of a participant, upon the participant becoming disabled to the extent that he or she is no longer able to engage in the practice of nursing, or upon some other extreme hardship not the fault of the participant.

(Act 2023-532, §2.)

Section 34-21-154 (Repealed By Act 2023-532, § 2, Effective September 30, 2029) Annual Report; Rulemaking Authority; Use of Funds.

(a) The board shall report annually on the condition and accomplishments of the program to the Governor, Lieutenant Governor, Speaker of the House of Representatives, President Pro Tempore of the Senate, and the Chairs of the House and Senate Health Committees.

(b) The board shall consult with the Alabama Commission on the Evaluation of Services to develop performance metrics and other measures of success to include in the annual report required pursuant to subsection (a). During the 2028 fiscal year, the program shall undergo an evaluation by the Alabama Commission on the Evaluation of Services to determine whether the program is impacting the determined measures of success.

(c) The board shall adopt reasonable rules to implement and administer the program.

(d) The board shall use any monies it receives from or for the operation of the program, including repayments, interest, and penalties paid because of default or other failure to honor a contract, to fund loans.

(Act 2023-532, §2.)

Section 34-21-155 (Repealed by Act 2023-532, § 2, Effective September 30, 2029) Repeal of Article.

This article shall be repealed on September 30, 2029, unless extended by act of the Legislature.

(Act 2023-532, §2.)



1 SB25
2 X1897EE-2
3 By Senator Weaver
4 RFD: Healthcare
5 First Read: 06-Feb-24
6 PFD: 01-Feb-24

ACT #2024 - 249



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1 Enrolled, An Act,

2
3
4 Relating to the Board of Nursing, to amend Sections
5 34-21-2 and 34-21-25, Code of Alabama 1975, to authorize the
6 board, by rule, to provide standards for the scope of practice
7 for certified nursing support technicians and to issue permits
8 to eligible applicants; to provide further for the nature and
9 type of disciplinary actions the board may impose; and to make
10 nonsubstantive, technical revisions to update existing code
11 language to current style.

12 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

13 Section 1. Sections 34-21-2 and 34-21-25 of the Code of
14 Alabama 1975, are amended to read as follows:

15 "§34-21-2

16 (a) There is created the Board of Nursing, which shall
17 be composed of 13 members to be appointed and have the duties
18 and powers enumerated in this section. The Governor shall
19 coordinate his or her appointments to assure that the
20 membership of the board shall be is inclusive and reflect
21 reflects the racial, gender, geographic, ~~urban/rural~~ urban,
22 rural, and economic diversity of the state. ~~In order to insure~~
23 continuity of administration, the nine board members provided
24 for by Section 3 of Act 427, Regular Session 1975, shall
25 continue to serve to the completion of the term for which they
26 are serving. The Governor, within 60 days of January 1, 1984,
27 shall appoint a tenth member who shall be a licensed practical
28 nurse for a term of four years from a list of nominees

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29 ~~furnished him or her by the Alabama Federation of Licensed~~
30 ~~Practical Nurses, Incorporated, or its successor organization.~~
31 As the terms of all board members expire, their successors
32 shall be appointed for terms of four years each. Vacancies in
33 unexpired terms shall be filled in the same manner as original
34 appointments are made. No member shall be appointed to more
35 than two consecutive terms of four years each. ~~Eight~~ Six
36 members of the board shall be licensed professional nurses,
37 and two members of the board shall be licensed professional
38 nurses who are approved to engage in advanced practice nursing
39 in the state, four members of the board shall be licensed
40 practical nurses, and one member of the board shall be a
41 consumer.

42 (b) (1) The Governor shall appoint the eight members of
43 the board who are licensed professional nurses, including two
44 who are approved to engage in advanced practice nursing in the
45 state, from a list of nominees who are selected by the Board
46 of Nursing Nomination Committee and furnished to the Governor
47 by the Alabama State Nurses Association, or its successor
48 organization, and the list, when furnished, shall contain at
49 least twice the number of nominees as there are appointments
50 to be made or vacancies to be filled. The Alabama State Nurses
51 Association, or its successor organization, on or before
52 December 1 of each year, or at such other ~~times~~ time as
53 necessary, shall furnish the Governor with a list of licensed
54 professional nurses qualified for appointment to the board. In
55 the nominating and appointing process, due care shall be taken
56 to ensure the maintenance of qualified representation from the

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57 fields of nursing education, nursing administration, clinical
58 nursing, and advanced practice nursing.

59 (2) The Governor shall appoint two of the four members
60 of the board who are ~~to be~~ licensed practical nurses from a
61 list of nominees furnished him or her by the Board of
62 Directors of the Licensed Practical Nurses Association of
63 Alabama, or its successor organization, and the list, when
64 furnished, shall contain at least twice the number of nominees
65 for the vacancies to be filled. The Board of Directors of the
66 Licensed Practical Nurses Association of Alabama, or its
67 successor organization, on or before December 1 of each year
68 in which the term of office of a board member or a nominee of
69 the Board of Directors of the Licensed Practical Nurses
70 Association of Alabama shall expire, or at such other time as
71 necessary, shall furnish the Governor with the list of
72 licensed practical nurses qualified for appointment to the
73 board.

74 (3) The Governor shall appoint two of the four members
75 ~~an~~ of the board who are ~~to be~~ licensed practical nurses from a
76 list of nominees furnished him or her by the Board of
77 Directors of the Alabama Federation of Licensed Practical
78 Nurses, Incorporated, or its successor organization, and the
79 list, when furnished, shall contain at least twice the number
80 of nominees for the vacancies to be filled. The Board of
81 Directors of the Alabama Federation of Licensed Practical
82 Nurses, Incorporated, or its successor organization, on or
83 before December 1 of each year in which the term of office of
84 ~~the~~ a board member filled by the nominee of the ~~board of~~



35 ~~directors~~ Board of Directors of the Alabama Federation of
36 Licensed Practical Nurses, Incorporated, or its successor
37 organization, shall expire, or at such other ~~times~~ time as
38 necessary, shall furnish the Governor with a list of licensed
39 practical nurses qualified for appointment to the board.

90 (c) The Governor may remove any member from the board
91 for neglect of duty of the board, incompetency, or
92 unprofessional or dishonorable conduct.

93 (d) Each person appointed to the board as a licensed
94 professional nurse shall be a citizen of the United States, a
95 resident of ~~the State of Alabama~~ this state, and have all of
96 ~~these~~ the following additional qualifications:

97 (1) Be a graduate of a state-approved educational
98 program for the preparation of practitioners of professional
99 nursing.

100 (2) Be a currently licensed professional nurse in
101 Alabama this state.

102 (3) Have a minimum of five years' successful nursing
103 experience in an administrative, teaching, clinical capacity,
104 or advanced practice.

105 (4) Be actively engaged in professional nursing in this
106 state immediately preceding and during appointment.

107 (e) Each person appointed to the board as a licensed
108 practical nurse shall be a citizen of the United States, a
109 resident of the State of Alabama, and have all of ~~these~~ the
110 following additional qualifications:

111 (1) Hold a diploma from an accredited high school or
112 its equivalent.

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113 (2) Be a graduate of a state-approved vocational
114 educational program for the preparation of practitioners of
115 licensed practical nursing.

116 (3) Be a currently licensed practical nurse in ~~Alabama~~
117 this state.

118 (4) Have a minimum of five years' successful nursing
119 experience.

120 (5) Be actively engaged in licensed practical nursing
121 in this state immediately preceding and during appointment.

122 (f) ~~There shall be one~~ The consumer member of the board
123 ~~who is a consumer and who is~~ may not be a member of any of the
124 health care professions. The consumer member shall be
125 appointed by the Governor ~~effective January 1, 1998,~~ and shall
126 serve for a term of four years. His or her successor shall be
127 appointed in a like manner at the expiration of each term or
128 upon a vacancy for the remainder of an unexpired term of
129 office. The consumer member of the board ~~shall have,~~ presently
130 or formerly, shall have no direct financial interest in any
131 health care facility, profession, agency, or insurer, or be,
132 or have been, a health care worker.

133 ~~(g) There shall be two advanced practice nurse~~
134 ~~positions to be filled effective January 1, 1998, in the same~~
135 ~~manner as all other professional nurse positions. One advanced~~
136 ~~practice nurse position shall be served for an initial~~
137 ~~five-year term and successors shall serve four-year terms. The~~
138 ~~remaining member appointed to an advance practice nurse~~
139 ~~position shall serve an initial four-year term and successors~~
140 ~~shall serve four-year terms.~~

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141 ~~(h)~~ (g) All members of the board shall enjoy immunity
142 from individual civil liability while acting within the scope
143 of their duties as board members.

144 ~~(i) The board shall have the following powers and~~
145 ~~perform the following duties: It~~ (h) The board shall meet at
146 least once a year and ~~shall~~, at its organizational meeting and
147 at its annual meetings thereafter, shall elect from its
148 members a president, a vice president, and a secretary. ~~It~~ The
149 board may hold ~~such~~ other and additional meetings during any
150 year as ~~it~~ the board deems necessary for the transaction of
151 business. A majority of the board, including one officer,
152 shall constitute a quorum at any meeting.

153 ~~(j)~~ (i) The board may do any of the following:

154 (1) Adopt and, ~~from time to time~~, revise ~~such~~ rules,
155 not inconsistent with the law, as may be necessary to carry
156 out this chapter.

157 (2) Prescribe standards and approve curricula for
158 nursing educational programs preparing ~~persons~~ individuals for
159 ~~licensure~~ licensing under this chapter.

160 (3) Provide for surveys and evaluations of ~~such~~
161 programs at ~~such~~ times as ~~it~~ the board may deem necessary.

162 (4) Approve ~~such~~ nursing educational programs ~~as meet~~
163 that satisfy the requirements of this chapter and the board.
164 Nothing in this chapter shall be construed to diminish the
165 power of the State Board of Education or any other
166 constitutionally or legislatively established state ~~agencies~~
167 agency to govern the schools under their respective
168 jurisdictions.

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169 (5) Deny or withdraw approval from educational programs
170 for failure to ~~meet~~ satisfy prescribed standards. Withdrawal
171 of approval shall be effected only after a hearing in
172 accordance with board rules.

173 (6) Examine, license, and renew the licenses of ~~daily~~
174 qualified applicants and require employers to submit listings
175 of personnel covered by this chapter to the board upon request
176 including, but not limited to, personnel practicing nursing in
177 Alabama under a multistate license, a single state license, or
178 a multistate ~~licensure~~ licensing privilege. The board may
179 issue qualified applicants either a single state license or a
180 multistate license.

181 (7) Adopt and, from time to time, revise rules
182 providing standards including, but not limited to, scope of
183 practice for student nurse apprenticeships and the issuance of
184 student nurse apprentice permits by the board to eligible
185 students.

186 (8) Adopt and, ~~from time to time,~~ revise rules
187 providing standards including, but not limited to, scope of
188 practice for certified medication assistants and the issuance
189 of certified medication assistant permits by the board to
190 eligible applicants. For purposes of this chapter, a certified
191 medication assistant is ~~an unlicensed assistive personnel~~ an
192 individual who has successfully completed a board-approved
193 curriculum for assistance with medications, or a comparable
194 program in another state, ~~and~~ who holds a valid certification
195 as a medication assistant and who has been issued a permit
196 pursuant to this chapter. Practice by a certified medication

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197 assistant is limited to employment in health care or
198 educational facilities that are licensed, certified, or
199 operated by this state.

200 (9) Adopt and revise rules providing standards
201 including, but not limited to, scope of practice for certified
202 nursing support technicians and the issuance of permits by the
203 board to eligible applicants. For purposes of this chapter, a
204 certified nursing support technician is an individual who has
205 successfully completed a board-approved curriculum for
206 performing supportive nursing services, or a comparable
207 program in another state, and who has passed a board-approved
208 examination and has been issued a permit pursuant to this
209 chapter. Supportive nursing services do not require the
210 exercise of nursing judgment. A nursing support technician
211 performs supportive nursing services under the supervision of
212 a licensed nurse.

213 ~~(9)~~ (10) Conduct investigations, hearings, and
214 proceedings concerning alleged violations of this ~~section~~
215 chapter or of the rules of the board.

216 ~~(10)~~ ~~Have the power to issue~~ (11) Issue subpoenas,
217 compel the attendance of witnesses, and administer oaths to
218 ~~persons~~ individuals giving testimony at hearings.

219 ~~(11)~~ (12) Cause the prosecution of ~~all persons~~ any
220 individual violating this chapter and incur ~~such~~ necessary
221 expenses therefor.

222 ~~(12)~~ (13) Keep a public record of all of its
223 proceedings.

224 ~~(13)~~ (14) Keep a register of all licensees.

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225 ~~(14)~~ (15) Make an annual report to the Governor.

226 ~~(15)~~ (16) Appoint and employ a qualified ~~person~~
227 individual, not subject to the state Merit System, ~~who shall~~
228 ~~not be~~ nor a member of the board, to serve as the executive
229 officer and administrator and commissioner of the Enhanced
230 Nurse Licensure Compact for Alabama.

231 ~~(16)~~ (17) Define the duties and fix the compensation of
232 the executive officer and administrator and commissioner of
233 the Enhanced Nurse Licensure Compact for Alabama, with the
234 approval of the Governor and the State Personnel Board as
235 provided in Section 36-6-6.

236 ~~(17)~~ (18) Employ ~~such other persons~~ other individuals as
237 may be necessary to carry on the work of the board and provide
238 for appropriate bonding of employees. Regular employees of the
239 board shall be employed subject to the state Merit System in
240 effect ~~on January 1, 1966, or~~ at the time of employment.

241 ~~(18)~~ (19) Employ consultants, specialists, counsel, or
242 other specially qualified ~~persons~~ individuals under contract
243 or on a part-time basis to assist in ~~the~~ board in
244 administering this chapter and without regard to the state
245 Merit System ~~in effect on or after January 1, 1966,~~ and pay
246 for the services of ~~such persons~~ those individuals.

247 ~~(19)~~ (20) Accept gifts and grants upon terms and
248 conditions imposed by it through official resolutions.

249 ~~(20)~~ (21) Perform ~~such~~ other duties, not inconsistent
250 with law, as required by this chapter to foster and improve
251 nursing ~~and,~~ the regulation ~~thereof~~ of the practice of
252 nursing, and the public health of this state.

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253 ~~(21)~~ (22) Expend funds of the board in exercising ~~the~~
254 board powers and duties and in administering this chapter.

255 ~~(22)~~ (23) Determine and collect reasonable fees.

256 ~~(23)~~ (24) Adopt standards for registered and practical
257 nursing practice and for continued competency of licensees.

258 ~~(24)~~ (25) Join organizations that develop and regulate
259 the national nursing ~~licensure~~ licensing examinations and
260 promote the improvement of the legal standards of the practice
261 of nursing for the protection of the public health, safety,
262 and welfare.

263 ~~(*)~~ (j) The executive officer employed by the board
264 shall be a citizen of the United States, ~~a person~~ an
265 individual of the highest integrity, and possess ~~these~~ all of
266 the following additional qualifications:

267 (1) Be a licensed professional nurse in Alabama or
268 eligible for ~~licensure~~, be licensing.

269 (2) Be a graduate of a professional nursing program
270 approved by the state in which the program was completed,
271 ~~held~~.

272 (3) Hold a master's degree, ~~and have~~.

273 (4) Have had a varied experience in nursing, including
274 at least five years' experience in an administrative or
275 teaching capacity.

276 ~~(1)~~ (k) The executive officer shall be bonded for the
277 faithful performance of the duties of the office in the sum of
278 not less than five thousand dollars (\$5,000), and the premium
279 of the bond shall be paid out of the funds of the board.

280 ~~(*)~~ (l) Each member of the board shall receive the same

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231 per diem and travel allowance as is paid by law to state
232 employees for each day's attendance at the board meetings
233 incurred in the discharge of his or her duties as a board
234 member in addition to any daily compensation or allowance, if
235 any, as may be provided by the board, in ~~such~~ any amount as
236 may be determined by the board. Any member of the board
237 engaged in duties under the direction of the board shall
238 receive the per diem and travel expenses and daily
239 compensation or allowance authorized by the board..

290 ~~(n)~~ (m) Nothing in this chapter shall limit the rights
291 of affected parties to appeal decisions of the board with
292 regard to rules adopted pursuant to this chapter.

293 ~~(n)~~ (n) Participation by the state in the compact
294 provided in Article 7 shall be subject to review and
295 evaluation by the Sunset Committee pursuant to Chapter 20 of
296 Title 41, with the first review occurring in 2024. The Sunset
297 Committee shall determine whether continued participation in
298 the compact is in the best interests of the board or the
299 licensees of the board. The Sunset Committee shall also review
300 and evaluate participation in the compact within one year
301 after the occurrence of any of the following:

302 (1) The annual assessment charged the board for
303 participation in the compact exceeds one-half of one percent
304 of the gross revenue of the board for the fiscal year
305 immediately preceding the levying of the annual assessment.

306 (2) The state, the board, or members or employees of
307 the state or board are named defendants in a suit brought in
308 any court of law or equity by the Interstate Commission of

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309 Nurse Licensure Compact Administrators pursuant to Article 7.

310 (3) The passage of a resolution by either house of the
311 Legislature requesting review pursuant to ~~subsection (d) of~~
312 Section 41-20-3(d)."

313 "§34-21-25

314 (a) For disciplinary purposes, the board may adopt,
315 levy, and collect administrative fines not to exceed one
316 thousand dollars (\$1,000) per violation and may institute any
317 legal proceedings necessary to effect compliance with this
318 chapter against its licensees the holder of any license,
319 permit, certificate, or approval issued by the board or the
320 holder of a multistate privilege to practice nursing in this
321 state.

322 (b) (1) The board may also deny, revoke, ~~or place on~~
323 probation with conditions for continued practice, suspend,
324 require the evaluation of, impose continuing education
325 requirements upon, or otherwise discipline any applicant for
326 or holder of any license, permit, certificate, or approval
327 issued by it or otherwise discipline a licensee, the board or
328 holder of a multistate privilege to practice in ~~Alabama~~ this
329 state, upon proof of any of the following regarding the
330 licensee applicant for or holder of any license, permit,
331 certificate, approval, or multistate privilege to practice in
332 this state:

333 a. Is guilty of fraud or deceit in procuring or
334 attempting to procure a license.

335 b. Has been convicted of a felony.

336 c. Is guilty of a crime involving moral turpitude or of

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337 gross immorality that would tend to bring reproach upon the
338 nursing profession.

339 d. Is unfit or incompetent due to the use of alcohol,
340 or is addicted to the use of habit-forming drugs to ~~such~~ an
341 extent as to render him or her unsafe or unreliable as a
342 licensee.

343 e. Is unable to practice nursing with reasonable skill
344 and safety to patients by reason of illness, inebriation,
345 excessive use of drugs, narcotics, alcohol, chemicals, or any
346 other substance, or as a result of any mental or physical
347 condition.

348 f. Has been convicted of any violation of a federal or
349 state law relating to controlled substances.

350 g. Is guilty of unprofessional conduct of a character
351 likely to deceive, defraud, or injure the public in matters
352 pertaining to health.

353 h. Has willfully or repeatedly violated this article,
354 as defined by board rules.

355 i. Has been sentenced to a period of continuous
356 incarceration serving a penal sentence for the commission of a
357 misdemeanor or felony. The disciplinary action shall remain in
358 effect until the board acts upon the application of the
359 licensee for reinstatement of the license.

360 (2) The board may refrain from or delay taking
361 disciplinary action under this subsection if a licensee ~~can~~
362 may be voluntarily treated or rehabilitated pursuant to
363 subsection (j).

364 (c) Whenever a written complaint is made to the board



365 that ~~a person~~ an individual has committed any of the acts or
366 has come within any of the provisions enumerated in subsection
367 (b), the board shall investigate the complaint and may bring
368 an action in its own name to hear and determine the complaint.
369 The hearing shall be held in Montgomery County. The ~~person~~
370 individual whose qualification is under consideration shall
371 have not less than 20 days' written notice of the time and
372 place of the initial hearing, and the notice shall be
373 accompanied by a copy of the complaint. The notice may be
374 served upon the accused ~~person~~ individual by any sheriff of
375 ~~the State of Alabama~~ this state. If the accused ~~person~~
376 individual is out of the state, evades service, or cannot be
377 served in person, then service may be made by mailing, by
378 registered or certified mail, the notice and a copy of the
379 complaint to the accused ~~person~~ individual at his or her last
380 known ~~post-office~~ mailing address in this state, and the
381 return shall show that service has been made in this manner.

382 (d) At the hearing, the complainant, the ~~person~~
383 individual whose qualification is under consideration, and any
384 other ~~person~~ individual permitted by the board, may introduce
385 all oral or written testimony, or both, as the board deems
386 relevant to the issues involved, and may be heard in person or
387 by counsel, or both. The board may permit the complaint to be
388 amended, but no amendment shall be permitted which is not
389 germane to the charge or charges sought to be amended or which
390 materially alters the nature of any offense charged. The board
391 may determine all questions as to the sufficiency of the
392 complaint, procedure, and admissibility and weight of

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393 evidence. If the ~~person~~ individual whose qualification is
394 under consideration is absent, the hearing may proceed in his
395 or her absence.

396 (e) Any accused ~~person~~ individual, complainant, or
397 other party and the board may subpoena witnesses or pertinent
398 records for the hearing, and those subpoenas may be served by
399 any sheriff of ~~the State of Alabama~~ this state. Witnesses may
400 be sworn by the president of the board or by the ~~person~~
401 individual discharging the duties of the president. Witnesses
402 testifying at a hearing shall upon discharge as a witness be
403 paid by the party requesting the subpoena an amount not to
404 exceed the per diem expense allowed to ~~Alabama~~ state employees
405 for in-state travel and the actual cost of transportation to
406 and from the place of the hearing, not to exceed the mileage
407 rate allowed to ~~Alabama~~ state employees for in-state travel.

408 (f) Evidence may also be taken by deposition, and the
409 law and practice as to depositions in circuit courts shall be
410 followed in all reasonable respects.

411 (g) If the accused ~~person~~ individual is found guilty of
412 the charges, the board may refuse to issue a license, may
413 revoke or suspend a license, or may otherwise discipline a
414 licensee. A revoked license may be considered for
415 reinstatement after one year in accordance with board rules.

416 (h) Any ~~person~~ individual whose license is ordered
417 suspended or revoked may appeal to the circuit court or a
418 court of like jurisdiction of Montgomery County, from any
419 order of the board under this section, within 30 days from the
420 date of the decision of the board. The trial of appeals shall

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421 be conducted in like manner, as nearly as may be, as provided
422 for in the Alabama Administrative Procedure Act.

423 (i) Any organization, registered nurse, licensed
424 practical nurse, or other ~~person~~ individual who in good faith
425 reports information to the board alleging that any ~~person~~
426 individual licensed or applying for a license to practice
427 nursing may be guilty of the acts, offenses, or conditions set
428 out in Section 34-21-7 or subsection (b), shall not be liable
429 to any ~~person~~ individual for any statement or opinion made in
430 that report.

431 ~~(j) Not later than October 1, 1994, the~~ The board shall
432 establish a voluntary Disciplinary Alternative Program to
433 promote early identification, intervention, treatment, and
434 rehabilitation of any licensed nurse whose competence is found
435 to be impaired or compromised because of the use or abuse of
436 drugs, alcohol, controlled substances, chemicals, or other
437 substances or as a result of a physical or mental condition
438 rendering the ~~person~~ licensee unable to meet the standards of
439 the nursing profession. The intent of the program is to
440 provide a voluntary alternative to traditional disciplinary
441 actions.

442 (1) When a registered nurse or licensed practical nurse
443 voluntarily seeks treatment for use or abuse of drugs,
444 controlled substances, alcohol, chemicals, or other
445 substances, or has a physical or mental condition that would
446 render the individual unable to meet the standards of the
447 nursing profession, the board may refrain from taking
448 disciplinary action under subsection (b) if ~~it~~ the board

SB25 Enrolled



449 determines that the licensee ~~can~~ may be treated or
450 rehabilitated effectively and that there is no danger to the
451 public. Upon voluntarily seeking treatment, the licensee is
452 subject to the requirements of the Disciplinary Alternative
453 Program established by the board.

454 (2) The board may establish, develop, adopt, and revise
455 rules, and may adjust the license renewal fee as necessary to
456 implement this subsection.

457 (3) The board may appoint an Advisory Council for the
458 Disciplinary Alternative Program pursuant to Section 34-21-3.

459 (4) The board may contract with specially qualified
460 persons individuals or corporations, or both, to assist ~~in~~ the
461 board in administering the Disciplinary Alternative Program.

462 (5) The board shall establish by rule criteria for
463 eligibility to participate in the Disciplinary Alternative
464 Program and requirements for successful participation in and
465 completion of the program.

466 (6) Subject to Section 34-21-125, all records of a
467 licensee who successfully completes the Disciplinary
468 Alternative Program shall be confidential, not subject to
469 public disclosure, and not available for court subpoena or for
470 discovery proceedings. The records of a licensee who fails to
471 comply with the program agreement or who leaves the state
472 prior to the successful completion of the program are not
473 confidential. Information regarding the participation of a
474 licensee in the Disciplinary Alternative Program reported to
475 the coordinated licensure information system pursuant to
476 Section 34-21-125 shall be made available solely to other

SB25 Enrolled



477 state boards of nursing and shall not be disclosed to the
478 public by the coordinated licensure information system. Upon
479 successful completion of the Disciplinary Alternative Program,
480 all information regarding participation of the licensee in the
481 Disciplinary Alternative Program shall be expunged from the
482 coordinated licensure information system.

483 (7) Nonpublic or confidential data submitted to the
484 coordinated licensure information system by the board may not
485 be distributed to any nonparty state, organization, ~~person~~
486 individual, or entity, or any foreign government or an agent,
487 entity, or representative of a foreign government, without the
488 express written approval of the board.

489 (8) On request and payment of a certified verification
490 fee, the board shall provide a registered nurse or licensed
491 practical nurse licensed by this state with a copy of any
492 information regarding the nurse maintained by the coordinated
493 licensure information system under Article 7.

494 (9) The board is not obligated to provide information
495 that is not otherwise available to the board or information
496 that is not available to the ~~nurse licensee~~ under the laws of
497 the state contributing the information to the coordinated
498 licensure information system or that has been designated as
499 available only to other boards of nursing by the state
500 contributing the information to the coordinated licensure
501 information system.

502 (10) Nothing in this subsection shall limit the
503 authority of the board to discipline an impaired ~~individual~~
504 licensee subject to its jurisdiction.

SB25 Enrolled



505 (k) The board may adopt rules imposing a
506 nondisciplinary administrative penalty for designated
507 violations of this chapter."

508 Section 2. This act shall become effective on October
509 1, 2024.

SB25 Enrolled



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[Handwritten Signature]

President and Presiding Officer of the Senate

[Handwritten Signature]

Speaker of the House of Representatives

SB25

Senate 27-Feb-24

I hereby certify that the within Act originated in and passed the Senate.

Patrick Harris,
Secretary.

House of Representatives
Passed: 30-Apr-24

By: Senator Weaver

APPROVED

5-7-2024

TIME

9:00 AM

Keyley

GOVERNOR

Alabama Secretary Of State

Act Num....: 2024-249
Bill Num....: S-25

Recv'd 05/07/24 10:41am KCW

ORIGINAL
 Senate Bill No. 25
 Project No. X1377EE-1
 Profile Date 2/1/24

SPONSOR

Weaver

CO-SPONSORS

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SENATE ACTION

DATE: 2-6 2024
 RD 1 RFD: HLTH

I hereby certify that the notice & proof is attached to the Bill, SB _____ as required in the General Acts of Alabama, 1975 Act No. 919.
 PATRICK HARRIS,
 Secretary

This Bill was referred to the Standing Committee of the Senate on Healthcare
 and was acted upon by such Committee in session and is by order of the Committee returned therefrom with a favorable report
 w/amd(s) _____ w/sub _____ w/eng sub _____
 yeas 12 nays 6 abstain 0
 this 21st day of February, 2024
[Signature], Chairperson

DATE: 2-21 2024
 RF FAU RD 2 CAL

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 25.
 yeas 24 nays 0 abstain 0
 PATRICK HARRIS,
 Secretary

DATE: 2-27-24 RD 3 at length
 PASSED PASSED AS AMENDED
 yeas 31 nays 0 abstain 2
 And was ordered sent forthwith to the House.
 PATRICK HARRIS,
 Secretary

HOUSE ACTION

DATE: 2-27 2024
 RD 1 RFD: BAC

REPORT OF STANDING COMMITTEE
 This bill having been referred by the House to its standing committee on
BAC
 was acted upon by such Committee in session, and returned therefrom to the House with the recommendation that it be Passed,
 w/amd(s) _____ w/sub _____
 this 26 day of March, 2024.
[Signature], Chairperson

DATE: 3-6 2024
 RF _____ RD 2 CAL

DATE: _____ 20____
 RE-REFERRED RE-COMMITTED
 COMMITTEE _____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 25.
 YEAS 100 NAYS 0
 JOHN TREADWELL,
 Clerk



ACT #2024 - 250

1 HB234

2 67SE333-3

3 By Representatives Bedsole, Shirey, Rigsby, Wood (R), Rafferty

4

5 RFD: Boards, Agencies and Commissions

6 First Read: 27-Feb-24





HB234 Enrolled

1 Enrolled, An Act,
2 Relating to the Board of Nursing; to amend Section 34-21-2,
3 Code of Alabama 1975, to revise the membership of the board to
4 include a certified registered nurse anesthetist who is
5 approved to engage in advanced practice nursing; and to make
6 nonsubstantive, technical revisions to update existing code
7 language to current style.

8 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

9 Section 1. Section 34-21-2 of the Code of Alabama 1975,
10 is amended to read as follows:

11 "§34-21-2

12 (a) There is created the Board of Nursing, which shall
13 be composed of 13 members to be appointed and have the duties
14 and powers enumerated in this section. The Governor shall
15 coordinate his or her appointments to assure that the
16 membership of the board shall be is inclusive and reflect
17 reflects the racial, gender, geographic, ~~urban/rural~~ urban,
18 rural, and economic diversity of the state. ~~In order to insure~~
19 continuity of administration, the nine board members provided
20 for by Section 3 of Act 427, Regular Session 1975, shall
21 continue to serve to the completion of the term for which they
22 are serving. The Governor, within 60 days of January 1, 1984,
23 shall appoint a tenth member who shall be a licensed practical
24 nurse for a term of four years from a list of nominees
25 furnished him or her by the Alabama Federation of Licensed
26 Practical Nurses, Incorporated, or its successor organization.
27 As the terms of all board members expire, their successors
28 shall be appointed for terms of four years each. Vacancies in



HB234 Enrolled

29 unexpired terms shall be filled in the same manner as original
30 appointments are made. No member shall be appointed to more
31 than two consecutive terms of four years each. ~~Eight~~ Six
32 members of the board shall be licensed professional nurses,
33 and one member of the board shall be a licensed professional
34 nurse who is approved to engage in advanced practice nursing
35 in this state, one member of the board shall be a certified
36 registered nurse anesthetist who is approved to engage in
37 advanced practice nursing in this state, four members of the
38 board shall be licensed practical nurses, and one member of
39 the board shall be a consumer.

40 (b) (1) The Governor shall appoint the seven members of
41 the board who are licensed professional nurses, including the
42 one licensed professional nurse who is approved to engage in
43 advanced practice nursing in this state, from a list of
44 nominees who are selected by the Board of Nursing Nomination
45 Committee and furnished to the Governor by the Alabama State
46 Nurses Association, or its successor organization, and the
47 list, when furnished, shall contain at least twice the number
48 of nominees as there are appointments to be made or vacancies
49 to be filled. The Alabama State Nurses Association, or its
50 successor organization, on or before December 1 of each year,
51 or at such other ~~times~~ time as necessary, shall furnish the
52 Governor with a list of licensed professional nurses qualified
53 for appointment to the board. In the nominating and appointing
54 process, due care shall be taken to ensure the maintenance of
55 qualified representation from the fields of nursing education,
56 nursing administration, clinical nursing, and advanced



57 practice nursing.

58 (2) The Governor shall appoint the one member of the
59 board who is a certified registered nurse anesthetist who is
60 approved to engage in advanced practice nursing in this state
61 from a list of at least two nominees furnished to the Governor
62 by the Board of Directors of the Alabama Association of Nurse
63 Anesthetists, or its successor organization. The list of
64 qualified certified registered nurse anesthetists shall be
65 furnished to the Governor on or before December 1 of each year
66 in which the term of office of the member or a nominee of the
67 Board of Directors of the Alabama Association of Nurse
68 Anesthetists, or its successor organization, shall expire, or
69 at such other time as necessary, for an initial appointment to
70 the board beginning January 1, 2026.

71 ~~(2)~~ (3) The Governor shall appoint two of the four
72 members of the board who are ~~to be~~ licensed practical nurses
73 from a list of nominees furnished him or her by the Board of
74 Directors of the Licensed Practical Nurses Association of
75 Alabama, or its successor organization, and the list, when
76 furnished, shall contain at least twice the number of nominees
77 for the vacancies to be filled. The Board of Directors of the
78 Licensed Practical Nurses Association of Alabama, or its
79 successor organization, on or before December 1 of each year
80 in which the term of office of a board member or a nominee of
81 the Board of Directors of the Licensed Practical Nurses
82 Association of Alabama shall expire, or at such other time as
83 necessary, shall furnish the Governor with the list of
84 licensed practical nurses qualified for appointment to the



HB234 Enrolled

85 board.

86 ~~(3)~~ (4) The Governor shall appoint two of the four
87 ~~members~~ of the board who are ~~to be~~ licensed practical
88 nurses from a list of nominees furnished him or her by the
89 Board of Directors of the Alabama Federation of Licensed
90 Practical Nurses, Incorporated, or its successor organization,
91 and the list, when furnished, shall contain at least twice the
92 number of nominees for the vacancies to be filled. The Board
93 of Directors of the Alabama Federation of Licensed Practical
94 Nurses, Incorporated, or its successor organization, on or
95 before December 1 of each year in which the term of office of
96 ~~the~~ a board member filled by the nominee of the ~~board of~~
97 ~~directors~~ Board of Directors of the Alabama Federation of
98 Licensed Practical Nurses, Incorporated, or its successor
99 organization, shall expire, or at such other ~~times~~ time as
100 necessary, shall furnish the Governor with a list of licensed
101 practical nurses qualified for appointment to the board.

102 (c) The Governor may remove any member from the board
103 for neglect of duty of the board, incompetency, or
104 unprofessional or dishonorable conduct.

105 (d) Each ~~person~~ individual appointed to the board as a
106 licensed professional nurse shall be a citizen of the United
107 States, a resident of ~~the State of Alabama~~ this state, and
108 have all of ~~these~~ the following additional qualifications:

109 (1) Be a graduate of a state-approved educational
110 program for the preparation of practitioners of professional
111 nursing.

112 (2) Be a currently licensed professional nurse in



113 Alabama this state.

114 (3) Have a minimum of five years' successful nursing
115 experience in an administrative, teaching, clinical capacity,
116 or advanced practice.

117 (4) Be actively engaged in professional nursing in this
118 state immediately preceding and during appointment.

119 (e) Each ~~person~~ individual appointed to the board as a
120 licensed practical nurse shall be a citizen of the United
121 States, a resident of the State of Alabama, and have all of
122 these the following additional qualifications:

123 (1) Hold a diploma from an accredited high school or
124 its equivalent.

125 (2) Be a graduate of a state-approved vocational
126 educational program for the preparation of practitioners of
127 licensed practical nursing.

128 (3) Be a currently licensed practical nurse in ~~Alabama~~
129 this state.

130 (4) Have a minimum of five years' successful nursing
131 experience.

132 (5) Be actively engaged in licensed practical nursing
133 in this state immediately preceding and during appointment.

134 (f) ~~There shall be one~~ The consumer member of the board
135 ~~who is a consumer and who is~~ may not be a member of any of the
136 health care professions. The consumer member shall be
137 appointed by the Governor ~~effective January 1, 1998,~~ and shall
138 serve for a term of four years. His or her successor shall be
139 appointed in a like manner at the expiration of each term or
140 upon a vacancy for the remainder of an unexpired term of



HB234 Enrolled

141 office. The consumer member of the board ~~shall have~~, presently
142 or formerly, shall have no direct financial interest in any
143 health care facility, profession, agency, or insurer, or be,
144 or have been, a health care worker.

145 ~~(g) There shall be two advanced practice nurse~~
146 ~~positions to be filled effective January 1, 1998, in the same~~
147 ~~manner as all other professional nurse positions. One advanced~~
148 ~~practice nurse position shall be served for an initial~~
149 ~~five year term and successors shall serve four year terms. The~~
150 ~~remaining member appointed to an advance practice nurse~~
151 ~~position shall serve an initial four year term and successors~~
152 ~~shall serve four year terms.~~

153 ~~(h)~~ (g) All members of the board shall enjoy immunity
154 from individual civil liability while acting within the scope
155 of their duties as board members.

156 ~~(i) The board shall have the following powers and~~
157 ~~perform the following duties: It~~ (h) The board shall meet at
158 least once a year and ~~shall~~, at its organizational meeting and
159 at its annual meetings thereafter, shall elect from its
160 members a president, a vice president, and a secretary. ~~It~~ The
161 board may hold ~~such~~ other and additional meetings during any
162 year as ~~it~~ the board deems necessary for the transaction of
163 business. A majority of the board, including one officer,
164 shall constitute a quorum at any meeting.

165 ~~(j)~~ (i) The board may do any of the following:

166 (1) Adopt and, ~~from time to time~~, revise ~~such~~ rules,
167 not inconsistent with the law, as may be necessary to carry
168 out this chapter.



169 (2) Prescribe standards and approve curricula for
170 nursing educational programs preparing ~~persons~~ individuals for
171 licensure licensing under this chapter.

172 (3) Provide for surveys and evaluations of ~~such~~
173 programs at ~~such~~ times as ~~it~~ the board may deem necessary.

174 (4) Approve ~~such~~ nursing educational programs ~~as meet~~
175 that satisfy the requirements of this chapter and the board.
176 Nothing in this chapter shall be construed to diminish the
177 power of the State Board of Education or any other
178 constitutionally or legislatively established state ~~agencies~~
179 agency to govern the schools under their respective
180 jurisdictions.

181 (5) Deny or withdraw approval from educational programs
182 for failure to ~~meet~~ satisfy prescribed standards. Withdrawal
183 of approval shall be effected only after a hearing in
184 accordance with board rules.

185 (6) Examine, license, and renew the licenses of ~~duly~~
186 qualified applicants and require employers to submit listings
187 of personnel covered by this chapter to the board upon request
188 including, but not limited to, personnel practicing nursing in
189 Alabama under a multistate license, a single state license, or
190 a multistate licensure licensing privilege. The board may
191 issue qualified applicants either a single state license or a
192 multistate license.

193 (7) Adopt and, from time to time, revise rules
194 providing standards including, but not limited to, scope of
195 practice for student nurse apprenticeships and the issuance of
196 student nurse apprentice permits by the board to eligible



197 students.

198 (8) Adopt and, ~~from time to time,~~ revise rules
199 providing standards including, but not limited to, scope of
200 practice for certified medication assistants and the issuance
201 of certified medication assistant permits by the board to
202 eligible applicants. For purposes of this chapter, a certified
203 medication assistant is an ~~unlicensed assistive personnel~~
204 individual who has successfully completed a board-approved
205 curriculum for assistance with medications, or a comparable
206 program in another state, ~~and~~ who holds a valid certification
207 as a medication assistant, and who has been issued a permit
208 pursuant to this chapter. Practice by a certified medication
209 assistant is limited to employment in health care or
210 educational facilities that are licensed, certified, or
211 operated by this state.

212 (9) Conduct investigations, hearings, and proceedings
213 concerning alleged violations of this ~~section~~ chapter or of
214 the rules of the board.

215 (10) ~~Have the power to issue~~ Issue subpoenas, compel
216 the attendance of witnesses, and administer oaths to ~~persons~~
217 individuals giving testimony at hearings.

218 (11) Cause the prosecution of ~~all persons~~ any
219 individual violating this chapter and incur ~~such~~ necessary
220 expenses therefor.

221 (12) Keep a public record of all of its proceedings.

222 (13) Keep a register of all licensees.

223 (14) Make an annual report to the Governor.

224 (15) Appoint and employ a qualified ~~person~~ individual,



HB234 Enrolled

225 not subject to the state Merit System, ~~who shall not be~~ nor a
226 member of the board, to serve as the executive officer and
227 administrator and commissioner of the Enhanced Nurse Licensure
228 Compact for Alabama.

229 (16) Define the duties and fix the compensation of the
230 executive officer and administrator and commissioner of the
231 Enhanced Nurse Licensure Compact for Alabama, with the
232 approval of the Governor and the State Personnel Board as
233 provided in Section 36-6-6.

234 (17) Employ ~~such other persons~~ other individuals as may
235 be necessary to carry on the work of the board and provide for
236 appropriate bonding of employees. Regular employees of the
237 board shall be employed subject to the state Merit System in
238 effect ~~on January 1, 1966, or~~ at the time of employment.

239 (18) Employ consultants, specialists, counsel, or other
240 specially qualified ~~persons~~ individuals under contract or on a
241 part-time basis to assist in the board in administering this
242 chapter and without regard to the state Merit System ~~in effect~~
243 ~~on or after January 1, 1966,~~ and pay for the services of ~~such~~
244 persons those individuals.

245 (19) Accept gifts and grants upon terms and conditions
246 imposed by it through official resolutions.

247 (20) Perform ~~such~~ other duties, not inconsistent with
248 law, as required by this chapter to foster and improve nursing
249 ~~and,~~ the regulation ~~thereof~~ of the practice of nursing, and
250 the public health of this state.

251 (21) Expend funds of the board in exercising ~~its~~ board
252 powers and duties and in administering this chapter.



HB234 Enrolled

253 (22) Determine and collect reasonable fees.

254 (23) Adopt standards for registered and practical
255 nursing practice and for continued competency of licensees.

256 (24) Join organizations that develop and regulate the
257 national nursing ~~licensure~~ licensing examinations and promote
258 the improvement of the legal standards of the practice of
259 nursing for the protection of the public health, safety, and
260 welfare.

261 ~~(k)~~ (j) The executive officer employed by the board
262 shall be a citizen of the United States, ~~a person~~ an
263 individual of the highest integrity, and possess ~~these~~ all of
264 the following additional qualifications:

265 (1) Be a licensed professional nurse in Alabama or
266 eligible for ~~licensure~~, be licensing.

267 (2) Be a graduate of a professional nursing program
268 approved by the state in which the program was completed,
269 ~~and~~ hold.

270 (3) Hold a master's degree, ~~and have~~.

271 (4) Have had a varied experience in nursing, including
272 at least five years' experience in an administrative or
273 teaching capacity.

274 ~~(l)~~ (k) The executive officer shall be bonded for the
275 faithful performance of the duties of the office in the sum of
276 not less than five thousand dollars (\$5,000), and the premium
277 of the bond shall be paid out of the funds of the board.

278 ~~(m)~~ (l) Each member of the board shall receive the same
279 per diem and travel allowance as is paid by law to state
280 employees for each day's attendance at the board meetings



281 incurred in the discharge of his or her duties as a board
282 member in addition to any daily compensation or allowance, if
283 any, as may be provided by the board, in ~~such~~ any amount as
284 may be determined by the board. Any member of the board
285 engaged in duties under the direction of the board shall
286 receive the per diem and travel expenses and daily
287 compensation or allowance authorized by the board.

288 ~~(k)~~ (m) Nothing in this chapter shall limit the rights
289 of affected parties to appeal decisions of the board with
290 regard to rules adopted pursuant to this chapter.

291 ~~(e)~~ (n) Participation by the state in the compact
292 provided in Article 7 shall be subject to review and
293 evaluation by the Sunset Committee pursuant to Chapter 20 of
294 Title 41, with the first review occurring in 2024. The Sunset
295 Committee shall determine whether continued participation in
296 the compact is in the best interests of the board or the
297 licensees of the board. The Sunset Committee shall also review
298 and evaluate participation in the compact within one year
299 after the occurrence of any of the following:

300 (1) The annual assessment charged the board for
301 participation in the compact exceeds one-half of one percent
302 of the gross revenue of the board for the fiscal year
303 immediately preceding the levying of the annual assessment.

304 (2) The state, the board, or members or employees of
305 the state or board are named defendants in a suit brought in
306 any court of law or equity by the Interstate Commission of
307 Nurse Licensure Compact Administrators pursuant to Article 7.

308 (3) The passage of a resolution by either house of the



HB234 Enrolled

309 Legislature requesting review pursuant to ~~subsection (d) of~~
310 Section 41-20-3 (d)."

311 Section 2. This act shall become effective on October
312 1, 2024.



HB234 Enrolled

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Speaker of the House of Representatives

President and Presiding Officer of the Senate

House of Representatives

I hereby certify that the within Act originated in and was passed by the House 02-Apr-24 as amended.

John Treadwell
Clerk

Senate

25-Apr-24

Passed

APPROVED

5-7-2024

TIME

1:00 pm

GOVERNOR

Alabama Secretary Of State

Act Num....: 2024-250
Bill Num....: H-234

Recv'd 05/07/24 01:28pmKCW

ENGROSSED 234

SPONSOR

Bedsole

CO-SPONSORS

Shirey
Rigsby
Wood (R)
Rafferty

HOUSE ACTION

I HEREBY CERTIFY THAT THE RESOLUTION AS REQUIRED IN SECTION C OF ACT NO. 81-889 WAS ADOPTED AND IS ATTACHED TO THE BILL, H.B. 234
YEAS 102 NAYS 0
JOHN TREADWELL, Clerk

I HEREBY CERTIFY THAT THE NOTICE & PROOF IS ATTACHED TO THE BILL, H.B. _____ AS REQUIRED IN THE GENERAL ACTS OF ALABAMA, 1975 ACT NO. 919.
JOHN TREADWELL, Clerk

CONFERENCE COMMITTEE
House Conferees _____

SENATE ACTION

HEALTH
SR

DATE: 4-4 2024
RD 1 RFD

This Bill was referred to the Standing Committee of the Senate on Healthcare and was acted upon by such Committee in session and is by order of the Committee returned therefrom with a favorable report w/amend(s) _____ w/sub _____ by a vote of yeas 10 nays 0 abstain _____ this 10th day of April 20 24
~~_____~~ Chair

DATE: 4-11 2024
RF FAU RD 2 CAL

DATE: _____ 20____
RE-REFERRED RE-COMMITTED
Committee _____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, HB 234
YEAS 33 NAYS 0
PATRICK HARRIS,
Secretary

FURTHER SENATE ACTION (OVER)



1 SB137

2 HUUG363-2

ACT #2024 - 361

3 By Senator Gudger

4 RFD: Fiscal Responsibility and Economic Development

5 First Read: 20-Feb-24



SB137 Enrolled



1 Enrolled, An Act,

2
3 Relating to the Alabama Sunset Law; to terminate the
4 existence and functioning of the Alabama Board of Massage
5 Therapy; to create the Alabama Massage Therapy Licensing Board
6 pursuant to a new Chapter 43A, Title 34, Code of Alabama 1975;
7 to provide for the membership and organization of the new
8 board under the initial temporary oversight of the Board of
9 Nursing; to provide for the transfer of all powers, duties,
10 rights, records, and property from the former board to the new
11 board; to temporarily extend the renewal date of certain
12 licenses and registrations issued by the former board; and to
13 repeal Chapter 43, Title 34, Code of Alabama 1975, providing
14 for the Alabama Board of Massage Therapy.

15 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

16 Section 1. Pursuant to the Alabama Sunset Law, the
17 Sunset Committee recommends the termination of the Alabama
18 Board of Massage Therapy, with the additional recommendation
19 for statutory change as set out in Sections 2(a) and 3.

20 Section 2. (a) The existence and functioning of the
21 Alabama Board of Massage Therapy, created and functioning
22 pursuant to Chapter 43 of Title 34, Code of Alabama 1975, is
23 terminated, and those code sections are expressly repealed.

24 (b) (1) Commencing on June 1, 2024, the Alabama Board of
25 Massage Therapy shall be reconstituted as the Alabama Massage
26 Therapy Licensing Board and all powers, duties, and functions
27 of the new board shall be temporarily assumed and performed by
28 the Board of Nursing pending the reconstitution of the Alabama



SB137 Enrolled

29 Massage Therapy Licensing Board as provided in Section 3.
30 Additionally, commencing on June 1, 2024, the Executive
31 Officer of the Board of Nursing shall temporarily assume and
32 perform all duties, responsibilities and functions of the
33 position of an executive officer for the Alabama Massage
34 Therapy Licensing Board, as defined in Section 34-43A-2,
35 pending the appointment of an executive officer by the new
36 Alabama Massage Therapy Licensing Board.

37 (2) During the temporary transfer commencing on June 1,
38 2024, all personnel of the Board of Nursing may act as agents
39 of and may perform those duties, responsibilities, and
40 functions determined necessary by the Executive Officer of the
41 Board of Nursing to support the Alabama Massage Therapy
42 Licensing Board, created in Section 3, until those duties,
43 responsibilities, and functions temporarily assumed by the
44 Executive Officer of the Board of Nursing pursuant to
45 subdivision (1) are transferred to the executive officer of
46 the newly reconstituted Alabama Massage Therapy Licensing
47 Board pursuant to subdivision (3). During the temporary
48 transfer the Board of Nursing, on behalf of the Alabama
49 Massage Therapy Licensing Board, may employ and train
50 individuals subject to the state Merit System for the Alabama
51 Massage Therapy Licensing Board.

52 (3) All powers, duties, and functions temporarily
53 assumed and performed by the Board of Nursing and the
54 Executive Officer of the Board of Nursing pursuant to
55 subdivision (1), shall be transferred to the Alabama Massage
56 Therapy Licensing Board, as created by Chapter 43A of Title



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57 34, Code of Alabama 1975, on or before October 1, 2026.

58 Section 3. Chapter 43A is added to Title 34 of the Code
59 of Alabama 1975, to read as follows:

60 §34-43A-1. Short title.

61 This chapter shall be known and may be cited as the
62 Alabama Massage Therapy Licensing Act.

63 §34-43A-2. Definitions.

64 For purposes of this chapter, the following terms have
65 the following meanings:

66 (1) ADVERTISE. To distribute a card, flier, sign, or
67 device to any individual or entity, or allow any sign or
68 marking on any building, radio, television, or to publicize by
69 any other means designed to attract public attention.

70 (2) BOARD. The Alabama Massage Therapy Licensing Board
71 created by this chapter.

72 (3) EXAMINATION. The National Certification Board for
73 Therapeutic Massage and Bodywork Examination or the Federation
74 of State Massage Therapy Board's Massage and Bodywork
75 Licensing Examination administered by an independent agency or
76 another nationally or internationally accredited examination
77 administered by an independent agency approved by the board,
78 or state examination administered by the board. The national
79 examination shall be accredited by the National Commission for
80 Certifying Agencies. The board may also administer a written,
81 oral, or practical examination.

82 (4) EXECUTIVE DIRECTOR. The Executive Director of the
83 Alabama Massage Therapy Licensing Board.

84 (5) LICENSE. The credential issued by the board which



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35 allows the holder to engage in the safe and ethical practice
36 of massage therapy.

37 (6) MASSAGE THERAPIST. An individual licensed pursuant
38 to this chapter who practices or administers massage therapy
39 or related touch therapy modalities to a patron for
90 compensation.

91 (7) MASSAGE THERAPY ESTABLISHMENT. A site, premises, or
92 business where massage therapy is practiced by a massage
93 therapist.

94 (8) MASSAGE THERAPY INSTRUCTOR. A massage therapist who
95 is approved by the board to teach the practice of massage
96 therapy.

97 (9) MASSAGE THERAPY or RELATED TOUCH THERAPY
98 MODALITIES. a. The mobilization of the soft tissue which may
99 include skin, fascia, tendons, ligaments, and muscles, for the
100 purpose of establishing and maintaining good physical
101 condition.

102 b. The term includes effleurage, petrissage,
103 tapotement, compression, vibration, stretching, heliotherapy,
104 superficial hot and cold applications, topical applications,
105 or other therapy that involves movement either by hand,
106 forearm, elbow, or foot, for the purpose of therapeutic
107 massage, and any massage, movement therapy, massage
108 technology, myotherapy, massotherapy, oriental massage
109 techniques, structural integration, acupressure, or polarity
110 therapy.

111 c. The term massage therapy may include the external
112 application and use of herbal or chemical preparations and



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113 lubricants including, but not limited to, salts, powders,
114 liquids, nonprescription creams, cups, mechanical devices such
115 as T-bars, thumpers, body support systems, heat lamps, hot and
116 cold packs, salt glow, steam cabinet baths, or hydrotherapy.

117 d. The term does not include laser therapy, microwave,
118 injection therapy, manipulation of the joints, or any
119 diagnosis or treatment of an illness that normally involves
120 the practice of medicine, chiropractic, physical therapy,
121 podiatry, nursing, midwifery, occupational therapy,
122 veterinary, acupuncture, osteopathy, orthopedics, hypnosis, or
123 naturopathics.

124 (10) MASSAGE THERAPY SCHOOL. A school, approved by the
125 board, where massage therapy is taught and which is one of the
126 following:

127 a. If located in Alabama, approved by the board as
128 meeting the minimum established standards of training and
129 curriculum as determined by the board.

130 b. If located outside of Alabama, recognized by the
131 board and by a regionally recognized professional accrediting
132 body.

133 c. A postgraduate training institute accredited by the
134 Commission on Massage Therapy Accreditation.

135 (11) SEXUALLY-ORIENTED BUSINESS. A sex parlor, massage
136 parlor, nude studio, modeling studio, love parlor, adult
137 bookstore, adult movie theater, adult video arcade, adult
138 motel, or other commercial enterprise which has the offering
139 for sale, rent, or exhibit, or the exhibit of, items or
140 services intended to provide sexual stimulation or sexual



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141 gratification to the patron.

142 (12) STUDENT. Any individual who is enrolled in a
143 massage therapy school.

144 §34-43A-3. Regulated activities.

145 Except as specifically provided by this chapter, no
146 individual may do any of the following unless licensed
147 pursuant to this chapter:

148 (1) Advertise that he or she performs massage therapy
149 or related touch therapy modalities.

150 (2) Hold himself or herself out to the public as a
151 massage therapist, using any name or description denoting
152 himself or herself as a massage therapist, or purporting to
153 have the skills necessary to perform massage therapy.

154 (3) Practice massage therapy.

155 §34-43A-4. Exemptions.

156 (a) The following individuals, offices, and
157 establishments are exempt from this chapter:

158 (1) A student who is rendering massage therapy services
159 under the supervision of a massage therapy instructor, or any
160 other supervisory arrangement recognized and approved by the
161 board including, but not limited to, a temporary permit. A
162 student shall be designated by title clearly indicating his or
163 her training status.

164 (2) A qualified member of another profession who is
165 licensed and regulated under state law while in the course of
166 rendering services within the scope of his or her license,
167 provided that the individual does not represent himself or
168 herself as a massage therapist.



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169 (3) An individual providing massages to his or her
170 immediate family.

171 (4) An individual offering massage therapy instruction
172 who is visiting from another state, territory, or country,
173 provided that the individual is licensed or registered as
174 required in his or her place of residence. A visiting
175 instructor may teach continuing education courses in this
176 state for up to 100 hours per year without being licensed by
177 the board. A visiting instructor who teaches continuing
178 education courses in this state for 100 hours or more per year
179 is required to be licensed by the board.

180 (5) Members of the Massage Emergency Rescue Team
181 (MERT), or any other nationally or internationally recognized
182 disaster relief association, who practice massage therapy in
183 this state only during a time declared by the Governor or the
184 Legislature to be a city, county, or state emergency. These
185 therapists may work in this state for a period of time
186 approved by the board.

187 (6) A Native American healer using traditional healing
188 practices. A Native American healer who applies to the board
189 for a massage therapist license shall comply with all
190 licensing requirements.

191 (7) An individual acting under the supervision of a
192 physician, a physical therapist, or a chiropractor within the
193 scope of his or her license, provided that the individual does
194 not represent himself or herself as a massage therapist.

195 (8) The office of a chiropractor, physician, or
196 physical therapist which employs or contracts with a massage



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197 therapist who is exempt from an establishment license.

198 (b) Nothing in this chapter shall be construed to
199 authorize massage therapists to administer, dispense, or
200 prescribe drugs, or engage in the practice of medicine in any
201 manner including, but not limited to, nutrition, diagnosing or
202 prescribing drugs for mental, emotional, or physical disease,
203 illness, or injury.

204 §34-43A-5. Alabama Massage Therapy Licensing Board.

205 (a)(1) There is created the Alabama Massage Therapy
206 Licensing Board. The purpose of the board is to protect the
207 health, safety, and welfare of the public by ensuring that
208 massage therapists, massage therapy schools, and massage
209 therapy instructors meet prescribed standards of education,
210 competency, and practice. To accomplish this mission, the
211 board shall establish standards to ensure completion of all
212 board functions in a timely and effective manner and to
213 provide open and immediate access to all relevant public
214 information. The board shall communicate its responsibilities
215 and services to the public as part of its consumer protection
216 duties. The board shall develop and implement a long range
217 plan to ensure effective regulation and consumer protection.

218 (2) All rights, duties, records, property, real or
219 personal, and all other effects existing in the name of the
220 Alabama Board of Massage Therapy, formerly created and
221 functioning pursuant to Chapter 43, or in any other name by
222 which that board has been known, shall continue in the name of
223 the Alabama Massage Therapy Licensing Board. Any reference to
224 the former Alabama Board of Massage Therapy, or any other name



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225 by which that board has been known, in any existing law,
226 contract, or other instrument shall constitute a reference to
227 the Alabama Massage Therapy Licensing Board as created in this
228 chapter. All actions of the former Alabama Board of Massage
229 Therapy or the executive director of the former board done
230 prior to June 1, 2024, are approved, ratified, and confirmed.

231 (3) The status of any individual or entity properly
232 licensed, accredited, or registered by the former Alabama
233 Board of Massage Therapy on June 1, 2024, shall continue under
234 the jurisdiction of the Alabama Massage Therapy Licensing
235 Board. Any license, accreditation, or registration subject to
236 renewal on or before October 1, 2024, pursuant to this chapter
237 may be temporarily extended by six months unless and until
238 otherwise provided by rule of the board.

239 (b) (1) The board shall consist of the following nine
240 members:

241 a. Three active licensees appointed by the Governor.

242 b. Two active licensees appointed by the Lieutenant
243 Governor and one at-large member appointed by the Lieutenant
244 Governor.

245 c. Two active licensees appointed by the Speaker of the
246 House of Representatives and one at-large member appointed by
247 the Speaker of the House of Representatives.

248 (2) The seven active massage therapist licensee members
249 of the board shall be appointed so that not more than one
250 active licensee member from each United States Congressional
251 District in the state is appointed to serve at the same time.
252 The two members appointed from the state at large shall have



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253 never been licensed as massage therapists nor have had any
254 direct financial interest in the massage therapy profession.
255 One of the at-large members shall have extensive knowledge of
256 sex trafficking and related law enforcement efforts to defeat
257 sex trafficking. The at-large member appointed by the
258 Lieutenant Governor and the at-large member appointed by the
259 Speaker of the House of Representatives shall be appointed
260 from a list of three names each provided by the Minority
261 Leader of the Senate and the Minority Leader of the House of
262 Representatives, respectively. The appointing authorities
263 shall coordinate their appointments to assure the board
264 membership is inclusive and reflects the racial, gender,
265 geographic, urban, rural, and economic diversity of the state.

266 (3) The members initially appointed to the board shall
267 be appointed not later than July 1, 2024. Each board member
268 shall be selected upon personal merit and qualifications, not
269 per membership or affiliation with an association. Each board
270 member shall be a citizen of the United States and a resident
271 of this state for two years immediately preceding appointment.
272 No member of the board shall serve more than two full
273 consecutive terms.

274 (c) Of the initial nine appointees to the board, three
275 members shall be appointed for terms of two years, three
276 members shall be appointed for terms of three years, and three
277 members shall be appointed for terms of four years as
278 determined by lottery. Thereafter, successors shall be
279 appointed for terms of four years, each term expiring on June
280 30.



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281 (d) Vacancies on the board occurring prior to the
282 expiration of a term shall be filled by the original
283 appointing authority within 30 days after the vacancy, to
284 serve for the remainder of the unexpired term. Each member of
285 the board shall serve until his or her successor has been duly
286 appointed and qualified.

287 (e) The board shall hold its first meeting within 30
288 days after the initial members are appointed. At the first
289 meeting, and annually thereafter in the month of October, the
290 board shall elect a chair and a vice chair from its
291 membership. The board shall hold two biannual meetings for the
292 purpose of reviewing license applications. The board may hold
293 additional meetings at the discretion of the chair and four
294 members of the board. A quorum of the board shall be a
295 majority of the current appointed board members. Upon the
296 written request of any individual, submitted to the board at
297 least 24 hours in advance of a scheduled meeting, the meeting
298 shall be recorded electronically, and a copy of the recording
299 shall be made available, upon request, for 30 calendar days
300 following the date of the recording.

301 (f) Board members shall not receive compensation for
302 their services, but shall receive the same per diem and
303 allowance as provided to state employees for each day the
304 board meets and conducts business.

305 (g) (1) Commencing on September 30, 2026, the board may
306 employ, and at its pleasure discharge, an executive director
307 in the unclassified service, officers, and employees subject
308 to the state Merit System as necessary to implement this



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309 chapter.

310 (2) When necessary, the board may retain outside
311 counsel who satisfies the qualifications required of a deputy
312 attorney general.

313 (h) An affirmative vote of a majority of the members of
314 the board shall be required to grant, suspend, or revoke a
315 license to practice massage therapy or a license to operate a
316 massage therapy establishment.

317 (i) The board shall be financed only from income
318 accruing to the board from fees, licenses, other charges and
319 funds collected by the board, and any monies that are
320 appropriated to the board by the Legislature.

321 (j) A board member may be removed at the request of the
322 board for misfeasance, malfeasance, neglect of duty,
323 commission of a felony, incompetence, permanent inability to
324 perform official duties, or failing to attend two consecutive
325 properly noticed meetings within a one-year period.

326 (k) Members of the board are immune from liability for
327 all good faith acts performed in the execution of their duties
328 as members of the board.

329 (l) Appointees to the board shall take the
330 constitutional oath of office and shall file the oath in the
331 office of the Governor before undertaking any duties as a
332 board member. Upon receiving the oath, the Governor shall
333 issue a certificate of appointment to each appointee.

334 §34-43A-6. Powers and duties of board.

335 (a) The board shall do all of the following:

336 (1) Qualify applicants to take the licensing



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337 examination and issue licenses to successful applicants.

338 (2) Adopt a seal and affix the seal to all licenses
339 issued by the board. All licenses shall be on pre-printed,
340 sequentially numbered certification forms.

341 (3) Create application forms for examination and
342 licensing and assess and collect fees pursuant to this
343 chapter.

344 (4) Maintain a complete record of all massage
345 therapists and annually prepare a roster of the names and
346 addresses of those licensees. A copy of the roster shall be
347 provided to any individual upon request and the payment of a
348 fee established by the board in an amount sufficient to cover
349 the costs of publication and distribution.

350 (5) Provide for the investigation of any individual who
351 is suspected of violating this chapter.

352 (6) Adopt and revise rules as necessary to implement
353 this chapter pursuant to the Administrative Procedure Act. All
354 administrative rules of the former Alabama Board of Massage
355 Therapy existing on June 1, 2024, which reference Chapter 43,
356 unless in conflict with existing law, shall remain in effect
357 as rules of the Alabama Massage Therapy Licensing Board until
358 amended or repealed by that board.

359 (7) Provide a copy of this chapter, upon request, to
360 any licensee or applicant for a license.

361 (8) By rule, require massage therapists, massage
362 therapy establishments, and massage therapy schools to carry
363 professional and general liability insurance with an "A" rated
364 or better insurance carrier in the amount of at least one



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365 million dollars (\$1,000,000). Proof of coverage shall be
366 provided to the board upon request.

367 (9) Perform other functions necessary and proper for
368 the performance of official duties.

369 (b) The board may do any of the following:

370 (1) Accept or deny the application of any individual
371 applying for a license as a massage therapist upon an
372 affirmative vote of a majority of the board.

373 (2) By rule, establish criteria for certifying massage
374 therapy instructors.

375 (3) Adopt an annual budget and authorize necessary
376 expenditures from fees and other available appropriations. The
377 expenditures of the board may not exceed the revenues of the
378 board in any fiscal year.

379 (4) Adopt a code of ethics.

380 (5) Provide for the inspection of the business premises
381 of any licensee during normal business hours, upon complaint.

382 (6) Establish a list of approved massage therapy
383 schools.

384 §34-43A-7. License required; sexually-oriented
385 businesses; limitations on advertising or offers of service.

386 (a) No individual may perform the duties of a massage
387 therapist unless he or she holds a valid license issued by the
388 board.

389 (b) A massage therapist may not perform massage therapy
390 for a sexually-oriented business, and shall be subject to all
391 sections of Article 3 of Chapter 12 of Title 13A.

392 (c) A massage therapist may not advertise or offer to



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393 perform services outside the scope of his or her expertise,
394 experience, and education for any client who is ill or has a
395 physical dysfunction, unless the services are performed in
396 conjunction with a licensed physician, physical therapist, or
397 chiropractor.

398 (d) A massage therapist or massage therapy
399 establishment may not advertise or offer to perform services
400 on any sexually explicit website or online platform that
401 promotes prostitution, sexually explicit services, or human
402 trafficking.

403 §34-43A-8. Application for license; licensing
404 requirements.

405 (a) An individual desiring to be licensed as a massage
406 therapist shall apply to the board on forms provided by the
407 board. Unless licensed pursuant to subsection (b), an
408 applicant for a license shall submit evidence satisfactory to
409 the board that he or she has met all of the following
410 requirements:

411 (1)a. Completed a minimum of 650 hours of instruction
412 which shall consist of all of the following:

413 1. One hundred hours of anatomy and physiology,
414 including 35 hours of myology, 15 hours of osteology, 10 hours
415 of circulatory system, and 10 hours of nervous system, with
416 the remaining 30 hours addressing other body systems at the
417 discretion of the massage therapy school.

418 2. Two hundred fifty hours of basic massage therapy,
419 the contradistinctions of massage therapy, and related touch
420 therapy modalities, including a minimum of 50 hours of



421 supervised massage.

422 3. Fifty hours of business, hydrotherapy, first aid,
423 cardiopulmonary resuscitation, professional ethics, and state
424 massage therapy laws.

425 4. Two hundred fifty hours of electives as determined
426 by the massage therapy school.

427 b. The board, by rule, may increase the minimum number
428 of hours of instruction required for a license, not to exceed
429 the number of hours recommended by the National Certification
430 Board for Therapeutic Massage and Bodywork.

431 c. In addition to paragraphs a. and b., to perform
432 therapeutic massage on an animal, a massage therapist shall
433 have also graduated from a nationally approved program and
434 completed at least 100 hours of postgraduate training and
435 education in animal anatomy, pathology, and physiology for the
436 specific type of animal upon which he or she will perform
437 therapeutic massage.

438 (2) Successfully passed a state board exam or a
439 national standardized examination approved by the board. The
440 board may approve other state exams on a case-by-case basis.

441 (3) Completed a criminal history background check
442 pursuant to Section 34-43A-13(c).

443 (4) Paid all applicable fees.

444 (b) Notwithstanding the requirements listed in
445 subdivisions (1) and (2) of subsection (a), the board may
446 license an applicant who is licensed or registered to practice
447 massage therapy in another state if the standards of practice
448 or licensing of that state, at the time the applicant was



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449 originally licensed or registered, were equal to or stricter
450 than the requirements imposed by this chapter. All applicants
451 may be subject to an initial in-person board hearing
452 determined by the board.

453 (c) Upon receipt of an application, the board shall
454 notify the applicant that his or her application is pending
455 and shall also notify the applicant upon the approval or
456 rejection of his or her application. If an application is
457 rejected, the board shall notify the applicant of the reasons
458 for the rejection.

459 §34-43A-9. Licensing of massage therapy establishments;
460 initial inspection.

461 (a) No massage therapy establishment shall operate in
462 this state without a license issued by the board.

463 (b) A sexually-oriented business may not operate as a
464 massage therapy establishment or be licensed by the board
465 pursuant to this chapter.

466 (c) A massage therapy establishment shall contract with
467 or employ only licensed massage therapists to perform massage
468 therapy. Every massage therapist shall be registered with the
469 board and one of them shall be designated as the individual
470 who will ensure that the massage therapy establishment
471 complies with state law and all applicable administrative
472 rules.

473 (d) A massage therapy establishment license is not
474 assignable or transferable.

475 (e) If the holder of a massage therapy establishment
476 license moves the location of the massage therapy



477 establishment without changing either the name or ownership of
478 that massage therapy establishment, the board shall waive the
479 new establishment license fee, if documentation set by rule of
480 the board is approved. This subsection shall not change the
481 expiration date of a massage therapy establishment license.

482 (f) (1) Except as provided in subdivision (2), each
483 applicant for a massage therapy establishment license shall
484 complete a criminal history background check pursuant to rules
485 adopted by the board.

486 (2) An applicant for a massage therapy establishment
487 license, who is a massage therapist and has completed a
488 criminal history background check as required by the board
489 within the preceding two years, is exempt from completing the
490 criminal history background check required in subdivision (1).

491 (g) The physical location of a proposed massage therapy
492 establishment shall be subject to an initial inspection by the
493 board before a massage therapy establishment license is
494 granted to the applicant.

495 (h) If the physical location of a massage therapy
496 establishment has been shut down by the board or by local,
497 state, or federal law enforcement, the physical location is
498 permanently prohibited from being licensed or operating as a
499 massage therapy establishment.

500 §34-43A-10. Application forms; issuance of license;
501 display of license.

502 (a) Applications for licensing and renewal of a license
503 shall be on forms provided by the board and shall be
504 accompanied by the applicable fee. A recent two-by-two inch



505 photograph showing a frontal view of the head and shoulders of
506 the applicant for a massage therapy or therapy instructor
507 license and applicant for a massage therapy establishment
508 license, taken no more than six months earlier, shall be
509 submitted with each application. All documents shall be
510 submitted in English.

511 (b) The board may deny the application of any applicant
512 who refuses to complete a criminal history background check as
513 required by the board and provided in Section 34-43A-13(c).

514 (c) The board shall issue a license, on a pre-printed
515 sequentially numbered form, to each individual who qualifies
516 to be a massage therapist and to each qualified applicant for
517 a massage therapy establishment license. A license issued by
518 the board grants all professional rights, honors, and
519 privileges relating to the practice of massage therapy.

520 (d) Each massage therapist shall display his or her
521 license in the manner specified by the board. Each massage
522 therapy establishment shall prominently post its license, and
523 the license of each massage therapist who practices within the
524 massage therapy establishment, in plain sight at the massage
525 therapy establishment.

526 (e) A license is the property of the board and shall be
527 surrendered upon demand of the board.

528 §34-43A-11. License renewal; reinstatement.

529 (a) With the exception of massage therapy schools,
530 which register annually, each license shall be renewed
531 biennially, on or before the anniversary date, by forwarding
532 to the board a renewal application accompanied by the renewal

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533 fee. Except as provided in Section 34-43A-5(a)(3), any license
534 not renewed biennially on or before the anniversary date shall
535 expire.

536 (b) Each licensee, upon application for renewal of a
537 license, shall do both of the following:

538 (1) Submit evidence of satisfactory completion of the
539 continuing education requirements pursuant to Section
540 34-43A-19.

541 (2) Complete a new criminal history background check
542 pursuant to rules adopted by the board. The board may deny the
543 application for renewal of any licensee who refuses to
544 complete a criminal history background check as required by
545 the board.

546 (c) Licenses are valid for two years from the date of
547 issuance. An individual whose license has expired and who has
548 ceased to practice massage therapy for a period of not longer
549 than five years may have his or her license reinstated upon
550 payment of a reactivation fee, the submission of a renewal
551 application, and evidence satisfactory to the board that the
552 applicant has fulfilled continuing education requirements,
553 completed a criminal history background check as provided in
554 Section 34-43A-13(c), paid the criminal history background
555 check fee, and passed the examination.

556 §34-43A-12. Alabama Massage Therapy Licensing Board
557 Fund.

558 (a) The board, by rule, shall assess and collect all of
559 the following fees not to exceed:

560 (1) One hundred dollars (\$100) for an initial massage

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561 therapist license.

562 (2) One hundred dollars (\$100) for a biennial license
563 renewal postmarked or received at the office of the board on
564 or before the expiration date of the license.

565 (3) One hundred dollars (\$100) for an initial, and
566 fifty dollars (\$50) for any renewal of, a massage therapy
567 establishment license.

568 (4) One hundred fifty dollars (\$150) for an initial
569 registration, and any renewal registration, as a massage
570 therapy school in this state.

571 (5) One hundred dollars (\$100) to register and renew
572 registration as a massage therapy instructor in this state.

573 (6) Seventy-five dollars (\$75) to reactivate an expired
574 license.

575 (7) Twenty-five dollars (\$25) shall be added to any
576 license fees not postmarked or received at the office of the
577 board on or before the expiration date of the license.

578 (8) Ten dollars (\$10) for a duplicate license
579 certificate or a name change on a license certificate. The
580 board may issue a duplicate certificate for each massage
581 therapy establishment on file with the board where the massage
582 therapist practices massage therapy. The board may issue
583 additional duplicate certificates only after receiving a sworn
584 letter from the massage therapist that an original certificate
585 was lost, stolen, or destroyed. The board shall maintain a
586 record of each duplicate certificate issued.

587 (b) Necessary administrative fees may be charged by the
588 board including, but not limited to, reasonable costs for



539 copying, labels, and lists, and the actual costs for
590 completing a criminal history background check. Examination
591 and license fees may be adjusted by rule of the board.

592 (c) Commencing on June 1, 2024, the name of the
593 separate special revenue trust fund in the State Treasury
594 known as the Alabama Board of Massage Therapy Fund shall be
595 renamed and then known as the Alabama Massage Therapy
596 Licensing Board Fund. All receipts collected by the board
597 under this chapter shall be deposited in this fund and used
598 only to carry out this chapter. Receipts shall be disbursed
599 only by warrant of the Comptroller, upon itemized vouchers
600 approved by the chair of the board. No funds shall be
601 withdrawn except as budgeted and allotted according to
602 Sections 41-4-80 to 41-4-96, inclusive, 41-19-1, and 41-19-12,
603 and only in amounts as stipulated in the general
604 appropriations bill or other appropriations bills.

605 §34-43A-13. Complaints; grounds for suspension,
606 revocation, etc., of license; penalties; rulemaking authority.

607 (a) Any individual may file with the board a written
608 complaint regarding an allegation of impropriety by a massage
609 therapist, massage therapy establishment, or other individual.
610 Complaints shall be made in the manner prescribed by the
611 board. Complaints received by the board shall be referred to a
612 standing investigative committee consisting of a board member,
613 the board attorney, and the board investigator. If no probable
614 cause is found, the investigative committee may dismiss the
615 charges and prepare a statement, in writing, of the reasons
616 for that decision.



617 (b) If probable cause is found, the board shall
618 initiate an administrative proceeding. Upon a finding that the
619 licensee has committed any of the following misconduct, the
620 board may suspend, revoke, or refuse to issue or renew a
621 license or impose a civil penalty after notice and opportunity
622 for a hearing pursuant to the Administrative Procedure Act:

623 (1) The license was obtained by means of fraud,
624 misrepresentation, fraudulent transcripts, invalidated exam
625 scores, or concealment of material facts, including making a
626 false statement on an application or any other document
627 required by the board for licensing.

628 (2) The licensee sold or bartered or offered to sell or
629 barter a license for a massage therapist or a massage therapy
630 establishment.

631 (3) The licensee has engaged in unprofessional conduct
632 that has endangered or is likely to endanger the health,
633 safety, and welfare of the public, as defined by the rules of
634 the board.

635 (4) The licensee has been convicted of a felony or of
636 any crime arising out of or connected with the practice of
637 massage therapy.

638 (5) The licensee has violated or aided and abetted in
639 the violation of this chapter.

640 (6) The licensee is adjudicated as mentally incompetent
641 by a court of law.

642 (7) The licensee uses controlled substances or
643 habitually and excessively uses alcohol.

644 (8) The licensee engaged in false, deceptive, or

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645 misleading advertising.

646 (9) The licensee engaged in or attempted to or offered
647 to engage a client in sexual activity, including, but not
648 limited to, genital contact, within the client-massage
649 therapist relationship.

650 (10) The licensee has knowingly allowed the massage
651 therapy establishment to be used as an overnight sleeping
652 accommodation.

653 (11) The licensee had a license revoked, suspended, or
654 denied in any other territory or jurisdiction of the United
655 States for any act described in this section.

656 (12) The applicant or licensee was convicted of
657 impersonating a massage therapist in another jurisdiction.

658 (c) (1) Subsequent to an official complaint, and for
659 other requirements established by this chapter, including for
660 the purpose of determining an applicant's suitability for a
661 license or the renewal of a license to practice massage
662 therapy, the board may request a criminal history background
663 check of the licensee. Each applicant shall submit a complete
664 set of fingerprints and a form, sworn to by the applicant,
665 providing written consent from the applicant for the release
666 of criminal history background check information to the board.

667 (2) The board shall submit the fingerprints and form
668 provided by each applicant to the Alabama State Law
669 Enforcement Agency (ALEA). The applicant may be fingerprinted
670 by ALEA at the time of the form submission. ALEA shall conduct
671 a check of state records and forward the fingerprints to the
672 FBI for a national criminal history background check.



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673 (3) The results of the state and national criminal
674 history background check records shall be returned to the
675 board by ALEA.

676 (4) The board shall reimburse ALEA for conducting
677 criminal history background checks according to the fee
678 schedule adopted by the Alabama Justice Information
679 Commission.

680 (5) Any criminal history background check reports
681 received by the board from ALEA shall be marked confidential
682 and shall not be disclosed or made available for public
683 inspection. All criminal history background check reports
684 received pursuant to this section are specifically excluded
685 from any requirement of public disclosure as a public record.
686 Reports received may only be used for the purposes described
687 in this chapter. All information provided is subject to the
688 rules established by the Alabama Justice Information
689 Commission and Public Law 92-544. An individual that uses a
690 criminal history background check report for purposes other
691 than those provided in this chapter may be subject to criminal
692 charges under Sections 41-9-601 and 41-9-602.

693 (d) An individual governed by this chapter, who has a
694 reasonable belief that another massage therapist has violated
695 this chapter, shall inform the board in writing within 30
696 calendar days after the date the individual discovers this
697 activity. Upon finding that an individual has violated this
698 subsection by not informing the board as required, the board
699 may do any of the following:

700 a. Impose an administrative fine of not more than ten



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701 thousand dollars (\$10,000) according to a disciplinary
702 infraction fine schedule adopted by rule of the board.

703 b. Suspend or revoke the individual's license to
704 practice massage therapy.

705 (e) The license of any individual who has been
706 convicted of, or has entered a plea of nolo contendere to, a
707 crime or offense involving prostitution or any other type of
708 sexual offense shall be permanently revoked by the board
709 according to the Administrative Procedures Act.

710 (f) The massage therapy establishment license of any
711 massage therapy establishment wherein an individual has been
712 convicted of, or entered a plea of nolo contendere to, an
713 offense involving prostitution or any other type of sexual
714 offense against a client, or which the board determines is a
715 sexually-oriented business, shall be permanently revoked by
716 the board according to the Administrative Procedures Act.

717 (g) (1) Upon a finding that an individual, who is
718 governed by this chapter, has performed massage therapy
719 without having obtained a license, the board may do any of the
720 following:

721 a. Impose an administrative fine of not more than ten
722 thousand dollars (\$10,000).

723 b. Issue a cease and desist order.

724 c. Petition the circuit court of the county where the
725 act occurred to enforce the cease and desist order and collect
726 the assessed fine.

727 (2) Any individual aggrieved by any adverse action of
728 the board may appeal the action to the Circuit Court of



729 Montgomery County.

730 (h) The board shall present any incident deemed serious
731 misconduct by the board to the local district attorney for
732 review and appropriate legal action.

733 (i) The board may adopt rules to implement and
734 administer this section.

735 §34-43A-14. Use of words massage or bodywork or other
736 advertising descriptions by unlicensed individuals.

737 An individual who does not hold a license as a massage
738 therapist, physical therapist, chiropractor, or athletic
739 trainer, or a license for a massage therapy establishment,
740 shall not use the words massage or bodywork on any sign or
741 other form of advertising describing services performed by the
742 individual or within the establishment. Any advertisement by a
743 massage therapist or massage therapy establishment shall
744 contain the license number of the massage therapist or massage
745 therapy establishment.

746 §34-43A-15. Criminal penalties.

747 Any individual who violates this chapter shall be
748 guilty of a Class C misdemeanor.

749 §34-43A-16. Injunction; civil penalty.

750 (a) In addition to the criminal penalty prescribed by
751 this chapter, the board may seek an injunction against any
752 individual or establishment in violation of this chapter.

753 (b) In an action for an injunction, the board may
754 demand and recover a civil penalty of fifty dollars (\$50) per
755 day for each violation, reasonable attorney fees, and court
756 costs.



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757 §34-43A-17. Construction with other regulations.

758 (a) Except as otherwise provided in subsection (b),
759 this chapter shall supersede any regulation adopted by a
760 political subdivision of the state related to the licensing or
761 regulation of massage therapists and massage therapy
762 establishments.

763 (b) This section shall not affect:

764 (1) Local regulations relating to zoning requirements
765 or occupational license taxes pertaining to massage therapists
766 and massage therapy establishments.

767 (2) Local regulations that do not relate to the
768 practice of massage therapy by qualified individuals.

769 (c) A county, or a municipality within its
770 jurisdiction, may regulate individuals licensed pursuant to
771 this chapter. Regulation shall be consistent with this chapter
772 and shall not supersede this chapter. This section shall not
773 be construed to prohibit a county or municipality from
774 regulating individuals not licensed pursuant to this chapter.

775 §34-43A-18. Massage therapy schools; instructors.

776 (a) To be approved by the board, a massage therapy
777 school shall meet all of the following requirements:

778 (1) Submit to the board a completed application
779 prescribed by the board and the registration fee specified in
780 Section 34-43A-12.

781 (2) Provide documentation of a curriculum which
782 includes a minimum number of required hours of instruction in
783 the subjects required by Section 34-43A-8.

784 (3) Register annually with the board by submitting a



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735 renewal form, the renewal fee specified in Section 34-43A-12,
736 and a then current curriculum and list of active massage
737 therapy instructors teaching at the school.

738 (4) Commencing on October 1, 2025, submit proof to the
739 board of registration as an assigned school through the
790 National Certification of Therapeutic Massage and Bodywork
791 Board (NCBTMB).

792 (b) Except as provided in Section 34-43A-4(a)(4), every
793 massage therapy instructor teaching a course in massage
794 therapy at a massage therapy school located in this state
795 shall be licensed by the board as a massage therapist and
796 registered as a massage therapy instructor. Instructors who
797 are not teaching massage therapy do not need to be registered.
798 An adjunct massage therapy instructor shall be dually licensed
799 in the state where he or she resides or be nationally
800 certified, or both.

801 (c) An applicant for registration as a massage therapy
802 instructor shall satisfy all of the following requirements:

803 (1) Be currently licensed as a massage therapist in
804 this state.

805 (2) Submit to the board a completed application as
806 prescribed by the board and the one-time application fee
807 specified in Section 34-43A-12.

808 (3) Submit documentation of three years of experience
809 in the practice of massage therapy. The documentation may be
810 considered by the board on a case-by-case basis.

811 §34-43A-19. Sunset provision; continuing education.

812 (a) The board is subject to the Alabama Sunset Law of



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813 1981, and is classified as an enumerated agency pursuant to
814 Section 41-20-3. The board shall automatically terminate on
815 October 1, 2026, and every four years thereafter, unless
816 continued pursuant to the Alabama Sunset Law.

817 (b) The board shall adopt a program of continuing
818 education for licensees which shall be a requisite for the
819 renewal of licenses issued pursuant to this chapter and not
820 exceed the requirements of a board-approved nationally
821 recognized board certification organization such as the
822 National Certification Board for Therapeutic Massage and
823 Bodywork.

824 Section 4. The Legislature concurs in the
825 recommendations of the Sunset Committee as provided in
826 Sections 1, 2, and 3.

827 Section 5. This act shall become effective June 1,
828 2024.

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President and Presiding Officer of the Senate

Speaker of the House of Representatives

SB137

Senate 29-Feb-24

I hereby certify that the within Act originated in and passed the Senate, as amended.

Senate 09-May-24

I hereby certify that the within Act originated in and passed the Senate, as amended by Conference Committee Report.

Patrick Harris,
Secretary.

House of Representatives

Passed: 02-May-24, as amended.

House of Representatives

Passed: 09-May-24, as amended by Conference Committee Report.

By: Senator Gudger

APPROVED

5/15/2024

TIME

11:15 am

GOVERNOR

Alabama Secretary Of State

Act Num....: 2024-361
Bill Num....: S-137

Recv'd 05/15/24 01:59pmKCW

ENGROSSED

Senate Bill No. 137

SENATE ACTION

SPONSOR
Gudger
CO-SPONSORS

- 2 _____ 19 _____
- 3 _____ 20 _____
- 4 _____ 21 _____
- 5 _____ 22 _____
- 6 _____ 23 _____
- 7 _____ 24 _____
- 8 _____ 25 _____
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- 13 _____ 30 _____
- 14 _____ 31 _____
- 15 _____ 32 _____
- 16 _____ 33 _____
- 17 _____ 34 _____
- 18 _____ 35 _____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 137.

yeas 34 nays 0 abstain 0

PATRICK HARRIS,
Secretary

I hereby certify that the notice & proof is attached to the Bill, SB _____ as required in the General Acts of Alabama, 1975 Act No. 919.

PATRICK HARRIS,
Secretary

CONFERENCE COMMITTEE

Senate Conferees _____

HOUSE ACTION

DATE: 3-5 2024

RD 1 RFD BAU

REPORT OF STANDING COMMITTEE

This bill having been referred by the House to its standing committee on BAU was acted upon by such committee in session, and returned therefrom to the House with the recommendation that it be Passed, w/amend(s) _____ w/sub 1.

This 25th day of April, 2024

[Signature] chairperson

DATE: _____ 20__

RF _____ RD 2 CAL

DATE: _____ 20__

RE-REFERRED RE-COMMITTED

Committee _____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 137.

YEAS 45 NAYS 0

JOHN TREADWELL,
Clerk

Appendix III - Professional Services by Vendor

	FY 2020	FY 2021	FY 2022	FY 2023
<u>Administrative Services</u>				
<i>Advertising</i>				
AT&T	\$ 11.48	\$ 19.68	\$ 18.04	\$ 19.68
Arthur L. Davis Publishing Agency Inc.	4,672.82	1,607.77	5,238.45	2,500.00
Legislative Services Agency	4,010.00	6,980.00	6,370.00	3,120.00
<i>Education & Training</i>				
Natl Council St Bds Of Nursing	2,100.00			
Healthcare Plus Solutions Group, LLC				10,000.00
<i>Food Services</i>				
PCH Hotels & Resorts Inc			19,062.50	6,342.71
<i>Housekeeping/Custodial/Building and Grounds</i>				
RSA Expense Fund		1,380.00		
<i>Information and Research</i>				
ALRRS, LLC	1,999.00			
US Dept Of Homeland Security	315.00	328.50	275.00	306.50
<i>Inter-departmental Professional Services</i>				
Legislative Services Agency	500.00	800.00	600.00	300.00
Alabama State Law Enforcement Agency		1,032.46	1,719.24	1,894.23
Department of Finance			3,571.20	4,630.44
<i>Mailing Services</i>				
Department of Finance	378.50	362.45	391.30	391.96
<i>Moving Services</i>				
Motivated Enterprises INC.	770.00	560.00		
<i>Personnel Department Services</i>				
	20,429.00	22,215.00	25,323.00	24,648.00
<i>Photographic Services</i>				
Fouts Commercial Photography	535.00	995.00	1,645.00	1,545.00

	FY 2020	FY 2021	FY 2022	FY 2023
<i>Sanitation Services</i>				
Gilmore Moving and Storage, Inc.	544.69	665.66	874.91	918.00
Total Administrative Services	36,265.49	36,946.52	65,088.64	56,616.52
<u>Legal Services</u>				
<i>Attorney Services</i>				
Attorney General's Office		1,725.00	1,215.00	540.00
Dorman Walker	754.19	390.00	480.76	4,653.73
<i>Hearing Officer Services</i>				
Mark D. Wilkerson	41,921.00	52,263.40	27,372.50	32,169.60
Wilkerson & Bryan, PC				11,937.00
<i>Court Reporting Services</i>				
Baker & Baker Reporting & Video Services, Inc.	7,377.35			
Baker Realtime Reporting & Video	961.50			
Huseby, LLC	4,872.15	22,032.40	4,306.20	
Boggs Reporting & Video LLC			8,668.00	31,293.61
Total Legal Services	55,886.19	76,410.80	42,042.46	80,593.94
<u>Data Processing Services</u>				
<i>Data Processing Personnel Services-Professional</i>				
Critical Components, Inc.	3,038.00	3,140.00	3,302.00	3,366.00
i3 Splash LLC	10,000.00	260,000.00	130,000.00	110,000.00
Liveperson Inc	4,410.00	4,410.00	4,410.00	4,410.00
SHI International Corp.	1,430.84	8,849.11	11,680.18	10,450.15
The University of Alabama	47,829.33	27,381.90	37,474.69	25,947.83
TSA, Inc.			25,962.91	23,386.00
Office Of Information Technology	182,717.03	55,464.82	65,756.42	63,951.51
<i>State Business Systems (SBS)</i>				
Department of Finance	19,171.23	27,674.80	34,306.17	36,125.00
<i>Comptroller Services</i>				
Department of Finance	9,656.87	10,069.86	10,370.22	10,821.00
<i>Finance and IT Planning/Oversight</i>				
Office Information Technology	3,985.48	4,102.67	3,995.42	4,109.82
Total Data Processing Services	282,238.78	401,093.16	327,258.01	292,567.31
Total Professional Services	\$ 374,390.46	\$ 514,450.48	\$ 434,389.11	\$ 429,777.77

Appendix IV: Examination Results by Alabama Educational Institution – Registered Nurses

ADN = Associates Degree in Nursing BSN = Bachelor of Science in Nursing		Calendar Year 2020			Calendar Year 2021			Calendar Year 2022			Calendar Year 2023		
School	Program	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%
Auburn University	BSN	101	100	99.01%	180	176	97.78%	205	204	99.51%	179	179	100.00%
Auburn University of Montgomery	BSN	95	82	86.32%	97	64	65.98%	112	95	84.82%	80	73	91.25%
Bevill State Community College	ADN	199	165	82.91%	171	132	77.19%	168	151	89.88%	167	161	96.41%
Bishop State Community College	ADN	63	42	66.67%	87	39	44.83%	118	58	49.15%	121	95	78.51%
Calhoun State Community College	ADN	146	120	82.19%	200	164	82.00%	139	132	94.96%	192	186	96.88%
Central Alabama Community College	ADN	33	23	69.70%	38	29	76.32%	58	51	87.93%	59	56	94.92%
Chattahoochee Valley Community College	ADN	45	41	91.11%	74	62	83.78%	68	64	94.12%	57	53	92.98%
Coastal Alabama Community College	ADN	172	155	90.12%	162	147	90.74%	176	161	91.48%	207	203	98.07%
J F Drake State Community & Technical College	ADN	7	4	57.14%	18	14	77.78%	31	21	67.74%	87	85	97.70%
Gadsden State Community College	ADN	113	81	71.68%	98	83	84.69%	86	79	91.86%	44	40	90.91%
Jacksonville State University	BSN	148	130	87.84%	165	147	89.09%	178	165	92.70%	161	157	97.52%
Jefferson State Community College	ADN	224	198	88.39%	199	168	84.42%	160	152	95.00%	185	183	98.92%
Lawson State Community College	ADN	36	34	94.44%	38	34	89.47%	36	32	88.89%	42	40	95.24%
Lurleen B Wallace Community College	ADN	38	24	63.16%	56	40	71.43%	61	49	80.33%	73	68	93.15%
Northeast Alabama Community College	ADN	48	40	83.33%	40	29	72.50%	21	20	95.24%	38	35	92.11%
Northwest-Shoals Community College	ADN	59	50	84.75%	64	50	78.13%	65	59	90.77%	73	70	95.89%
Shelton State Community College	ADN	86	71	82.56%	84	67	79.76%	102	94	92.16%	91	90	98.90%
Snead State Community College	ADN	50	37	74.00%	37	26	70.27%	38	31	81.58%	40	37	92.50%
Southern State Community College	ADN	96	86	89.58%	92	82	89.13%	92	88	95.65%	107	105	98.13%
Troy University	ADN	84	69	82.14%	66	54	81.82%	69	62	89.86%	78	72	92.31%
Troy University	BSN	85	78	91.76%	99	81	81.82%	103	98	95.15%	115	115	100.00%
University of Alabama- Birmingham	BSN	282	271	96.10%	301	271	90.03%	277	271	97.83%	349	342	97.99%
University of Alabama- Capstone	BSN	202	198	98.02%	234	227	97.01%	264	262	99.24%	230	229	99.57%
University of Alabama- Huntsville	BSN	173	159	91.91%	144	141	97.92%	127	126	99.21%	116	116	100.00%
University of North Alabama	BSN	110	108	98.18%	106	100	94.34%	98	97	98.98%	105	105	100.00%
University of South Alabama	BSN	306	278	90.85%	287	243	84.67%	306	287	93.79%	346	339	97.98%
University of West Alabama	ADN	23	19	82.61%	27	27	100.00%	38	36	94.74%	40	38	95.00%
Wallace State Community College- Dothan	ADN	119	107	89.92%	117	108	92.31%	152	145	95.39%	135	132	97.78%
Wallace State Community College- Hanceville	ADN	205	187	91.22%	176	165	93.75%	187	177	94.65%	187	184	98.40%
Wallace State Community College- Selma	ADN	57	33	57.89%	45	23	51.11%	54	43	79.63%	48	43	89.58%
Alabama RN Totals		3,405	2,990	87.81%	3,502	2,993	85.47%	3,589	3,310	92.23%	3,752	3,631	96.78%

Appendix IV: Examination Results by Alabama Educational Institution – Licensed Practical Nurses

School	Calendar Year 2020			Calendar Year 2021			Calendar Year 2022			Calendar Year 2023		
	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%	#CAND	#PASS	PASS%
Bevill State Community College	110	108	98.18%	74	72	97.30%	127	125	98.43%	123	120	97.56%
Bishop State Community College	12	11	91.67%	19	16	84.21%	47	38	80.85%	35	32	91.43%
Calhoun State Community College	105	104	99.05%	83	83	100.00%	114	112	98.25%	104	104	100.00%
Central Alabama Community College	18	17	94.44%	25	23	92.00%	27	26	96.30%	51	51	100.00%
Childersburg	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	4	4	100.00%
Coastal Alabama Community College - Pratts Mill	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	5	4	80.00%
Chattahoochee Valley Community College	27	26	96.30%	21	21	100.00%	17	16	94.12%	35	35	100.00%
Coastal Alabama Community College- Southern	11	11	100.00%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Coastal Alabama Community College- Faulkner	7	7	100.00%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Coastal Alabama Community College- Jeff Davis	3	3	100.00%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Coastal Alabama Community College- PN	37	37	100.00%	73	72	98.63%	139	138	99.28%	143	140	97.90%
Enterprise State Communtiy College	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	14	14	100.00%
J F Drake State Community & Technical College	9	9	100.00%	6	5	83.33%	6	5	83.33%	32	27	84.38%
Gadsden State Community College	67	66	98.51%	32	32	100.00%	39	37	94.87%	58	57	98.28%
Lawson State Community College	20	20	100.00%	18	17	94.44%	23	22	95.65%	17	17	100.00%
Lurleen B Wallace Community College	12	9	75.00%	18	15	83.33%	27	24	88.89%	29	29	100.00%
Northeast Alabama Community College	33	33	100.00%	16	15	93.75%	33	32	96.97%	42	42	100.00%
Northwest-Shoals Community College	56	53	94.64%	39	38	97.44%	72	71	98.61%	76	75	98.68%
Reid State Technical College	66	59	89.39%	60	54	90.00%	49	45	91.84%	49	45	91.84%
Shelton State Community College	39	36	92.31%	26	26	100.00%	28	27	96.43%	65	64	98.46%
Southern State Community College	45	43	95.56%	29	29	100.00%	41	41	100.00%	59	59	100.00%
Wallace State Community College- Dothan	90	82	91.11%	111	101	90.99%	60	53	88.33%	87	85	97.70%
Wallace State Community College- Hanceville	63	63	100.00%	74	73	98.65%	98	97	98.98%	109	106	97.25%
Wallace State Community College- Selma	28	19	67.86%	23	19	82.61%	42	33	78.57%	44	41	93.18%
Alabama LPN Totals	811	769	94.82%	673	639	94.95%	947	909	95.99%	1181	1151	97.46%

APPENDIX V: BOARD MEMBERS



Alabama Board of Nursing
Peggy Sellers Benson, RN, MSHA, MSN, NE-BC
Executive Officer

RSA Plaza, Suite 250
770 Washington Ave
Montgomery, AL 36104

www.abn.alabama.gov
(334) 293-5200
1-800-656-5318
Fax (334) 293-5201

Mailing address:
P.O. Box 303900
Montgomery, AL 36130-3900

May 20, 2024

Ms. Charnelle Martin
Examiner of Public Accounts
401 Adams Avenue, Suite 280
Montgomery, AL. 36104

RE: Response to Engagement Letter, Item #2

Dear Ms. Martin,

As requested in the Engagement Letter of May 17, 2024, the specific information you requested regarding the Board of Nursing members and Chief Administration Officer is listed below. The officers are listed followed by the current members. Please let me know if you need additional information.

Name: Victoria Lavender, MSN, RN
City: Helena
Term Expires: 12/31/2026

Name: Janice Seip, CRNA, RN
City: Montgomery
Term Expires: 12/31/2025

Name: Cynthia Louise Buford, LPN
City: Ralph
Term Expires: 12/31/2024

Name: Tochie Lofton, DNP, ACNR-BC, CMSRN, RN
City: Mobile
Term Expires: 12/31/2025

Name: Sabria Danielle Baker, RN
City: Cleveland
Term Expires: 12/31/2027

Name: Louise C. O'Keefe, PhD, CRNP, CNE
City: Madison
Term Expires: 12/31/2027

Name: Kristi Acker, PhD, DNP, CRNP, FAANP
City: Northport
Term Expires: 12/31/2026

Name: Karron Armstrong, LPN
City: Montgomery
Term Expires: 12/31/2026

Name: Cherry Denise Rodgers, LPN
City: Montgomery
Term Expires: 12/31/2027

Name: Sarah (Mandy) Mims, LPN
City: Ralph
Term Expires: 12/31/2025

Name: Deborah Hoover, MSN, FNP, RN
City: Cullman,
Term Expires: 12/31/2025

Name: Clint Witherington
City: Eclectic
Term Expires: 12/31/2025

Name: Gabriel Sapalaran, BSN, RN
City: Birmingham
Term Expires: 12/31/2024

Name: Peggy Sellers Benson, RN, MHSA, MSN, NE-BC
City: Clanton

Sincerely,



Peggy Sellers Benson, RN, MHSA, MSN, NE-BC
Executive Officer

Appendix VI: Board's Response



Alabama Board of Nursing
Peggy Sellers Benson, RN, MSHA, MSN, NE-BC
Executive Officer

RSA Plaza, Suite 250
770 Washington Ave
Montgomery, AL 36104

www.abn.alabama.gov
(334) 293-5200
1-800-656-5318
Fax (334) 293-5201

Mailing address:
P.O. Box 303900
Montgomery, AL 36130-3900

September 3, 2024

Ms. Dixie B. Thomas
Director of Operational Audits
Examiners of Public Accounts
PO Box 302251
Montgomery, Alabama 36130-2251

RE: ABN Response to Significant Issues from Questionnaires

Dear Ms. Thomas:

Thank you for the opportunity to respond to the Significant Issues from Questionnaires identified during the ABN's Sunset Examination. The ABN takes its role seriously in public protection and values the feedback received from the various constituents and stakeholders surveyed by the Examiners of Public Accounts.

Significant Issue 2024-001: Six of the thirteen Board members responded to our survey and the following issues were noted from the responses:

- Two of the six (33%) Board members responding to our survey expressed concerns about the shortage of nurses.
- Two of the six (33%) Board members responding to our survey expressed concerns about the Board of Nursing taking over the Board of Massage Therapy.
- Two of the six (33%) Board members responding to our survey do not think the Board is adequately funded. One of these two Board members further expressed that this was because the Board had taken over operations of the Alabama Board of Massage Therapy.

ABN Response 2024-001:

Regarding the Nursing Shortage

The national nursing shortage remains a significant issue facing the nursing workforce in Alabama. For nearly a decade, the ABN has pursued a number of initiatives to address the nursing shortage and ensure access to care for Alabama patients. Among these initiatives are:

Nurse Licensure Compact – In 2019, the ABN successfully petitioned the Legislature for authorization to join the national Nurse Licensure Compact (NLC). The NLC became operative in Alabama on January 1, 2020, which proved a major boon to our state, as the greater freedom of movement afforded to nurses with multistate licenses provided employers with a greater variety of staffing options to respond to the COVID-19 crisis.

New Healthcare Staffing Roles – During the 2021 Regular Session, the Legislature granted the ABN's request for authorization to begin issuing permits to and regulating two new

healthcare roles – the **Student Nurse Apprentice (SNA)** and the **Medication Assistant, Certified (MAC)**. Each of these roles work under the supervision of licensed nurses to perform specific nursing tasks and free licensed nurses to provide more complex patient care at the bedside. As the titles suggest, MACs, who complete a specified curriculum and are nationally certified, exclusively administer specified medication.

SNAs must be enrolled in a nursing education program and be engaged in a registered apprenticeship through the Alabama Office of Apprenticeship (AOA). The partnership between the ABN, AOA, more than 75 employers, and 18 colleges already has produced concrete results, beyond assistance at the bedside. In fact, employers report substantial reduction in time and expense to orient new nurses completing SNA programs, as they arrive well-prepared to enter the nursing workforce and provide patient care nearly immediately. To date, the ABN has issued over 900 permits to SNAs.

In 2020, preparing for the SNA program, the Board created a new unlicensed role – **Nursing Student Aide** – to perform expanded duties at the bedside under direct delegation of specific tasks from a licensed nurse. Employers and students have taken full advantage of the role, which works similarly to the SNA, though in a less formal arrangement and with a narrower scope of duties.

Most recently, the Board requested and was granted legislative authority to permit and regulate **Nursing Support Technicians – Certified (NST-C)**. This new role, which encompasses more than sixteen titles across the healthcare workforce, will improve patient protection and access to competent care for patients, by ensuring consistency in education, certification, and competency in more than 12,000 vital healthcare workers. Licensure for NST-Cs is voluntary, but the ABN expects substantial participation, as the initiative received high praise from employers throughout the healthcare sector. The ABN will begin issuing NST-C permits on October 1, 2024.

Advanced Practice Education Loan Program – The Loan Repayment Program for Advanced Practice Nursing has been administered by the ABN since it was originally authorized by the Legislature in 2016. As originally enacted, the program provided loans to prospective advanced practice nurses (APNs) in exchange for a commitment to work in a rural area of the state for a period of 18 months per year of loans received. While the program has been successful, it did not address significant challenges in a state where providers are subject to a shortage in both urban and rural areas. In 2023, the ABN successfully requested changes to the program's authorizing legislation, which will now allow participants to work in shortage areas, regardless of their geographical location or population density in the state. The ABN began issuing loans according to the new statutory provisions during FY 2024.

Nursing Educator Loan Program – In 2023, the Legislature also granted the ABN authority to begin administering loan program to assist with education expenses for nurses pursuing graduate degrees to become instructors in nursing education programs. Similar to the APN loan program, this program provides loans to prospective nursing instructors in exchange for a commitment to work as nursing instructors in an Alabama public college or university for two years per year of loans received. The impetus for this program was provided by persistent survey results indicating that Alabama nursing education programs turn away thousands of qualified students every year as a result of insufficient faculty resources. The ABN will begin

issuing loans under this program in FY 2025, the first year in which the Legislature has provided funding.

Advocacy for Staffing Solutions - For the past several years, the ABN has proposed potential creative solutions to facility staffing issues. Specifically, the ABN Executive Officer has delivered more than 30 presentations related to this effort, offering commentary on a variety of possibilities, including alternative shift models and inducements for older nurses to return to work in less physically demanding roles that free full-time staff for care at the bedside, among many other such proposals.

Evolution of the LPN Role – Beginning in 2018, the ABN has reevaluated standards of practice in light of the concept curriculum changes adopted by Alabama Community College System (ACCS) education programs, to allow LPNs to perform more complex skills, such as comprehensive patient assessments, for which they now have appropriate training. A standardized procedure is required prior to implementation.

The ABN Center for Nursing Excellence and the ABN Leadership Institute – In 2021, the ABN initiated the ABN Center for Nursing Excellence, which provides substantial support to the workforce by serving as a repository for demographic data and practice resources and more than 100 hours of continuing education (CE) to nurses throughout the state.

The most significant contribution of the Center for Nursing Excellence has been the ABN Leadership Institute. Developed and released in 2022, the Leadership Institute seeks to improve regulatory knowledge, public protection, and patient care through a series of educational opportunities that are foundational to professional growth and development as a staff nurse and as a nurse leader. The broad curriculum consists of three levels, the individual, team and organizational. The individual level focuses on improved communication to patients, families, peers, the entire care team, and throughout the organization. Each level is instrumental in the growth of future leaders and assists the student in becoming prepared to lead at the organizational level. The leadership institute is not only for nurses and can be accessed for any healthcare staff member seeking to learn and grow professionally.

Regarding Financial Resources and the Alabama Massage Therapy Licensing Board

The May 2024 decision of the Legislature to sunset the Alabama Board of Massage Therapy (ABMT) and reconstitute it as the Alabama Massage Therapy Licensing Board (AMTLB) under the management of the ABN unquestionably has had a significant impact on ABN resources. These effects have primarily been caused by the AMTLB's lack of financial and human resources; it should be noted that the accounts of the AMTLB were approximately \$45,000.00 in the negative on June 1, 2024, when the ABN assumed management of the new entity.

In light of these circumstances, the ABN has been required to commit substantial financial and staff resources to the AMTLB's operations. However, as an exceptionally well-managed agency that practices realistic and responsible budgeting, the ABN has been able to absorb these costs without significant threat to its resources. The ABN's intention is to correct various administrative issues that negatively impact the AMTLB's operational efficiency, with the hope of establishing the new agency as a viable entity by the time the ABN relinquishes management of the AMTLB in 2026.

Significant Issue 2024-002: Registered Nurse and Licensed Practical Nurse licensees who responded to our survey expressed the following concerns:

- Nine of the twenty (45%) Registered Nurses and seven of the sixteen (44%) Licensed Practical Nurses indicated a shortage of nurses as the most significant issue facing their profession.
- Five of the twenty (25%) Registered Nurses and eleven of the sixteen (69%) Licensed Practical Nurses indicated they are not adequately informed of changes to and interpretations of the Board's positions, policies, rules, and law.
- Six of the twenty (30%) Registered Nurses think some of the Board's laws, rules, or policies are an unnecessary restriction on the practice of their profession.
- Seven of the twenty (35%) Registered Nurses do not think mandatory continuing education is necessary.
- Five of the sixteen (31%) Licensed Practical Nurses indicated the rate of pay as the most significant issue facing their profession.

ABN Response 2024-002:

Regarding the Ongoing Nursing Shortage

The ABN continues to work to alleviate the ongoing labor shortage in the manners described above in response to Significant Issue 2024-001.

Regarding Communication

In 2014, recognizing its outsized licensee base, the ABN initiated a robust and proactive Communication Plan to ensure that all licensees and other stakeholders have access to the latest information relevant to nursing and healthcare regulation in the state. This effort continues today, and includes regular newsletters, routine list serv emails to targeted nursing populations as issues of interest arise, and an aggressive social media program, encompassing multiple platforms and boasting more than 15,000 likes and followers. In addition, the ABN website logs more than 6 million visits annually.

Regarding the Restrictiveness of Laws, Rules, and Policies

Over the past decade, the ABN has pursued a policy development regime intended to reduce barriers to practice and to optimize access to the market for licensees and applicants. However, regulatory boards exist to carry out of the Legislature, which has reasonably and responsibly deemed regulation of nursing licensure and practice as essential to ensuring the health and welfare of the public and has established statutes designed to ensure the safe delivery of patient care. Whether implementing new laws and policies or revising existing ones, the ABN strives to choose the least restrictive approach that can reasonably be taken, in light of the Board's obligations to the Nurse Practice Act and to the public.

Continuing Education

The ABN is directed by the Nurse Practice Act to provide continuing education (CE) programs and seminars for licensees. As a matter of reasonable, responsible regulation, the Board requires each licensee to complete a specific curriculum intended to ensure the licensees' knowledge of relevant statutes, rules, and policies. This curriculum must be completed prior to the nurse's first license renewal. In addition, CRNPs and CNMs are required to complete a

curriculum specific to the collaborative practice system required by Alabama law. As these curricula, as well as the required 24 hours of continuing education credit for each biennial license renewal, are specifically designed to facilitate compliance with Alabama law and to ensure safe nursing practice, the Board does not believe that removing these requirements would be advisable.

Regarding Compensation for Nurses

The Board is cognizant of the fact that nursing professionals view rates of pay as a significant issue facing the profession. However, the ABN is not charged with regulating employment arrangements, and this issue falls outside the purview of the agency.

Significant Issue 2024-003: Complainants responding to our survey expressed the following concerns:

- Three of the thirteen (38%) complainants stated the Board did not communicate the results of its investigation into their complaint to them. A review of a sample of the Board's complaint files showed letters of resolution were sent.
- Eight out of thirteen (62%) complainants do not think the Board did everything it could to resolve their complaint.

ABN Response 2024-003

Regarding Communication with Complainants

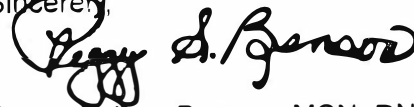
The ABN's processes include sending correspondence to complainants at the outset of the investigation to acknowledge receipt of their complaints and again at the completion of the matter to inform complainants of their disposition. These letters are generated through the Board's license management system (LMS), and the sending of this correspondence is also documented in the LMS. The ABN strives to ensure that complaints are thoroughly investigated and resolved consistent with the law, regulations, and ABN guidelines.

Regarding the ABN's Efforts to Resolve Complaints

The ABN staff regularly interacts with the complainants and at times must explain to complainants the limits of the ABN's jurisdiction. For example, while the ABN may take disciplinary action against a nurse's license, the ABN cannot order restitution for a complainant. The ABN has jurisdiction over licensed nurses, but not the healthcare facilities where nurses are employed. The ABN appreciates the survey feedback from complainants, which will inform our efforts to ensure complainants understand the ABN's role and are confident in their disposition.

Again, thank you for this opportunity to respond. Please feel free to contact me should you have any questions.

Sincerely,



Peggy Sellers Benson, MSN, RN, MSHA, NE-BC
Executive Officer