



HEALTH LICENSING OFFICE

1430 Tandem Ave. NE, Suite 180

Salem, OR 97301-2192

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Website: www.oregon.gov/oha/ph/hlo

**WHO: Health Licensing Office (HLO)
Board of Licensed Dietitians Meeting**

WHEN: 9 a.m. April 16, 2025

WHERE: 1430 Tandem Ave. NE, Suite 180, Salem, OR 97301

What is the purpose of the meeting?

The purpose of the meeting is to conduct Board business. A copy of the agenda is provided with this notice. Go to <https://www.oregon.gov/oha/PH/HLO/Pages/Public-Meetings.aspx> for current meeting information.

May the public attend open sessions during meetings?

Yes, members of the public, interested parties, and the news media are invited to attend all board/council meetings.

May the public attend by way of teleconference (call-in) or videoconference?

Yes, options to attend the meetings by teleconference or videoconference will be available through Microsoft Teams (MS Teams). See the options below:

Ways to attend:	How to attend the meeting: (If not attending in person, follow one of the options below)		
	Join By:	Meeting or Conference ID:	Passcode:
MS Teams Video (audio/video)	Join the meeting now	Meeting ID: 246 081 552 855	3cSRSK
MS Teams Audio (audio only)	Dial (971) 277-2343	Conference ID: 558 682 357 #	

May the public provide comments during the meetings?

Public and interested parties' feedback will be heard if available and stated on the agenda. Public comment is limited to matters listed on the meeting agenda or topics relevant to what this Board has statutory authority to regulate. The chairperson and HLO reserve the right to end a person's comment early and have HLO staff mute the public member if the comment is disruptive or does not pertain to matters listed on

the meeting agenda or topics relevant to what this Board has statutory authority to regulate. Comments will not be allowed that are longer than the time allotted.

Instructions for attending a meeting:

- Email your full name to Josh Page at josh.page@oha.oregon.gov and let him know if you would like to make a public comment.
- The HLO asks that individuals attending through video conference keep their cameras off and their phones or microphones muted during the entire meeting until they are given an opportunity to comment during the Public and Interested Parties Feedback period.
- Representatives of the news media who are interested in attending an executive session are asked to contact Josh Page at josh.page@oha.oregon.gov to make arrangements.

Notification of recording:

The meeting will be recorded. By attending this meeting, you consent to being recorded. The recording may include any information associated with you while attending the meeting, such as your voice, image, name, and phone number. The final video recording of the meeting will be posted to the HLO YouTube Channel. By attending this meeting, you consent to the public display of any information associated with you in the video recording.

What if the board/council enters into executive session?

Prior to entering executive session, the board/council chairperson will announce the nature of and the authority for holding an executive session. Board/council members, designated participants such as staff, and representatives of the news media shall be allowed to attend the executive session. All other audience members are not allowed to attend the executive session. Audience members attending the board/council meeting through video conference will be in an electronic room separate from the board/council during executive session. Audience members may choose to disconnect during executive session and later rejoin the board/council meeting. Anyone joining the meeting while the board/council is in executive session will be placed in an electronic room separate from the board/council and rejoined when the board/council returns to open session. The board/council will return to open session before taking any final action or making any final decisions.

Who do I contact if I have questions or need special accommodations?

If you have any questions about accommodations or need assistance to participate, please contact Josh Page at josh.page@oha.oregon.gov, or by calling (503) 934-0720; or Krissy Pickett at krissy.pickett@oha.oregon.gov, or by calling (503) 378-2093. All relay calls are accepted.

This agenda is subject to change. For the latest information, go to:
<https://www.oregon.gov/oha/PH/HLO/Pages/Public-Meetings.aspx>.

Item for Board Action

Approval of Agenda



Health Licensing Office
Board of Licensed Dietitians Meeting
1430 Tandem Ave. NE, Suite 180, Salem, OR 97301

9 a.m. April 16, 2025

1. Call to Order

2. Items for Board Action

- ◆ Approval of Agenda

3. Reports

- ◆ Director's Report
 - Board Membership, Training, Resources & Membership Information
- ◆ Licensing and Fiscal Statistics
- ◆ Regulatory Statistics
- ◆ Policy
 - Legislature SB 1174 and SB 800
 - Adding a rule around affidavits of licensure

4. Discussion: Whether Illinois' requirements for licensure of dietitians are not less than Oregon's licensing requirements (ORS 691.445(3)(b))

5. Item for Board Action

- ◆ Vote on whether Illinois' licensing requirements are not less than Oregon's licensing requirements.

6. Public/interested Parties' Feedback

7. Other Board Business

Director's Report



Date: April 16, 2025

To: Stakeholders and Interested
Parties

From: Krissy Pickett, Executive Assistant

Subject: Board of Licensed Dietitians Board Member Recruitment

Board Member Background

The Board of Licensed Dietitians (Board) is made up of 7 members including 4 licensed dietitians, 1 physician, and 2 members of the public. Members are appointed by the Governor's Office of Executive Appointments based on qualifications set forth in Oregon Revised Statute (ORS) 691.485, experience and demographics, to ensure an accurate representation of the profession and the state of Oregon.

Recruitment Process

The Health Licensing Office (HLO) utilizes licensing databases, interested parties contact lists, press releases and professional/community outreach to fill vacant board member positions. Applications are reviewed by the Governor's Office monthly and qualified candidates are notified of their appointment status.

Current Board Membership

Board Member/Position	Current Term	Current Term Expiration	Reappointment Status
Yulia Brockdorf (Chair) Dietitian	2 nd Term	4/20/2025	Cannot Reappoint
Jessie Pavlinac Dietitian	1 st Term	6/29/2026	Can Reappoint
Kimberly Queen Dietitian	1 st Term	4/30/2028	Can Reappoint
Danika Ofelt Dietitian	1 st Term	3/28/2027	Can Reappoint
Russ Cagle Public Member	2 nd Term	5/31/2025	Cannot Reappoint

Graham McPartland Public Member	1 st Term	4/09/2028	Can Reappoint
VACANT Physician			

For additional information regarding board member appointments or the application process, please contact Krissy Pickett at krissy.pickett@oha.oregon.gov or (503) 378-2093.

Licensing and Fiscal Statistical Reports



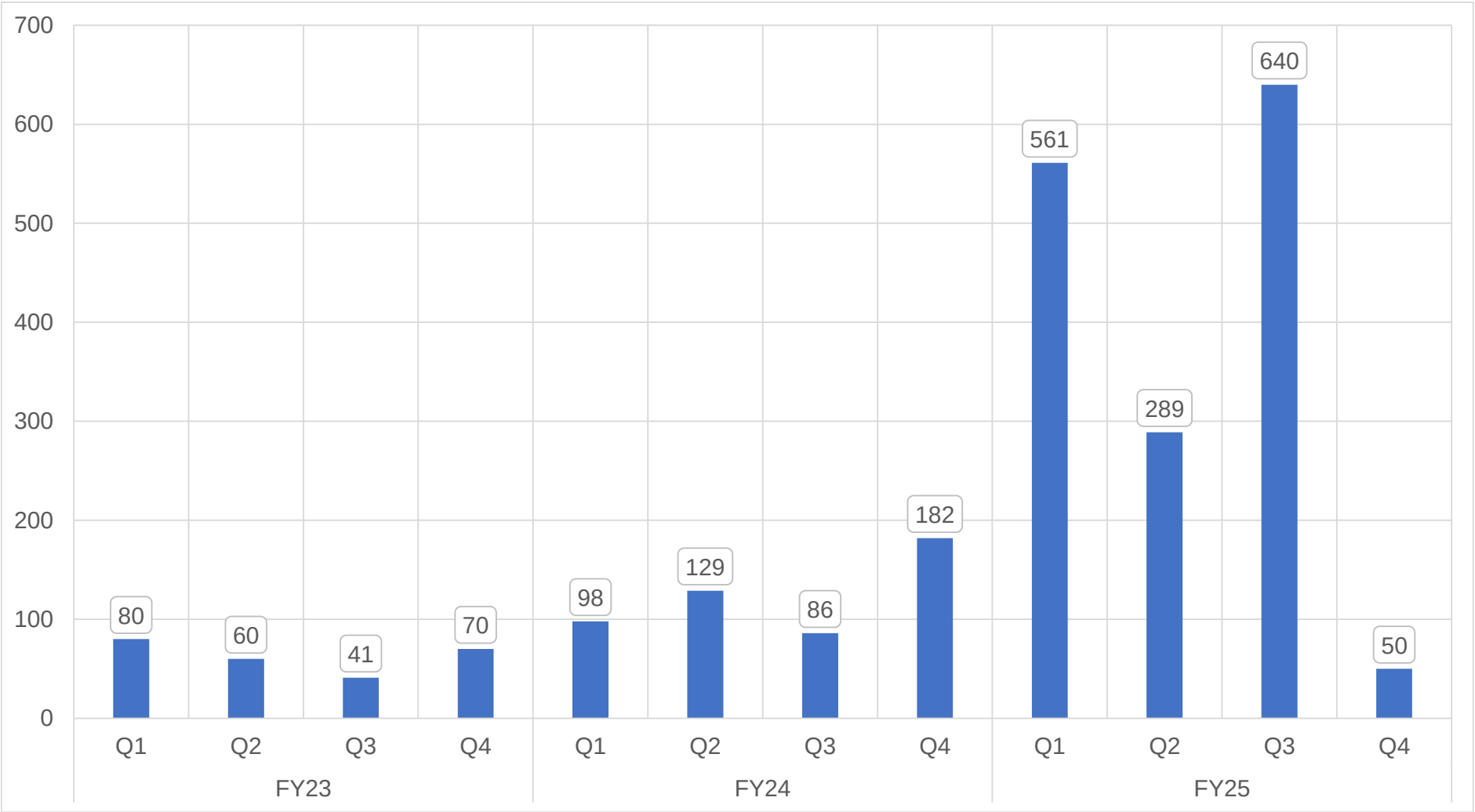
Health Licensing Office

Protecting the health, safety and rights of Oregon consumers

Board of Licensed Dietitians

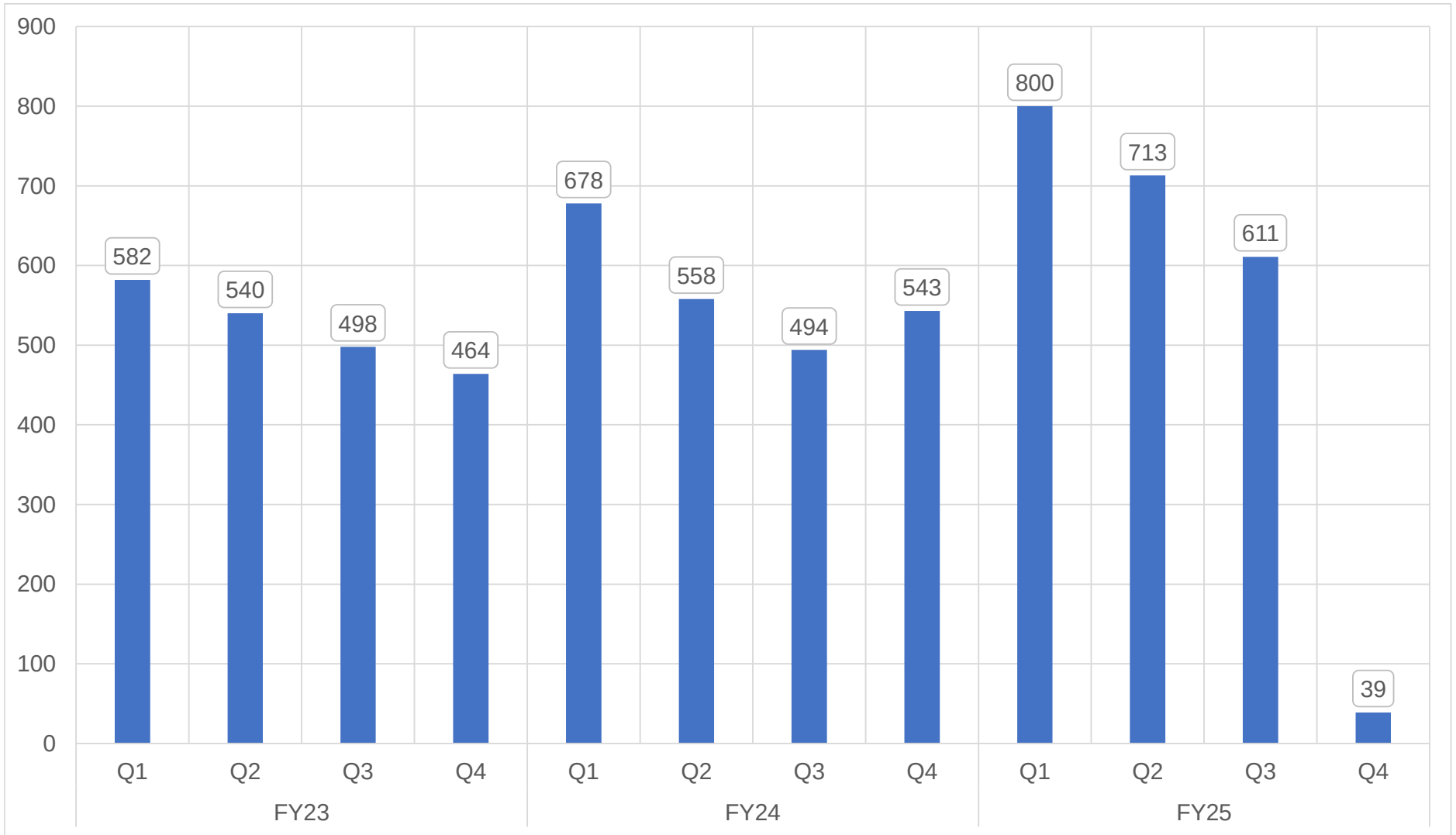
Board Report

LICENSES ISSUED



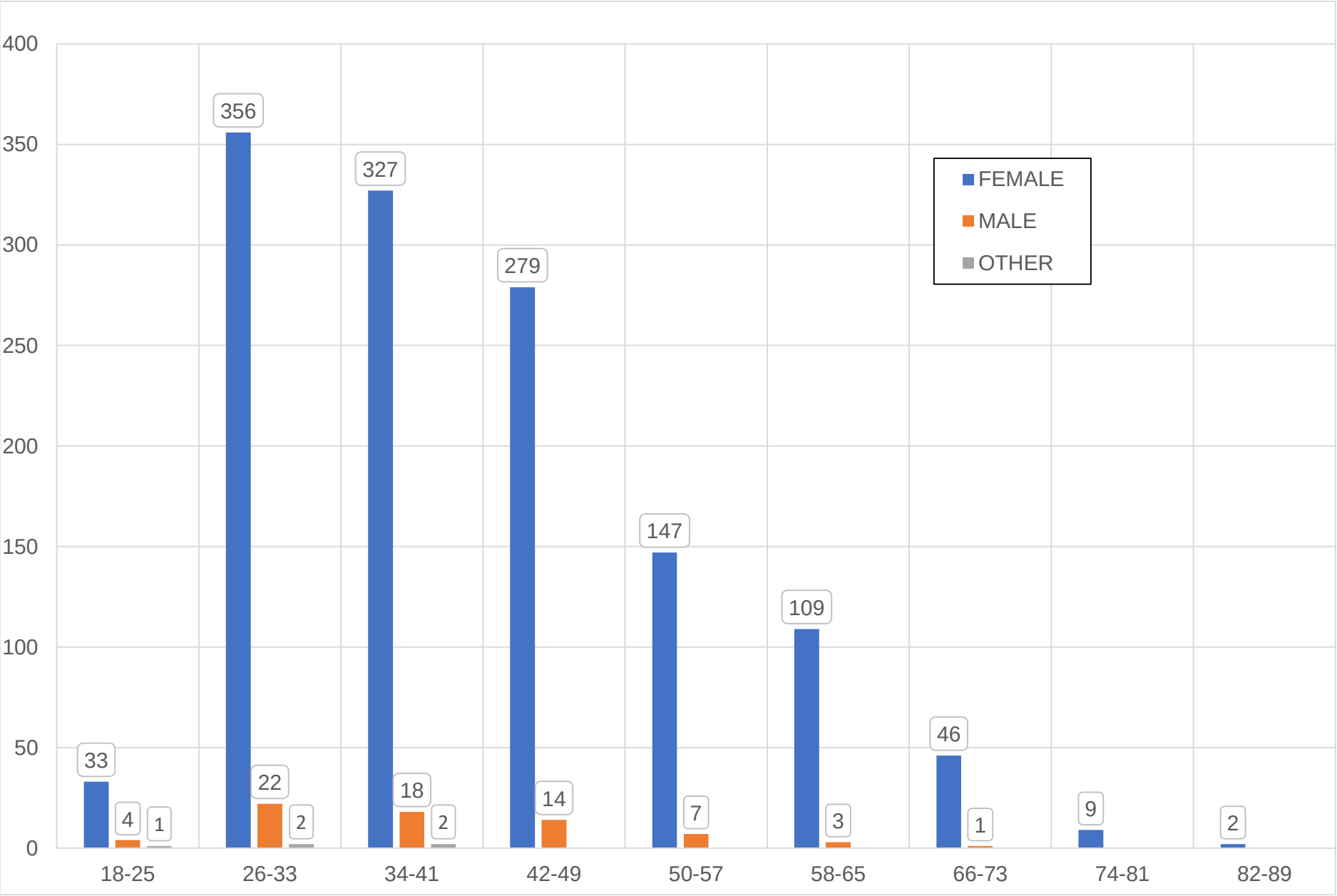
7/1/22 - 6/30/23	FY23	251
7/1/23 - 6/30/24	FY24	494
7/1/24 - 6/30/25	FY25	464
Grand Total		1209

LICENSES RENEWED



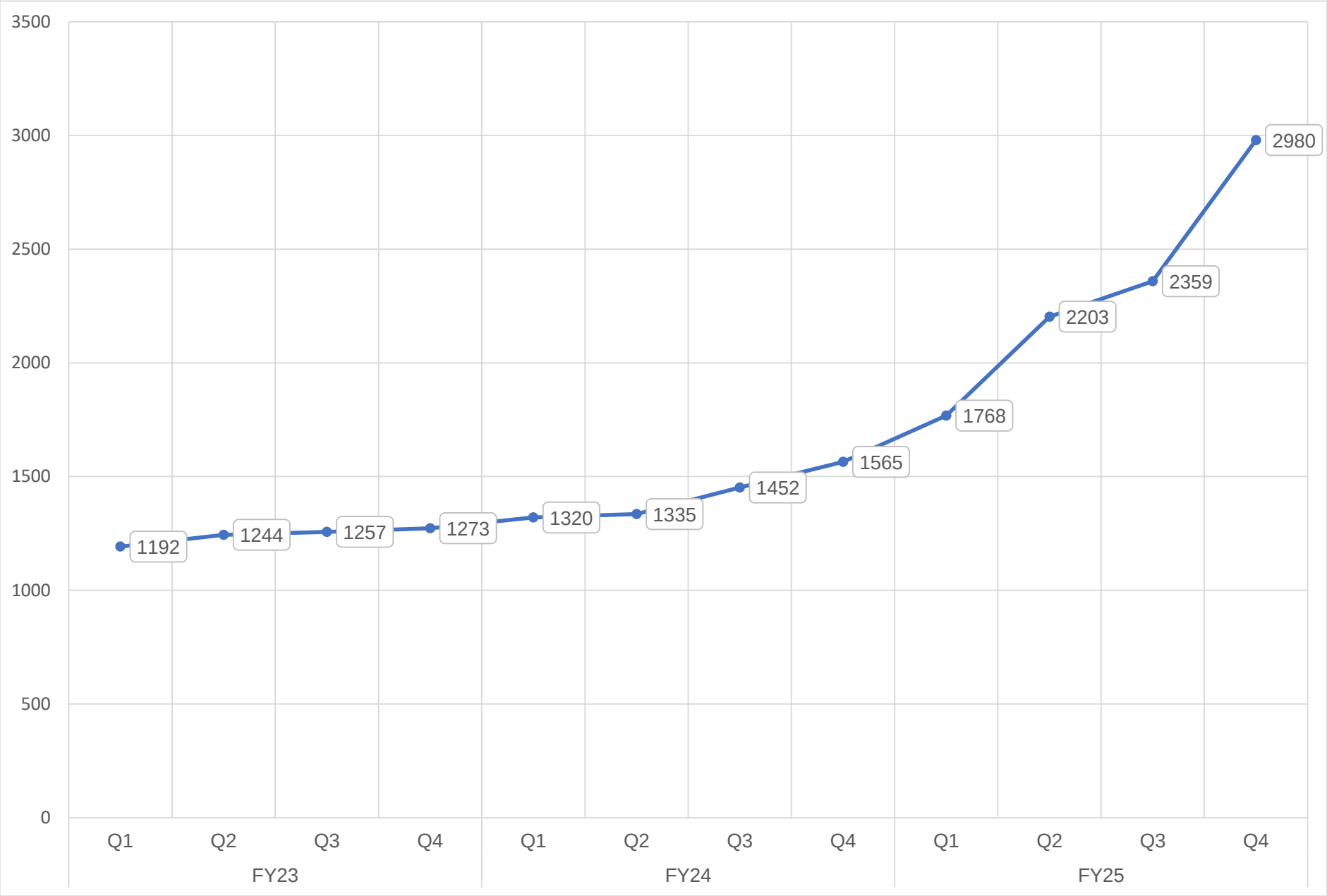
7/1/22 - 6/30/23	FY23	2084
7/1/23 - 6/30/24	FY24	2273
7/1/24 - 6/30/25	FY25	2163
GRAND TOTAL		6520

LICENSES BY AGE AND GENDER



TOTAL	1382
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LICENSING TRENDS



FY23	FY24	FY25
7/1/22 - 6/30/23	7/1/23 - 6/30/24	7/1/24 - 6/30/25

BOARD OF LICENSED DIETITIANS FINANCIAL REPORT

State Fiscal Year	2021 <i>(Jul20-Jun21)</i>	2022 <i>(Jul21-Jun22)</i>	2023 <i>(Jul22-Jun23)</i>	2024 <i>(Jul23-Jun24)</i>	2025 <i>(Current-Jul25)</i>
Beginning Cash Balance	\$219,465	\$229,684	\$236,730	\$230,708	\$236,074
Revenues	\$74,449	\$89,687	\$104,883	\$121,604	\$186,103
Expenditures	\$64,230	\$82,641	\$110,906	\$116,238	\$118,609
Net Operations <i>(Rev - Exp <u>Only</u>)</i>	\$10,219	\$7,046	(\$6,022)	\$5,366	\$67,494
Ending Cash Balance	\$229,684	\$236,730	\$230,708	\$236,074	\$303,568

*Revenues and Expenditures updated as FY25 M08 03.18.25 Chuy

*Total carry forward to 2023-25 is \$230,707.61

Regulatory Report



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Board Report

Board of Licensed Dietitians

4/9/2025

CASES OPEN/CLOSED STATUS			
	2023	2025	Grand Total
OPEN			
Licensed Dietitian	1	4	5
Unlicensed Dietitian	0	1	1
TOTAL	1	5	6
CLOSED			
Licensed Dietitian	2	0	2
Unlicensed Dietitian	1	1	2
TOTAL	3	1	4
Grand Total	4	6	10

COMPLAINTS BY TYPE			
	2023	2025	Grand Total
Licensing Concern	1	3	4
Services Provided	3	3	6
Grand Total	4	6	10

COMPLAINANTS BY TYPE	
ANONYMOUS	0
CLIENT	1
OTHER	9
TOTAL	10

Policy Report

Senate Bill 1174

Sponsored by Senator PATTERSON; Senator BONHAM, Representative GOMBERG

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act makes some changes to the laws about licensed dietitians. The Act also makes a new profession called a licensed nutritionist. The Act says a person may not practice dietetics or nutrition if the person does not have a license, and that a person may not use some titles or abbreviations if the person does not have a license. (Flesch Readability Score: 62.4).

Directs the Health Licensing Office to issue a license to engage in the practice of nutrition to a qualified applicant. Changes the requirements for a license to engage in the practice of dietetics. Defines the "practice of dietetics" and the "practice of nutrition." Changes the name of the Board of Licensed Dietitians to the Board of Licensed Dietitians and Nutritionists. Allows a licensed dietitian and a licensed nutritionist to provide services via telehealth. Prohibits a person from engaging in the practice of dietetics or the practice of nutrition, or from using specified titles and abbreviations, without a license. Makes exceptions to the licensure requirement.

Takes effect on the 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to the Board of Licensed Dietitians and Nutritionists; creating new provisions; amending ORS 192.556, 401.651, 413.164, 413.550, 431A.850, 433.045, 433.443, 441.044, 676.108, 676.150, 676.350, 676.400, 676.410, 676.565, 676.595, 676.850, 676.992, 691.405, 691.415, 691.435, 691.445, 691.465, 691.475, 691.477, 691.485, 743B.454 and 746.600 and section 3, chapter 380, Oregon Laws 2015; and prescribing an effective date.

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

LICENSED DIETITIANS AND LICENSED NUTRITIONISTS

SECTION 1. Sections 2 to 5 of this 2025 Act are added to and made a part of ORS 691.405 to 691.485.

SECTION 2. The Health Licensing Office, in consultation with the Board of Licensed Dietitians and Nutritionists, shall issue a license to engage in the practice of nutrition to an applicant who:

(1) Is at least 18 years of age;

(2) Submits to the office an application prescribed by the office;

(3) Pays the fee described in ORS 676.576; and

(4) Submits to the office proof, as determined sufficient by the office, that:

(a)(A) The applicant holds a master's degree or doctoral degree in a program of study, approved by the board, from an educational institution that at the time the degree was awarded was accredited by a United States institutional accrediting body for higher education recognized by the United States Department of Education, that includes:

(i) Coursework leading to competence in medical nutrition therapy;

(ii) At least 15 semester hours on clinical or life sciences, including at least three se-

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

mester hours on human anatomy and physiology or equivalent; and

(iii) At least 15 semester hours on nutrition and metabolism, including at least six hours on biochemistry; or

(B) An academic degree from another country that the board determines is equivalent to a degree described in subparagraph (A) of this paragraph;

(b) Subject to subsection (5) of this section, the applicant has successfully completed, within the five years immediately preceding the date of application, a planned, documented and continuously supervised experience in the practice of nutrition approved by the board that:

(A) Includes at least 1,000 hours of supervised practice under a qualified supervisor as described in section 4 of this 2025 Act that includes the following practice areas, with at least 200 hours in each practice area:

(i) Nutrition assessment;

(ii) Nutrition intervention; and

(iii) Nutrition monitoring and evaluation; and

(B) Has prepared the applicant to provide nutrition care services for various populations of diverse cultures and genders and across the life cycle, and to competently formulate actionable medical nutrition therapies and nutrition interventions, education, counseling and ongoing care for the prevention, modulation and management of a range of chronic medical conditions; and

(c) Subject to subsection (5) of this section, the applicant has passed, within the five years immediately preceding the date of application, the certified nutrition specialist examination administered by the Board for Certification of Nutrition Specialists, or its successor organization, and approved by the Board of Licensed Dietitians and Nutritionists, or an examination that the board determines is equivalent.

(5)(a) If more than five years have passed between the date on which an applicant completed the supervised experience described in subsection (4) of this section and the date on which the applicant submits an application to the office, the office may in its discretion extend the five-year limit.

(b) If more than five years have passed between the date on which an applicant passed the examination described in subsection (4) of this section and the date on which the applicant submits an application to the office, the office shall require that the applicant submit proof of completion of 75 hours of continuing education for each additional five years that have passed since the date of the examination.

SECTION 3. The Health Licensing Office, in consultation with the Board of Licensed Dietitians and Nutritionists, may waive the examination requirement prescribed in section 2 of this 2025 Act and grant a license to engage in the practice of nutrition to an applicant who:

(1) Files an application as prescribed by the office;

(2) Submits to the office proof, as determined sufficient by the board, of completion of the education and supervised practice requirements described under section 2 of this 2025 Act;

(3) Pays the applicable fees established under ORS 676.576; and

(4) Presents satisfactory evidence of:

(a) A valid and current certification, as approved by the Board of Licensed Dietitians and

1 Nutritionists, from the Board for Certification of Nutrition Specialists, or its successor or-
2 ganization, that allows the applicant to use the title “certified nutrition specialist”; or

3 (b) Current authorization as a nutritionist under the laws of any other state or territory
4 in the United States, if the requirements for authorization of nutritionists in that state or
5 territory are not less than those required by ORS 691.405 to 691.485.

6 **SECTION 4.** (1) In order to act as a qualified supervisor, a person must be:

7 (a) A licensed dietitian or licensed nutritionist;

8 (b) A licensed health care provider whose scope of practice includes the provision of
9 medical nutrition therapy; or

10 (c) An employee of the federal government, whether or not the person is licensed in this
11 state, whose scope of employment authorizes the person to provide medical nutrition ther-
12 apy.

13 (2) A qualified supervisor may:

14 (a) Supervise only a clinical activity or nutrition care service that the qualified supervi-
15 sor is qualified and authorized to perform; and

16 (b) Assign to the supervised student or trainee only those nutrition care services that
17 are within the training and experience of the supervised student or trainee and customary
18 to the qualified supervisor’s practice.

19 (3) A qualified supervisor shall:

20 (a) Develop and implement a program for advancing and optimizing the quality of care
21 that the supervised student or trainee provides;

22 (b) With the supervised student or trainee, identify and document:

23 (A) Goals for the supervised practice experience;

24 (B) The clinical tasks assigned to the supervised student or trainee that are appropriate
25 to the student or trainee’s evolving level of competence;

26 (C) The methods by which the supervised student or trainee may access the qualified
27 supervisor; and

28 (D) A process for the qualified supervisor to evaluate the supervised student or trainee’s
29 performance;

30 (c) Oversee, approve and accept responsibility for the nutrition care services provided
31 by the supervised student or trainee; and

32 (d) Regularly review the charts, records and clinical notes of the supervised student or
33 trainee and maintain responsibility for the supervised student or trainee’s recordkeeping.

34 (4)(a) A qualified supervisor shall be physically on site at the premises where the super-
35 vised student or trainee is providing nutrition care services or immediately and continuously
36 available to the supervised student or trainee via two-way real-time audiovisual technology
37 that allows for direct and contemporaneous interaction by sight and sound between the
38 qualified supervisor and the supervised student or trainee.

39 (b) If a qualified supervisor assigns to a supervised student or trainee a nutrition care
40 service to be provided in a care setting where the qualified supervisor is not routinely pres-
41 ent, the qualified supervisor shall ensure that the means and methods of supervision are
42 adequate to provide appropriate patient care, such as synchronous videoconferencing or an-
43 other method of communication and oversight appropriate to the care setting and the
44 training and education of the supervised student or trainee.

45 (c) A qualified supervisor shall be available to render assistance as requested by a patient

when the supervised student or trainee is providing nutrition care services to the patient. If the qualified supervisor is unable to be available as described in this paragraph, the qualified supervisor shall ensure that another qualified health care provider is available in the qualified supervisor's absence.

SECTION 5. A licensed dietitian may engage in the practice of dietetics or the practice of nutrition or provide medical nutrition therapy via telehealth. A licensed nutritionist may engage in the practice of nutrition or provide medical nutrition therapy via telehealth.

SECTION 6. ORS 691.405 is amended to read:

691.405. As used in ORS 691.405 to 691.485:

[(1) "Dietetics practice" means the integration and application of principles derived from the sciences of nutrition, biochemistry, food, management, physiology and behavioral and social sciences to achieve and maintain the health of people through:]

[(a) Assessing the nutritional needs of clients;]

[(b) Establishing priorities, goals and objectives that meet nutritional needs of clients;]

[(c) Advising and assisting individuals or groups on appropriate nutritional intake by integrating information from a nutritional assessment with information on food and other sources of nutrients and meal preparation; and]

[(d) Evaluating and making changes in food, diets and nutrition services, maintaining appropriate standards of nutritional quality in food and maintaining appropriate standards of nutrition services.]

[(2) "Licensed dietitian" means a dietitian licensed as provided in ORS 691.435.]

(1) "Licensed dietitian" means an individual licensed under ORS 691.435 to engage in the practice of dietetics and the practice of nutrition.

(2) "Licensed nutritionist" means an individual licensed under section 2 of this 2025 Act to engage in the practice of nutrition.

(3) "Medical nutrition therapy" means the provision of the following services for the purpose of managing or treating a disease or medical condition:

(a) Nutrition assessment;

(b) Nutrition diagnosis by identifying and labeling nutrition problems managed and treated by a licensed dietitian;

(c) Nutrition intervention; and

(d) Nutrition monitoring and evaluation.

(4) "Nonmedical weight control" means nutrition care services that do not constitute the management or treatment of a disease or medical condition and that are provided for the purpose of reducing, maintaining or gaining weight, or for assisting a healthy population group in achieving or maintaining a healthy weight.

(5) "Nutrition assessment" means:

(a) The ongoing, dynamic and systemic process of ordering, obtaining, verifying and interpreting biochemical, anthropometric, physical, nutrigenomic and dietary data to make decisions about the nature and cause of nutrition-related problems relative to patient and community needs;

(b) The reassessment and analysis of patient and community needs; and

(c) The ordering of laboratory testing to check and track a patient's nutritional status.

(6) "Nutrition care service" means any of the following services when provided within a systematic process:

(a) Assessing and evaluating the nutritional needs of individuals and groups and deter-

1 mining resources and constraints in a practice setting by ordering as necessary any
2 nutrition-related laboratory tests to check and track nutrition status.

3 (b) Identifying nutrition problems and establishing priorities, goals and objectives that
4 meet nutritional needs and are consistent with available resources and constraints.

5 (c) Creating individualized dietary plans and issuing and implementing orders to meet the
6 nutritional needs of healthy patients or patients with diseases or medical conditions, by or-
7 dering as needed therapeutic diets and monitoring the effectiveness of therapeutic diets.

8 (d) Determining and providing appropriate nutrition intervention in health and disease
9 and providing nutrition counseling on food and prescription drug interactions.

10 (e) Developing, implementing and managing nutrition care systems.

11 (f) Evaluating, revising and maintaining appropriate standards of quality in food and nu-
12 trition services.

13 (7) "Nutrition intervention" means:

14 (a) Purposefully planned actions intended to positively change a nutrition-related behav-
15 ior, risk factor, environmental condition or aspect of a patient's health status or that of
16 target groups or communities at large;

17 (b) Approving, ordering and monitoring of therapeutic diets; and

18 (c) Counseling on interactions between foods and prescription drugs.

19 (8) "Practice of dietetics" means:

20 (a) The integration and application of scientific principles derived from the study of food,
21 nutrition, biochemistry, metabolism, nutrigenomics, physiology, pharmacology, food systems
22 and behavioral and social sciences to achieve and maintain optimal nutrition status of indi-
23 viduals and groups;

24 (b) The provision of nutrition care services and medical nutrition therapy to prevent,
25 manage or treat chronic or acute diseases or medical conditions and promote wellness in
26 inpatient and outpatient settings; and

27 (c) The development and ordering of therapeutic diets via oral, enteral and parenteral
28 routes and the provision of other advanced medical nutrition therapy and related support
29 activities consistent with current competencies required of academic and supervised practice
30 programs accredited by the Accreditation Council for Education in Nutrition and Dietetics,
31 or its successor organization, and approved by the Board of Licensed Dietitians and
32 Nutritionists, and in accord with the Commission on Dietetic Registration's, or its successor
33 organization's, Scope and Standards of Practice for the Registered Dietitian, as approved by
34 the board.

35 (9) "Practice of nutrition" means:

36 (a) The integration and application of scientific principles derived from the study of nu-
37 trition science, cellular and systemic metabolism, biochemistry, physiology and behavioral
38 sciences for achieving and maintaining health throughout the lifespan;

39 (b) The provision of nutrition care services and medical nutrition therapy to prevent,
40 manage or treat chronic diseases or medical conditions and promote wellness in outpatient
41 settings; and

42 (c) Consistent with competency:

43 (A) The ordering of medical laboratory tests related to nutritional therapeutic treat-
44 ments; and

45 (B) The provision of recommendations on vitamin, mineral and other dietary supple-

ments.

(10) “Qualified supervisor” means a person who provides supervision, assumes full professional responsibility for the work of the supervised student or trainee and meets the requirements described in section 4 of this 2025 Act.

SECTION 7. ORS 691.415 is amended to read:

691.415. [A person who is not licensed under ORS 691.435 may not practice or attempt to practice as a licensed dietitian using in connection with the name of the person the words or letters “L.D.,” or “Licensed Dietitian.”] (1) Unless a person is licensed under ORS 691.405 to 691.485, the person may not:

(a) Engage in the practice of dietetics or the practice of nutrition;

(b) Provide medical nutrition therapy;

(c) Designate or hold themselves out as a licensed dietitian or licensed nutritionist; or

(d) Use the titles or abbreviations, “licensed dietitian,” “dietitian,” “dietitian nutritionist,” “dietician,” “L.D.,” “L.D.N.,” “licensed nutritionist,” “nutritionist” or “L.N.”

(2) Subsection (1) of this section does not prohibit:

(a) A licensed health care provider from providing medical nutrition therapy if medical nutrition therapy is within the scope of the health care provider’s license and is incidental to the profession in which the health care provider is licensed.

(b) The practice of dietetics or the practice of nutrition by a student or trainee as part of a course of study or planned supervised practice experience to satisfy the requirements specified in ORS 691.435 or section 2 of this 2025 Act if the supervised student or trainee does not provide unrestricted medical nutritional therapy and uses a title that clearly indicates the supervised student or trainee is a student or trainee.

(c) A dietitian or nutritionist who is serving in or employed by the Armed Forces of the United States, the United States Public Health Service or the United States Department of Veterans Affairs from providing medical nutrition therapy or using titles issued by the federal government in the scope of the person’s service or employment.

(d) A person from providing nutrition care services and using the title “nutritionist,” if the person is employed by or contracted with this state or a political subdivision of this state for the purposes of providing nutrition care services for the Women, Infants and Children Program established under ORS 413.500, and the provision of nutrition care services is in the course of the person’s employment or contract.

(e) A person from providing medical weight control services for obesity if the person does not use a title or abbreviation listed in subsection (1) of this section and the provision of medical weight control services is part of:

(A) An instructional program approved in writing by a licensed dietitian, licensed nutritionist or licensed health care provider whose scope of practice includes medical nutrition therapy; or

(B) A plan of care overseen by a licensed health care provider whose scope of practice authorizes the health care provider to provide and delegate medical nutrition therapy, if the medical weight control services are not discretionary and do not require the person to exercise professional judgment.

(f) A person who has completed the educational and supervised experience requirements to sit for an examination described in ORS 691.435 or section 2 of this 2025 Act from engaging in the practice of dietetics or the practice of nutrition under the supervision of a licensed

dietitian or licensed nutritionist for up to one year after the date on which the person completes the requirements, if the person does not use the titles or abbreviations listed in subsection (1) of this section.

(g) A person from assisting in the provision of medical nutrition therapy if the person, under the direct supervision of a licensed dietitian, licensed nutritionist or licensed health care provider whose scope of practice includes medical nutrition therapy, performs only nondiscretionary support activities that do not require the person to exercise professional judgment and the person does not use the titles or abbreviations listed in subsection (1) of this section.

(h) A person from disseminating nonindividualized written general nonmedical nutrition information in connection with the marketing and distribution of dietary supplements, food, herbs or food materials if the information does not constitute medical nutrition therapy and the person does not use the titles or abbreviations listed in subsection (1) of this section.

(i) A person from providing individualized nutrition recommendations for wellness and primary prevention of chronic disease, health coaching, holistic and wellness education, guidance, motivation, behavior change management, nonmedical weight control services or other nutrition care services if the services do not constitute medical nutrition therapy, the person does not hold themselves out as authorized or qualified to provide medical nutrition therapy and the person does not use a title or abbreviation listed in subsection (1) of this section.

(j) A health care provider located out of state from providing medical nutrition therapy via telehealth to a patient located in this state if the provider holds a compact privilege under the Dietitian Licensure Compact or is a health care provider authorized and in good standing in another state or territory with a scope of practice that includes medical nutrition therapy and provides the medical nutrition therapy under this paragraph:

(A) In consultation with a health care provider licensed in this state whose scope of practice includes medical nutrition therapy and who has a patient-provider relationship with the patient;

(B) For a patient with whom the out-of-state health care provider has a patient-provider relationship and who is temporarily located in this state; or

(C) Pursuant to a patient-provider relationship, and the provision of medical nutrition therapy is follow-up medical nutrition therapy to ensure continuity of the patient's care.

(3) By providing medical nutrition therapy via telehealth as described in subsection (2)(j) of this section, a health care provider located out of state consents to the jurisdiction of the Board of Licensed Dietitians and Nutritionists and the Health Licensing Office.

SECTION 8. ORS 691.435 is amended to read:

691.435. The Health Licensing Office, in consultation with the Board of Licensed Dietitians and Nutritionists, shall issue a [*dietitian*] license **to engage in the practice of dietetics** to an applicant who:

[(1) *Files an application as prescribed by the office;*]

[(2) *Pays the applicable fees established under ORS 676.576; and*]

[(3) *Demonstrates to the satisfaction of the office that the applicant has:*]

[(a) *Received a baccalaureate or postbaccalaureate degree from a regionally accredited college or university in the United States with a major course of study in human nutrition, dietetics, foods and nutrition or food systems management approved by the board as meeting the standards for approval*

1 of the course of study under ORS 691.405 to 691.485;]

2 [(b) Completed a planned, continuous program of dietetic experience approved by the office of 900
3 hours under the supervision of a licensed dietitian; and]

4 [(c) Passed an examination prescribed by the office.]

5 (1) Is at least 18 years of age;

6 (2) Submits to the office an application prescribed by the office;

7 (3) Pays the fee described in ORS 676.576; and

8 (4) Submits to the office proof, as determined sufficient by the office, that:

9 (a)(A) The applicant holds a master's degree or doctoral degree in a program of study
10 accredited by the Accreditation Council for Education in Nutrition and Dietetics, or its suc-
11 cessor organization, as approved by the board, from an educational institution that at the
12 time the degree was awarded was accredited by a United States institutional accrediting body
13 for higher education recognized by the United States Department of Education; or

14 (B) An academic degree from another country that the board determines is equivalent
15 to a degree described in subparagraph (A) of this paragraph;

16 (b) Subject to subsection (5) of this section, the applicant has successfully completed,
17 within the five years immediately preceding the date of application, a planned and docu-
18 mented supervised experience in the practice of dietetics and the practice of nutrition ap-
19 proved by the board and accredited by the Accreditation Council for Education in Nutrition
20 and Dietetics, or its successor organization, that includes at least 1,000 hours of supervised
21 practice under a qualified supervisor described in section 4 of this 2025 Act; and

22 (c) Subject to subsection (5) of this section, the applicant has successfully passed, within
23 the five years immediately preceding the date of application, the registration examination for
24 dietitians administered by the Commission on Dietetic Registration, or its successor organ-
25 ization, and approved by the board.

26 (5)(a) If more than five years have passed between the date on which an applicant com-
27 pleted the supervised experience described in subsection (4) of this section and the date on
28 which the applicant submits an application to the office, the office may in its discretion ex-
29 tend the five-year limit.

30 (b) If more than five years have passed between the date on which an applicant passed
31 the examination described in subsection (4) of this section and the date on which the appli-
32 cant submits an application to the office, the office shall require that the applicant submit
33 proof of completion of 75 hours of continuing education for each additional five years that
34 have passed since the date of the examination.

35 **SECTION 9.** ORS 691.445 is amended to read:

36 691.445. The Health Licensing Office, in consultation with the Board of Licensed Dietitians and
37 Nutritionists, may waive the examination requirement and grant a [*dietitian*] license to engage in
38 the practice of dietetics to an applicant who:

39 (1) Files an application as prescribed by the office;

40 (2) Pays the applicable fees established under ORS 676.576; and

41 (3) Presents satisfactory evidence of:

42 (a) [*Current registration as a dietitian with a credentialing body approved by the board;*] A valid
43 and current registration, as approved by the board, from the Commission on Dietetic Regis-
44 tration, or its successor organization, that allows the applicant to use the title "registered
45 dietitian" or "registered dietitian nutritionist" and the abbreviation "R.D." or "R.D.N."; or

(b) Current *[licensure]* **authorization as a dietitian** under the laws of any other state or territory in the United States, if the requirements for *[licensure]* **authorization** of dietitians in *[the]* **that** state or territory *[in which the applicant is licensed]* are not less than those required by ORS 691.405 to 691.485.

SECTION 10. ORS 691.465 is amended to read:

691.465. To renew a license issued under ORS 691.405 to 691.485, the *[licensee must]* **licensed dietitian or licensed nutritionist shall** submit to the Health Licensing Office:

- (1) A completed renewal application;
- (2) The applicable renewal fee established under ORS 676.576; and
- (3) Satisfactory evidence of having completed any required continuing education credits on or before the expiration date of the license as specified by office rule.

SECTION 11. ORS 691.475 is amended to read:

691.475. The Health Licensing Office, in consultation with the Board of Licensed Dietitians **and Nutritionists**, shall:

- (1) Adopt rules necessary for the administration of ORS 691.405 to 691.485;
- (2) Issue, deny, revoke, suspend and renew *[dietitian]* licenses **issued under ORS 691.405 to 691.485;**
- (3) Determine the qualifications, training, education and fitness of applicants for *[licenses, renewals of licenses and reciprocal licenses for dietitians]* **initial licensure to engage in the practice of dietetics or the practice of nutrition and the renewal of a license;**
- (4) Determine requirements for reciprocity and equivalency for *[licensed dietetics practice]* **the licensed practice of dietetics and the practice of nutrition;**
- (5) Establish a code of professional responsibility and standards of practice for licensed dietitians **and licensed nutritionists;**
- (6) Develop, approve or recognize examinations to test an applicant's knowledge relating to dietitian **and nutritionist** techniques and methods and any other subjects the board may determine to be necessary to assess an applicant's fitness to practice as a licensed dietitian **or licensed nutritionist;** and
- (7) Provide for waivers of examinations.

SECTION 12. ORS 691.477 is amended to read:

691.477. In the manner prescribed in ORS chapter 183 for contested cases and in consultation with the Board of Licensed Dietitians **and Nutritionists**, the Health Licensing Office may impose a form of discipline listed in ORS 676.612 against any person *[practicing]* **engaged in the practice of dietetics or the practice of nutrition** for any of the grounds listed in ORS 676.612 and for any violation of the provisions of ORS 691.405 to 691.485, or the rules adopted under ORS 691.405 to 691.485.

SECTION 13. ORS 691.485 is amended to read:

691.485. (1) There is established, within the Health Licensing Office, the Board of Licensed Dietitians **and Nutritionists** to advise the office with regard to the regulation of *[dietitians]* **licensed dietitians, licensed nutritionists, the practice of dietetics and the practice of nutrition.** The board consists of seven members appointed by the Governor. All members of the board must be residents of this state. Of the members of the board:

- (a) Two must be members of the general public who are not otherwise qualified for membership on the board and who are not a spouse, domestic partner, child, parent or sibling of a licensed dietitian **or licensed nutritionist;**

(b) One must be a physician **licensed under ORS chapter 677 who is** trained in clinical nutrition; [and]

(c) [Four] **Three** must be licensed dietitians who have been engaged in the practice of dietetics for at least five years[.]; **and**

(d) One must be a licensed nutritionist who has been engaged in the practice of nutrition for at least five years.

(2) The term of office of each member is four years, but a member serves at the pleasure of the Governor. A member is eligible for reappointment. If a person serves two consecutive full terms, a period of at least four years must elapse before the person is again eligible for appointment to serve on the board. If there is a vacancy on the board for any reason, the Governor shall make an appointment to become immediately effective for the unexpired term. A member shall hold the member's office until the appointment and qualification of a successor.

(3) Members of the board are entitled to compensation and expenses as provided in ORS 292.495. The office may provide by rule for compensation to board members for the performance of official duties at a rate that is greater than the rate provided in ORS 292.495.

(4) The board shall meet at least once per year.

SECTION 14. (1) Sections 2 to 5 of this 2025 Act and the amendments to ORS 691.405, 691.415, 691.435, 691.445, 691.465, 691.475, 691.477 and 691.485 by sections 6 to 13 of this 2025 Act apply to individuals who apply for initial licensure under ORS 691.405 to 691.485 on or after the operative date specified in section 36 of this 2025 Act.

(2) A person who holds a license issued under ORS 691.435 prior to the operative date specified in section 36 of this 2025 Act is not required to meet the requirements of ORS 691.435 as amended by section 8 of this 2025 Act.

(3) The amendments to ORS 691.485 by section 13 of this 2025 Act apply to members appointed to the Board of Licensed Dietitians and Nutritionists on or after the operative date specified in section 36 of this 2025 Act.

CONFORMING AMENDMENTS

SECTION 15. ORS 192.556, as amended by section 47, chapter 73, Oregon Laws 2024, is amended to read:

192.556. As used in ORS 192.553 to 192.581:

(1) "Authorization" means a document written in plain language that contains at least the following:

(a) A description of the information to be used or disclosed that identifies the information in a specific and meaningful way;

(b) The name or other specific identification of the person or persons authorized to make the requested use or disclosure;

(c) The name or other specific identification of the person or persons to whom the covered entity may make the requested use or disclosure;

(d) A description of each purpose of the requested use or disclosure, including but not limited to a statement that the use or disclosure is at the request of the individual;

(e) An expiration date or an expiration event that relates to the individual or the purpose of the use or disclosure;

(f) The signature of the individual or personal representative of the individual and the date;

1 (g) A description of the authority of the personal representative, if applicable; and

2 (h) Statements adequate to place the individual on notice of the following:

3 (A) The individual's right to revoke the authorization in writing;

4 (B) The exceptions to the right to revoke the authorization;

5 (C) The ability or inability to condition treatment, payment, enrollment or eligibility for benefits
6 on whether the individual signs the authorization; and

7 (D) The potential for information disclosed pursuant to the authorization to be subject to
8 redisclosure by the recipient and no longer protected.

9 (2) "Covered entity" means:

10 (a) A state health plan;

11 (b) A health insurer;

12 (c) A health care provider that transmits any health information in electronic form to carry out
13 financial or administrative activities in connection with a transaction covered by ORS 192.553 to
14 192.581; or

15 (d) A health care clearinghouse.

16 (3) "Health care" means care, services or supplies related to the health of an individual.

17 (4) "Health care operations" includes but is not limited to:

18 (a) Quality assessment, accreditation, auditing and improvement activities;

19 (b) Case management and care coordination;

20 (c) Reviewing the competence, qualifications or performance of health care providers or health
21 insurers;

22 (d) Underwriting activities;

23 (e) Arranging for legal services;

24 (f) Business planning;

25 (g) Customer services;

26 (h) Resolving internal grievances;

27 (i) Creating deidentified information; and

28 (j) Fundraising.

29 (5) "Health care provider" includes but is not limited to:

30 (a) A psychologist, occupational therapist, regulated social worker, professional counselor or
31 marriage and family therapist licensed or otherwise authorized to practice under ORS chapter 675
32 or an employee of the psychologist, occupational therapist, regulated social worker, professional
33 counselor or marriage and family therapist;

34 (b) A physician or physician associate licensed under ORS chapter 677, an acupuncturist li-
35 censed under ORS 677.759 or an employee of the physician, physician associate or acupuncturist;

36 (c) A nurse or nursing home administrator licensed under ORS chapter 678 or an employee of
37 the nurse or nursing home administrator;

38 (d) A dentist licensed under ORS chapter 679 or an employee of the dentist;

39 (e) A dental hygienist or denturist licensed under ORS chapter 680 or an employee of the dental
40 hygienist or denturist;

41 (f) A speech-language pathologist or audiologist licensed under ORS chapter 681 or an employee
42 of the speech-language pathologist or audiologist;

43 (g) An emergency medical services provider licensed under ORS chapter 682;

44 (h) An optometrist licensed under ORS chapter 683 or an employee of the optometrist;

45 (i) A chiropractic physician licensed under ORS chapter 684 or an employee of the chiropractic

1 physician;

2 (j) A naturopathic physician licensed under ORS chapter 685 or an employee of the naturopathic
3 physician;

4 (k) A massage therapist licensed under ORS 687.011 to 687.250 or an employee of the massage
5 therapist;

6 (L) A direct entry midwife licensed under ORS 687.405 to 687.495 or an employee of the direct
7 entry midwife;

8 (m) A physical therapist licensed under ORS 688.010 to 688.201 or an employee of the physical
9 therapist;

10 (n) A medical imaging licensee under ORS 688.405 to 688.605 or an employee of the medical
11 imaging licensee;

12 (o) A respiratory care practitioner licensed under ORS 688.815 or an employee of the respiratory
13 care practitioner;

14 (p) A polysomnographic technologist licensed under ORS 688.819 or an employee of the poly-
15 somnographic technologist;

16 (q) A pharmacist licensed under ORS chapter 689 or an employee of the pharmacist;

17 (r) A dietitian **or nutritionist** licensed under ORS 691.405 to 691.485 or an employee of the
18 dietitian **or nutritionist**;

19 (s) A funeral service practitioner licensed under ORS chapter 692 or an employee of the funeral
20 service practitioner;

21 (t) A health care facility as defined in ORS 442.015;

22 (u) A home health agency as defined in ORS 443.014;

23 (v) A hospice program as defined in ORS 443.850;

24 (w) A clinical laboratory as defined in ORS 438.010;

25 (x) A pharmacy as defined in ORS 689.005; and

26 (y) Any other person or entity that furnishes, bills for or is paid for health care in the normal
27 course of business.

28 (6) "Health information" means any oral or written information in any form or medium that:

29 (a) Is created or received by a covered entity, a public health authority, an employer, a life
30 insurer, a school, a university or a health care provider that is not a covered entity; and

31 (b) Relates to:

32 (A) The past, present or future physical or mental health or condition of an individual;

33 (B) The provision of health care to an individual; or

34 (C) The past, present or future payment for the provision of health care to an individual.

35 (7) "Health insurer" means an insurer as defined in ORS 731.106 who offers:

36 (a) A health benefit plan as defined in ORS 743B.005;

37 (b) A short term health insurance policy, the duration of which does not exceed three months
38 including renewals;

39 (c) A student health insurance policy;

40 (d) A Medicare supplemental policy; or

41 (e) A dental only policy.

42 (8) "Individually identifiable health information" means any oral or written health information
43 in any form or medium that is:

44 (a) Created or received by a covered entity, an employer or a health care provider that is not
45 a covered entity; and

(b) Identifiable to an individual, including demographic information that identifies the individual, or for which there is a reasonable basis to believe the information can be used to identify an individual, and that relates to:

(A) The past, present or future physical or mental health or condition of an individual;

(B) The provision of health care to an individual; or

(C) The past, present or future payment for the provision of health care to an individual.

(9) "Payment" includes but is not limited to:

(a) Efforts to obtain premiums or reimbursement;

(b) Determining eligibility or coverage;

(c) Billing activities;

(d) Claims management;

(e) Reviewing health care to determine medical necessity;

(f) Utilization review; and

(g) Disclosures to consumer reporting agencies.

(10) "Personal representative" includes but is not limited to:

(a) A person appointed as a guardian under ORS 125.305, 419B.372, 419C.481 or 419C.555 with authority to make medical and health care decisions;

(b) A person appointed as a health care representative under ORS 127.505 to 127.660 or a representative under ORS 127.700 to 127.737 to make health care decisions or mental health treatment decisions;

(c) A person appointed as a personal representative under ORS chapter 113; and

(d) A person described in ORS 192.573.

(11)(a) "Protected health information" means individually identifiable health information that is maintained or transmitted in any form of electronic or other medium by a covered entity.

(b) "Protected health information" does not mean individually identifiable health information in:

(A) Education records covered by the federal Family Educational Rights and Privacy Act (20 U.S.C. 1232g);

(B) Records described at 20 U.S.C. 1232g(a)(4)(B)(iv); or

(C) Employment records held by a covered entity in its role as employer.

(12) "State health plan" means:

(a) Medical assistance as defined in ORS 414.025;

(b) The Cover All People program; or

(c) Any medical assistance or premium assistance program operated by the Oregon Health Authority.

(13) "Treatment" includes but is not limited to:

(a) The provision, coordination or management of health care; and

(b) Consultations and referrals between health care providers.

SECTION 16. ORS 401.651 is amended to read:

401.651. As used in ORS 401.651 to 401.670:

(1) "Health care facility" means a health care facility as defined in ORS 442.015 that has been licensed under ORS chapter 441.

(2) "Health care provider" means:

(a) An individual licensed, certified or otherwise authorized or permitted by the laws of this state or another state to administer health care services in the ordinary course of business or practice of a profession; and

(b) A person entered in the emergency health care provider registry under ORS 401.658.

(3) “Health professional regulatory board” means a health professional regulatory board, as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and Nutritionists** and the Behavior Analysis Regulatory Board.

SECTION 17. ORS 413.164 is amended to read:

413.164. (1) As used in this section and ORS 413.163 and 413.167:

(a) “Board” means the:

(A) State Board of Examiners for Speech-Language Pathology and Audiology;

(B) State Board of Chiropractic Examiners;

(C) State Board of Licensed Social Workers;

(D) Oregon Board of Licensed Professional Counselors and Therapists;

(E) Oregon Board of Dentistry;

(F) State Board of Massage Therapists;

(G) Oregon Board of Naturopathic Medicine;

(H) Oregon State Board of Nursing;

(I) Oregon Board of Optometry;

(J) State Board of Pharmacy;

(K) Oregon Medical Board;

(L) Occupational Therapy Licensing Board;

(M) Oregon Board of Physical Therapy;

(N) Oregon Board of Psychology;

(O) Board of Medical Imaging;

(P) Long Term Care Administrators Board;

(Q) State Board of Direct Entry Midwifery;

(R) State Board of Denture Technology;

(S) Respiratory Therapist and Polysomnographic Technologist Licensing Board;

(T) Board of Licensed Dietitians **and Nutritionists**; and

(U) Oregon Health Authority, to the extent that the authority:

(i) Licenses emergency medical services providers under ORS 682.216; and

(ii) Regulates traditional health workers under ORS 414.665.

(b) “Coordinated care organization” has the meaning given that term in ORS 414.025.

(c) “Health care provider” means an individual licensed, certified, registered or otherwise authorized to practice by a board.

(d) “Health insurer” has the meaning given that term in ORS 746.600.

(2) At least once each calendar year and in accordance with timelines established by the authority by rule, a coordinated care organization, a health care provider or health care provider’s designee, or a health insurer shall collect data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity from the coordinated care organization’s, health care provider’s or health insurer’s patients, clients and members, in accordance with standards adopted by the authority pursuant to ORS 413.161. A coordinated care organization, health care provider or health insurer shall submit the data to the authority in the manner prescribed by the authority by rule.

(3)(a) The authority shall adopt rules, including but not limited to rules:

(A) Establishing standards for collecting, securely transmitting and reporting the data described in subsection (2) of this section;

1 (B) Establishing the timelines for collection and submission of data described in subsection (2)
2 of this section;

3 (C) Permitting coordinated care organizations, health care providers and health insurers to re-
4 port to the authority that a patient, client or member refused to answer questions regarding race,
5 ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender
6 identity;

7 (D) Establishing criteria for extensions of timelines established under this subsection and a
8 process for reviewing requests for extensions; and

9 (E) Establishing criteria for exempting certain health care providers or classes of health care
10 providers from the requirements of subsection (2) of this section and a process for reviewing re-
11 quests for exemptions.

12 (b) In adopting rules under subsection (2) of this section, the authority shall:

13 (A) Consult with the advisory committee established under ORS 413.161;

14 (B) Allow coordinated care organizations, health care providers and health insurers to collect
15 the data described in subsection (2) of this section on electronic or paper forms; and

16 (C) Require coordinated care organizations, health care providers and health insurers to inform
17 patients, clients and members:

18 (i) That data collected under subsection (2) of this section is reported to the authority;

19 (ii) How the authority, coordinated care organization, health care provider and health insurer
20 use the data;

21 (iii) Of the purposes for which the data may not be used; and

22 (iv) That the patient, client or member is not required to answer questions regarding race,
23 ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender
24 identity.

25 (4) Data collected under this section is confidential and not subject to disclosure under ORS
26 192.311 to 192.478. The authority may release the data collected under this section only if the data
27 to be released is anonymized and aggregated so that the data released does not reasonably allow
28 an individual whose information is included in the data to be identified.

29 (5) A coordinated care organization or health insurer transacting insurance in this state may
30 not consider any data collected under subsection (2) of this section:

31 (a) In determining whether to deny, limit, cancel, rescind or refuse to renew an insurance policy;

32 (b) To establish premium rates for an insurance policy; or

33 (c) To establish the terms and conditions of an insurance policy.

34 (6) The authority may provide incentives to coordinated care organizations, health care provid-
35 ers and health insurers to assist in deferring the costs of making changes to electronic health re-
36 cords systems or similar systems to facilitate the collection of data described in subsection (2) of this
37 section.

38 (7)(a) The authority shall monitor coordinated care organizations, health care providers and
39 health insurers for compliance with the standards established under subsection (1) of this section.

40 (b) The authority may impose on a coordinated care organization, health care provider or health
41 insurer a civil penalty for a violation of the requirements of this section or rules adopted under this
42 section:

43 (A) Not to exceed \$200 for the first violation;

44 (B) Not to exceed \$400 for the second violation; and

45 (C) Not to exceed \$500 for the third and subsequent violations.

(c) Prior to imposing a penalty under paragraph (b) of this subsection, the authority shall provide notice to the coordinated care organization, health care provider or health insurer of the alleged violation and provide the coordinated care organization, health care provider or health insurer a reasonable time in which to correct the violation.

SECTION 18. ORS 413.550 is amended to read:

413.550. As used in ORS 413.550 to 413.559:

(1) "Certified health care interpreter" means an individual who has been approved and certified by the Oregon Health Authority under ORS 413.558.

(2) "Coordinated care organization" has the meaning given that term in ORS 414.025.

(3) "Health care" means medical, surgical, oral or hospital care or any other remedial care recognized by state law, including physical and behavioral health care.

(4)(a) "Health care interpreter" means an individual who is readily able to:

(A) Communicate in English and communicate with a person with limited English proficiency or who communicates in signed language;

(B) Accurately interpret the oral statements of a person with limited English proficiency, or the statements of a person who communicates in signed language, into English;

(C) Accurately interpret oral statements in English to a person with limited English proficiency or who communicates in signed language;

(D) Sight translate documents from a person with limited English proficiency; and

(E) Interpret the oral statements of other persons into the language of the person with limited English proficiency or into signed language.

(b) "Health care interpreter" also includes an individual who can provide the services described in paragraph (a) of this subsection using relay or indirect interpretation.

(5) "Health care interpreter registry" means the registry described in ORS 413.558 that is administered by the authority.

(6)(a) "Health care provider" means any of the following that are reimbursed with public funds, in whole or in part:

(A) An individual licensed or certified by the:

(i) State Board of Examiners for Speech-Language Pathology and Audiology;

(ii) State Board of Chiropractic Examiners;

(iii) State Board of Licensed Social Workers;

(iv) Oregon Board of Licensed Professional Counselors and Therapists;

(v) Oregon Board of Dentistry;

(vi) State Board of Massage Therapists;

(vii) Oregon Board of Naturopathic Medicine;

(viii) Oregon State Board of Nursing;

(ix) Oregon Board of Optometry;

(x) State Board of Pharmacy;

(xi) Oregon Medical Board;

(xii) Occupational Therapy Licensing Board;

(xiii) Oregon Board of Physical Therapy;

(xiv) Oregon Board of Psychology;

(xv) Board of Medical Imaging;

(xvi) State Board of Direct Entry Midwifery;

(xvii) Respiratory Therapist and Polysomnographic Technologist Licensing Board;

(xviii) Board of Registered Polysomnographic Technologists;

(xix) Board of Licensed Dietitians **and Nutritionists**; and

(xx) State Mortuary and Cemetery Board;

(B) An emergency medical services provider licensed by the Oregon Health Authority under ORS 682.216;

(C) A clinical laboratory licensed under ORS 438.110;

(D) A health care facility as defined in ORS 442.015;

(E) A home health agency licensed under ORS 443.015;

(F) A hospice program licensed under ORS 443.860; or

(G) Any other person that provides health care or that bills for or is compensated for health care provided, in the normal course of business.

(b) "Health care provider" does not include any individual listed in paragraph (a) of this subsection when providing services as an employee of or under contract with:

(A) A school district, as defined in ORS 332.002;

(B) A public charter school, as defined in ORS 338.005; or

(C) An education service district, as defined in ORS 334.003.

(7) "Interpretation service company" means an entity, or a person acting on behalf of an entity, that is in the business of arranging for health care interpreters to work with health care providers in this state.

(8) "Person with limited English proficiency" means a person who, by reason of place of birth or culture, communicates in a language other than English and does not communicate in English with adequate ability to communicate effectively with a health care provider.

(9) "Prepaid managed care health services organization" has the meaning given that term in ORS 414.025.

(10) "Qualified health care interpreter" means an individual who has been issued a valid letter of qualification from the authority under ORS 413.558.

(11) "Sight translate" means to translate a written document into spoken or signed language.

SECTION 19. ORS 431A.850, as amended by section 3, chapter 438, Oregon Laws 2023, is amended to read:

431A.850. As used in ORS 431A.855 to 431A.900:

(1) "Dental director" means a dentist, as defined in ORS 679.010, employed by a coordinated care organization, dental clinic or office, or a system of dental clinics or offices, for the purpose of overseeing the operations of the dental clinic or office, or the system of dental clinics or offices, and ensuring the delivery of quality dental care within the clinic, office or system.

(2) "Dispense" and "dispensing" have the meanings given those terms in ORS 689.005.

(3) "Drug outlet" has the meaning given that term in ORS 689.005.

(4) "Health professional regulatory board" means a health professional regulatory board, as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and Nutritionists** and the Behavior Analysis Regulatory Board.

(5) "Medical director" means a physician employed by a coordinated care organization, hospital, health care clinic or system of hospitals or health care clinics for the purposes of overseeing the operations of the coordinated care organization, hospital, clinic or system and ensuring the delivery of quality health care within the coordinated care organization, hospital, clinic or system.

(6) "Patient" means:

(a) The individual to whom the prescription drug is prescribed; or

(b) If the prescription drug is prescribed by a veterinarian for an animal, the individual to whom the prescription drug is dispensed on behalf of the animal.

(7) "Pharmacist" means:

(a) A pharmacist as defined in ORS 689.005; or

(b) An individual licensed to practice pharmacy in another state, if the requirements for licensure are similar, as determined by the Oregon Health Authority, to the requirements for being licensed as a pharmacist as defined in ORS 689.005.

(8) "Pharmacy director" means a pharmacist employed by a coordinated care organization, pharmacy or system of pharmacies for the purposes of overseeing the operations of the coordinated care organization, pharmacy or system and ensuring the delivery of quality pharmaceutical care within the coordinated care organization, pharmacy or system.

(9) "Practitioner" means:

(a) A practitioner as defined in ORS 689.005; or

(b) An individual licensed to practice a profession in another state, if the requirements for licensure are similar, as determined by the authority, to the requirements for being licensed as a practitioner as defined in ORS 689.005.

(10) "Prescription" has the meaning given that term in ORS 475.005.

(11) "Prescription drug" has the meaning given that term in ORS 689.005.

(12) "Veterinarian" means a person licensed to practice veterinary medicine under ORS chapter 686.

SECTION 20. ORS 433.045 is amended to read:

433.045. (1) As used in this section:

(a) "Health care provider" means an individual licensed by a health professional regulatory board, as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and Nutritionists** or the Behavior Analysis Regulatory Board.

(b) "HIV test" means a test of an individual for the presence of HIV, or for antibodies or antigens that result from HIV infection, or for any other substance specifically indicating infection with HIV.

(c) "Insurance producer" has the meaning given that term in ORS 746.600.

(d) "Insurance-support organization" has the meaning given that term in ORS 746.600.

(e) "Insurer" has the meaning given that term in ORS 731.106.

(2) Except as provided in ORS 433.017, 433.055 (2) and 433.080, a health care provider or the provider's designee shall, before subjecting an individual to an HIV test:

(a) Notify the individual being tested; and

(b) Allow the individual being tested the opportunity to decline the test.

(3) The notification and opportunity to decline testing required under subsection (2) of this section may be verbal or in writing, and may be contained in a general medical consent form.

(4)(a) Regardless of the manner of receipt or the source of the information, including information received from the tested individual, a person may not disclose or be compelled to disclose the identity of any individual upon whom an HIV-related test is performed, or the results of such a test in a manner that permits identification of the subject of the test, except as required or permitted by federal law, the law of this state or any rule, including any authority rule considered necessary for public health or health care purposes, or as authorized by the individual whose blood is tested.

(b) This subsection does not apply to an individual acting in a private capacity and not in an employment, occupational or professional capacity.

1 (5) A person who complies with the requirements of this section is not subject to an action for
2 civil damages.

3 (6) Whenever an insurer, insurance producer or insurance-support organization asks an appli-
4 cant for insurance to take an HIV test in connection with an application for insurance, the insurer,
5 insurance producer or insurance-support organization must reveal the use of the test to the appli-
6 cant and obtain the written consent of the applicant. The consent form must disclose the purpose
7 of the test and the persons to whom the results may be disclosed.

8 **SECTION 21.** ORS 433.443, as amended by section 81, chapter 73, Oregon Laws 2024, is
9 amended to read:

10 433.443. (1) As used in this section:

11 (a) “Covered entity” means:

12 (A) The Children’s Health Insurance Program;

13 (B) A health insurer that is an insurer as defined in ORS 731.106 and that issues health insur-
14 ance as defined in ORS 731.162;

15 (C) The state medical assistance program; and

16 (D) A health care provider.

17 (b) “Health care provider” includes but is not limited to:

18 (A) A psychologist, occupational therapist, regulated social worker, professional counselor or
19 marriage and family therapist licensed or otherwise authorized to practice under ORS chapter 675
20 or an employee of the psychologist, occupational therapist, regulated social worker, professional
21 counselor or marriage and family therapist;

22 (B) A physician or physician associate licensed under ORS chapter 677, an acupuncturist li-
23 censed under ORS 677.759 or an employee of the physician, physician associate or acupuncturist;

24 (C) A nurse or nursing home administrator licensed under ORS chapter 678 or an employee of
25 the nurse or nursing home administrator;

26 (D) A dentist licensed under ORS chapter 679 or an employee of the dentist;

27 (E) A dental hygienist or denturist licensed under ORS chapter 680 or an employee of the dental
28 hygienist or denturist;

29 (F) A speech-language pathologist or audiologist licensed under ORS chapter 681 or an employee
30 of the speech-language pathologist or audiologist;

31 (G) An emergency medical services provider licensed under ORS chapter 682;

32 (H) An optometrist licensed under ORS chapter 683 or an employee of the optometrist;

33 (I) A chiropractic physician licensed under ORS chapter 684 or an employee of the chiropractic
34 physician;

35 (J) A naturopathic physician licensed under ORS chapter 685 or an employee of the naturopathic
36 physician;

37 (K) A massage therapist licensed under ORS 687.011 to 687.250 or an employee of the massage
38 therapist;

39 (L) A direct entry midwife licensed under ORS 687.405 to 687.495 or an employee of the direct
40 entry midwife;

41 (M) A physical therapist licensed under ORS 688.010 to 688.201 or an employee of the physical
42 therapist;

43 (N) A medical imaging licensee under ORS 688.405 to 688.605 or an employee of the medical
44 imaging licensee;

45 (O) A respiratory care practitioner licensed under ORS 688.815 or an employee of the respir-

1 atory care practitioner;

2 (P) A polysomnographic technologist licensed under ORS 688.819 or an employee of the poly-
3 somnographic technologist;

4 (Q) A pharmacist licensed under ORS chapter 689 or an employee of the pharmacist;

5 (R) A dietitian **or nutritionist** licensed under ORS 691.405 to 691.485 or an employee of the
6 dietitian **or nutritionist**;

7 (S) A funeral service practitioner licensed under ORS chapter 692 or an employee of the funeral
8 service practitioner;

9 (T) A health care facility as defined in ORS 442.015;

10 (U) A home health agency as defined in ORS 443.014;

11 (V) A hospice program as defined in ORS 443.850;

12 (W) A clinical laboratory as defined in ORS 438.010;

13 (X) A pharmacy as defined in ORS 689.005; and

14 (Y) Any other person or entity that furnishes, bills for or is paid for health care in the normal
15 course of business.

16 (c) "Individual" means a natural person.

17 (d) "Individually identifiable health information" means any oral or written health information
18 in any form or medium that is:

19 (A) Created or received by a covered entity, an employer or a health care provider that is not
20 a covered entity; and

21 (B) Identifiable to an individual, including demographic information that identifies the individual,
22 or for which there is a reasonable basis to believe the information can be used to identify an indi-
23 vidual, and that relates to:

24 (i) The past, present or future physical or mental health or condition of an individual;

25 (ii) The provision of health care to an individual; or

26 (iii) The past, present or future payment for the provision of health care to an individual.

27 (e) "Legal representative" means attorney at law, person holding a general power of attorney,
28 guardian, conservator or any person appointed by a court to manage the personal or financial affairs
29 of a person, or agency legally responsible for the welfare or support of a person.

30 (2)(a) During a public health emergency declared under ORS 433.441, the Public Health Director
31 may, as necessary to appropriately respond to the public health emergency:

32 (A) Adopt reporting requirements for and provide notice of those requirements to health care
33 providers, institutions and facilities for the purpose of obtaining information directly related to the
34 public health emergency;

35 (B) After consultation with appropriate medical experts, create and require the use of diagnostic
36 and treatment protocols to respond to the public health emergency and provide notice of those
37 protocols to health care providers, institutions and facilities;

38 (C) Order, or authorize local public health administrators to order, public health measures ap-
39 propriate to the public health threat presented;

40 (D) Authorize pharmacists licensed under ORS chapter 689 to administer vaccines to persons
41 who are three years of age or older;

42 (E) Upon approval of the Governor, take other actions necessary to address the public health
43 emergency and provide notice of those actions to health care providers, institutions and facilities,
44 including public health actions authorized by ORS 431A.015;

45 (F) Take any enforcement action authorized by ORS 431A.010, including the imposition of civil

penalties of up to \$500 per day against individuals, institutions or facilities that knowingly fail to comply with requirements resulting from actions taken in accordance with the powers granted to the Public Health Director under subparagraphs (A), (B) and (E) of this paragraph; and

(G) The authority granted to the Public Health Director under this section:

(i) Supersedes any authority granted to a local public health authority if the local public health authority acts in a manner inconsistent with guidelines established or rules adopted by the director under this section; and

(ii) Does not supersede the general authority granted to a local public health authority or a local public health administrator except as authorized by law or necessary to respond to a public health emergency.

(b) The authority of the Public Health Director to take administrative action, and the effectiveness of any action taken, under paragraph (a)(A), (B) and (D) to (G) of this subsection terminates upon the expiration of the declared state of public health emergency, unless the actions are continued under other applicable law.

(3) Civil penalties under subsection (2) of this section shall be imposed in the manner provided in ORS 183.745. The Public Health Director must establish that the individual, institution or facility subject to the civil penalty had actual notice of the action taken that is the basis for the penalty. The maximum aggregate total for penalties that may be imposed against an individual, institution or facility under subsection (2) of this section is \$500 for each day of violation, regardless of the number of violations of subsection (2) of this section that occurred on each day of violation.

(4)(a) During a declared state of public health emergency, the Public Health Director and local public health administrators shall be given immediate access to individually identifiable health information necessary to:

(A) Determine the causes of an illness related to the public health emergency;

(B) Identify persons at risk;

(C) Identify patterns of transmission;

(D) Provide treatment; and

(E) Take steps to control the disease.

(b) Individually identifiable health information accessed as provided by paragraph (a) of this subsection may not be used for conducting nonemergency epidemiologic research or to identify persons at risk for post-traumatic mental health problems, or for any other purpose except the purposes listed in paragraph (a) of this subsection.

(c) Individually identifiable health information obtained by the Public Health Director or local public health administrators under this subsection may not be disclosed without written authorization of the identified individual except:

(A) Directly to the individual who is the subject of the information or to the legal representative of that individual;

(B) To state, local or federal agencies authorized to receive such information by state or federal law;

(C) To identify or to determine the cause or manner of death of a deceased individual; or

(D) Directly to a health care provider for the evaluation or treatment of a condition that is the subject of a declaration of a state of public health emergency issued under ORS 433.441.

(d) Upon expiration of the state of public health emergency, the Public Health Director or local public health administrators may not use or disclose any individually identifiable health information that has been obtained under this section. If a state of emergency that is related to the state of

1 public health emergency has been declared under ORS 401.165, the Public Health Director and local
2 public health administrators may continue to use any individually identifiable information obtained
3 as provided under this section until termination of the state of emergency.

4 (5) All civil penalties recovered under this section shall be paid into the State Treasury and
5 credited to the General Fund and are available for general governmental expenses.

6 (6) The Public Health Director may request assistance in enforcing orders issued pursuant to
7 this section from state or local law enforcement authorities. If so requested by the Public Health
8 Director, state and local law enforcement authorities, to the extent resources are available, shall
9 assist in enforcing orders issued pursuant to this section.

10 (7) If the Oregon Health Authority adopts temporary rules to implement the provisions of this
11 section, the rules adopted are not subject to the provisions of ORS 183.335 (6)(a). The authority may
12 amend temporary rules adopted pursuant to this subsection as often as necessary to respond to the
13 public health emergency.

14 **SECTION 22.** ORS 441.044 is amended to read:

15 441.044. (1) Rules adopted pursuant to ORS 441.025 shall include procedures for the filing of
16 complaints as to the standard of care in any health care facility and provide for the confidentiality
17 of the identity of any complainant.

18 (2) A health care facility, or person acting in the interest of the facility, may not take any dis-
19 ciplinary or other adverse action against any employee who in good faith brings evidence of inap-
20 propriate care or any other violation of law or rules to the attention of the proper authority solely
21 because of the employee's action as described in this subsection.

22 (3) Any employee who has knowledge of inappropriate care or any other violation of law or
23 rules shall utilize established reporting procedures of the health care facility administration before
24 notifying the Department of Human Services, Oregon Health Authority or other state agency of the
25 alleged violation, unless the employee believes that patient health or safety is in immediate jeopardy
26 or the employee makes the report to the department or the authority under the confidentiality pro-
27 visions of subsection (1) of this section.

28 (4) The protection of health care facility employees under subsection (2) of this section shall
29 commence with the reporting of the alleged violation by the employee to the administration of the
30 health care facility or to the department, authority or other state agency pursuant to subsection (3)
31 of this section.

32 (5) Any person suffering loss or damage due to any violation of subsection (2) of this section has
33 a right of action for damages in addition to other appropriate remedy.

34 (6) The provisions of this section do not apply to a nursing staff, as defined in ORS 441.179, who
35 claims to be aggrieved by a violation of ORS 441.181 committed by a hospital.

36 (7) Information obtained by the department or the authority during an investigation of a com-
37 plaint or reported violation under this section is confidential and not subject to public disclosure
38 under ORS 192.311 to 192.478. Upon the conclusion of the investigation, the department or the au-
39 thority may publicly release a report of the department's or the authority's findings but may not
40 include information in the report that could be used to identify the complainant or any patient at
41 the health care facility. The department or the authority may use any information obtained during
42 an investigation in an administrative or judicial proceeding concerning the licensing of a health care
43 facility, and may report information obtained during an investigation to a health professional regu-
44 latory board as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of
45 Licensed Dietitians **and Nutritionists** or the Behavior Analysis Regulatory Board as that informa-

tion pertains to a licensee of the board.

SECTION 23. ORS 676.108 is amended to read:

676.108. For purposes of ORS 676.110, 676.115, 676.120 and 676.130, “health professional regulatory board” means a health professional regulatory board, as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and Nutritionists** and the Behavior Analysis Regulatory Board.

SECTION 24. ORS 676.150 is amended to read:

676.150. (1) As used in this section:

(a) “Board” means the:

(A) State Board of Examiners for Speech-Language Pathology and Audiology;

(B) State Board of Chiropractic Examiners;

(C) State Board of Licensed Social Workers;

(D) Oregon Board of Licensed Professional Counselors and Therapists;

(E) Oregon Board of Dentistry;

(F) Board of Licensed Dietitians **and Nutritionists**;

(G) State Board of Massage Therapists;

(H) Oregon Board of Naturopathic Medicine;

(I) Oregon State Board of Nursing;

(J) Long Term Care Administrators Board;

(K) Oregon Board of Optometry;

(L) State Board of Pharmacy;

(M) Oregon Medical Board;

(N) Occupational Therapy Licensing Board;

(O) Oregon Board of Physical Therapy;

(P) Oregon Board of Psychology;

(Q) Board of Medical Imaging;

(R) State Board of Direct Entry Midwifery;

(S) State Board of Denture Technology;

(T) Respiratory Therapist and Polysomnographic Technologist Licensing Board;

(U) Oregon Health Authority, to the extent that the authority licenses emergency medical services providers;

(V) Oregon State Veterinary Medical Examining Board;

(W) State Mortuary and Cemetery Board; or

(X) Behavior Analysis Regulatory Board.

(b) “Licensee” means a health professional licensed or certified by or registered with a board.

(c) “Prohibited conduct” means conduct by a licensee that:

(A) Constitutes a criminal act against a patient or client; or

(B) Constitutes a criminal act that creates a risk of harm to a patient or client.

(d) “Unprofessional conduct” means conduct unbecoming a licensee or detrimental to the best interests of the public, including conduct contrary to recognized standards of ethics of the licensee’s profession or conduct that endangers the health, safety or welfare of a patient or client.

(2) Unless state or federal laws relating to confidentiality or the protection of health information prohibit disclosure, a licensee who has reasonable cause to believe that another licensee has engaged in prohibited or unprofessional conduct shall report the conduct to the board responsible for the licensee who is believed to have engaged in the conduct. The reporting licensee shall report the

1 conduct without undue delay, but in no event later than 10 working days after the reporting licensee
2 learns of the conduct.

3 (3) A licensee who is convicted of a misdemeanor or felony or who is arrested for a felony crime
4 shall report the conviction or arrest to the licensee's board within 10 days after the conviction or
5 arrest.

6 (4) The board responsible for a licensee who is reported to have engaged in prohibited or un-
7 professional conduct shall investigate in accordance with the board's rules. If the board has rea-
8 sonable cause to believe that the licensee has engaged in prohibited conduct, the board shall present
9 the facts to an appropriate law enforcement agency without undue delay, but in no event later than
10 10 working days after the board finds reasonable cause to believe that the licensee engaged in pro-
11 hibited conduct.

12 (5) A licensee who fails to report prohibited or unprofessional conduct as required by subsection
13 (2) of this section or the licensee's conviction or arrest as required by subsection (3) of this section
14 is subject to discipline by the board responsible for the licensee.

15 (6) A licensee who fails to report prohibited conduct as required by subsection (2) of this section
16 commits a Class A violation.

17 (7)(a) Notwithstanding any other provision of law, a report under subsection (2) or (3) of this
18 section is confidential under ORS 676.175.

19 (b) A board may disclose a report as provided in ORS 676.177.

20 (c) If the Health Licensing Office receives a report described in this subsection, the report is
21 confidential and the office may only disclose the report pursuant to ORS 676.595 and 676.599.

22 (8) Except as part of an application for a license or for renewal of a license and except as pro-
23 vided in subsection (3) of this section, a board may not require a licensee to report the licensee's
24 criminal conduct.

25 (9) The obligations imposed by this section are in addition to and not in lieu of other obligations
26 to report unprofessional conduct as provided by statute.

27 (10) A licensee who reports to a board in good faith as required by subsection (2) of this section
28 is immune from civil liability for making the report.

29 (11) A board and the members, employees and contractors of the board are immune from civil
30 liability for actions taken in good faith as a result of a report received under subsection (2) or (3)
31 of this section.

32 **SECTION 25.** ORS 676.350 is amended to read:

33 676.350. (1) As used in this section:

34 (a) "Expedited partner therapy" means the practice of prescribing or dispensing antibiotic drugs
35 for the treatment of a sexually transmitted infection to the partner of a patient without first exam-
36 ining the partner of the patient.

37 (b) "Partner of a patient" means a person whom a patient diagnosed with a sexually transmitted
38 infection identifies as a sexual partner of the patient.

39 (c) "Practitioner" has the meaning given that term in ORS 475.005.

40 (2) A health professional regulatory board, as defined in ORS 676.160, the Long Term Care Ad-
41 ministrators Board, the Board of Licensed Dietitians **and Nutritionists** and the Behavior Analysis
42 Regulatory Board may adopt rules permitting practitioners to practice expedited partner therapy.
43 If a board adopts rules permitting practitioners to practice expedited partner therapy, the board
44 shall consult with the Oregon Health Authority to determine which sexually transmitted infections
45 are appropriately addressed with expedited partner therapy.

(3) A prescription issued in the practice of expedited partner therapy authorized by the rules of a board is valid even if the name of the patient for whom the prescription is intended is not on the prescription.

(4) The authority shall make available informational material about expedited partner therapy that a practitioner may distribute to patients.

SECTION 26. ORS 676.400 is amended to read:

676.400. (1) It is the intention of the Legislative Assembly to achieve the goal of universal access to adequate levels of high quality health care at an affordable cost for all Oregonians, regardless of ethnic or cultural background.

(2) The Legislative Assembly finds that:

(a) Access to health care is of value when it leads to treatment that substantially improves health outcomes;

(b) Health care is most effective when it accounts for the contribution of culture to health status and health outcomes;

(c) Ethnic and racial minorities experience more than their statistically fair share of undesirable health outcomes;

(d) The lack of licensed health care professionals from ethnic and racial minorities or who are bilingual contributes to the inadequacy of health outcomes in communities of color in this state; and

(e) The development of a partnership between health professional regulatory boards and communities of color to increase the representation of people of color and bilingual people in health care professions has significant potential to improve the health outcomes of people of color and bilingual citizens of this state.

(3) Health professional regulatory boards shall establish programs to increase the representation of people of color and bilingual people on the boards and in the professions that they regulate. Such programs must include activities to promote the education, recruitment and professional practice of members of these targeted populations in Oregon.

(4) Each health professional regulatory board shall maintain records of the racial and ethnic makeup of applicants and professionals regulated by the board. Such information shall be requested from applicants and the professionals regulated who shall be informed in writing that the provision of such information is voluntary and not required.

(5) Each health professional regulatory board shall report biennially to the Legislative Assembly in the manner required by ORS 192.245. The report shall contain:

(a) Data detailing the efforts of the board to comply with the requirements of subsection (3) of this section; and

(b) Data collected under subsection (4) of this section documenting the ethnic and racial makeup of the applicants and of the professionals regulated by the board.

(6) For purposes of this section, "health professional regulatory board" means a health professional regulatory board, as defined in ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and Nutritionists** and the Behavior Analysis Regulatory Board.

SECTION 27. ORS 676.410 is amended to read:

676.410. (1) As used in this section, "health care workforce regulatory board" means the:

(a) State Board of Examiners for Speech-Language Pathology and Audiology;

(b) State Board of Chiropractic Examiners;

(c) State Board of Licensed Social Workers;

(d) Oregon Board of Licensed Professional Counselors and Therapists;

- 1 (e) Oregon Board of Dentistry;
- 2 (f) Board of Licensed Dietitians **and Nutritionists**;
- 3 (g) State Board of Massage Therapists;
- 4 (h) Oregon Board of Naturopathic Medicine;
- 5 (i) Oregon State Board of Nursing;
- 6 (j) Respiratory Therapist and Polysomnographic Technologist Licensing Board;
- 7 (k) Oregon Board of Optometry;
- 8 (L) State Board of Pharmacy;
- 9 (m) Oregon Medical Board;
- 10 (n) Occupational Therapy Licensing Board;
- 11 (o) Oregon Board of Physical Therapy;
- 12 (p) Oregon Board of Psychology; and
- 13 (q) Board of Medical Imaging.

14 (2) An individual applying to renew a license with a health care workforce regulatory board
15 must provide the information prescribed by the Oregon Health Authority pursuant to subsection (3)
16 of this section to the health care workforce regulatory board. Except as provided in subsection (4)
17 of this section, a health care workforce regulatory board may not approve an application to renew
18 a license until the applicant provides the information.

19 (3) The authority shall collaborate with each health care workforce regulatory board to adopt
20 rules establishing:

21 (a) The information that must be provided to a health care workforce regulatory board under
22 subsection (2) of this section, which may include:

- 23 (A) Demographics, including race and ethnicity.
- 24 (B) Education and training information.
- 25 (C) License information.
- 26 (D) Employment information.
- 27 (E) Primary and secondary practice information.
- 28 (F) Anticipated changes in the practice.
- 29 (G) Languages spoken.

30 (b) The manner and form of providing information under subsection (2) of this section.

31 (4)(a) Subject to paragraph (b) of this subsection, a health care workforce regulatory board shall
32 report health care workforce information collected under subsection (2) of this section to the au-
33 thority.

34 (b) Except as provided in paragraph (c) of this subsection, personally identifiable information
35 collected under subsection (2) of this section is confidential and a health care workforce regulatory
36 board and the authority may not release such information.

37 (c) A health care workforce regulatory board may release personally identifiable information
38 collected under subsection (2) of this section to a law enforcement agency for investigative purposes
39 or to the authority for state health planning purposes.

40 (5) A health care workforce regulatory board may adopt rules to perform the board's duties
41 under this section.

42 (6) In addition to renewal fees that may be imposed by a health care workforce regulatory board,
43 the authority shall establish fees to be paid by individuals applying to renew a license with a health
44 care workforce regulatory board. The amount of fees established under this subsection must be
45 reasonably calculated to reimburse the actual cost of obtaining or reporting information as required

by subsection (2) of this section.

(7) Using information collected under subsection (2) of this section, the authority shall create and maintain a health care workforce database. The authority shall provide data from the health care workforce database and may provide data from other relevant sources, including data related to the diversity of this state's health care workforce, upon request to state agencies and to the Legislative Assembly. The authority may contract with a private or public entity to establish and maintain the database and to perform data analysis.

SECTION 28. Section 3, chapter 380, Oregon Laws 2015, is amended to read:

Sec. 3. (1) For individuals applying to renew a license to practice a regulated profession with the Oregon Board of Dentistry, Board of Licensed Dietitians **and Nutritionists**, Oregon State Board of Nursing, State Board of Pharmacy, Oregon Medical Board, Occupational Therapy Licensing Board and Physical Therapist Licensing Board, the amendments to ORS 676.410 by section 1, chapter 380, Oregon Laws 2015, apply to applications to renew a license to practice a regulated profession that are submitted on or after January 1, 2016.

(2) For individuals applying to renew a license to practice a regulated profession with the State Board of Examiners for Speech-Language Pathology and Audiology, State Board of Chiropractic Examiners, State Board of Licensed Social Workers, Oregon Board of Licensed Professional Counselors and Therapists, State Board of Massage Therapists, Oregon Board of Naturopathic Medicine, Respiratory Therapist and Polysomnographic Technologist Licensing Board, Oregon Board of Optometry, Oregon Board of Psychology and Board of Medical Imaging, the amendments to ORS 676.410 by section 1, chapter 380, Oregon Laws 2015, apply to applications to renew a license to practice a regulated profession that are submitted on or after the date on which rules are adopted for health care workers regulated by a health care workforce regulatory board pursuant to ORS 676.410 (3).

SECTION 29. ORS 676.565 is amended to read:

676.565. Pursuant to ORS 676.568, the Health Licensing Office shall provide administrative and regulatory oversight and centralized service for the following boards, councils and programs:

- (1) Board of Athletic Trainers, as provided in ORS 688.701 to 688.734;
- (2) Board of Cosmetology, as provided in ORS 690.005 to 690.225;
- (3) State Board of Denture Technology, as provided in ORS 680.500 to 680.565;
- (4) State Board of Direct Entry Midwifery, as provided in ORS 687.405 to 687.495;
- (5) Respiratory Therapist and Polysomnographic Technologist Licensing Board, as provided in ORS 688.800 to 688.840;
- (6) Environmental Health Registration Board, as provided in ORS chapter 700;
- (7) Board of Electrologists and Body Art Practitioners, as provided in ORS 690.350 to 690.410;
- (8) Advisory Council on Hearing Aids, as provided in ORS 694.015 to 694.170;
- (9) Sexual Offense Treatment Board, as provided in ORS 675.365 to 675.410;
- (10) Long Term Care Administrators Board, as provided in ORS 678.710 to 678.820;
- (11) Board of Licensed Dietitians **and Nutritionists**, as provided in ORS 691.405 to 691.485;
- (12) Behavior Analysis Regulatory Board, as provided in ORS 676.806;
- (13) Board of Certified Advanced Estheticians, as provided in ORS 676.630 to 676.660;
- (14) Art therapy, as provided in ORS 681.740 to 681.758;
- (15) Lactation consultation, as provided in ORS 676.665 to 676.689;
- (16) Music therapy, as provided in ORS 681.700 to 681.730;
- (17) Genetic counseling, as provided in ORS 676.730 to 676.748;

(18) State Board of Sign Language Interpreters, as provided in ORS 676.750 to 676.789; and

(19) Temporary staffing agencies, as provided in ORS 676.695 to 676.725.

SECTION 30. ORS 676.595 is amended to read:

676.595. (1) As used in this section, "board" means the:

(a) Sexual Offense Treatment Board established under ORS 675.395.

(b) Behavior Analysis Regulatory Board created under ORS 676.806.

(c) Long Term Care Administrators Board established under ORS 678.800.

(d) State Board of Denture Technology established under ORS 680.556.

(e) State Board of Direct Entry Midwifery established under ORS 687.470.

(f) Board of Athletic Trainers established under ORS 688.705.

(g) Respiratory Therapist and Polysomnographic Technologist Licensing Board established under ORS 688.820.

(h) Board of Licensed Dietitians **and Nutritionists** established under ORS 691.485.

(i) Environmental Health Registration Board established under ORS 700.210.

(2) Except to the extent that disclosure is necessary to conduct a full and proper investigation, the Health Licensing Office may not disclose information, including complaints and information identifying complainants, obtained by the office as part of an investigation conducted under:

(a) ORS 675.365 to 675.410, 676.802 to 676.830, 678.710 to 678.820, 680.500 to 680.565, 687.405 to 687.495, 688.701 to 688.734, 688.800 to 688.840 or 691.405 to 691.485 or ORS chapter 700.

(b) ORS 676.560 to 676.625 if the investigation is related to the regulation of:

(A) Sexual abuse specific treatment under ORS 675.365 to 675.410;

(B) Applied behavior analysis under ORS 676.802 to 676.830;

(C) Nursing home administration and residential care facility administration under ORS 678.710 to 678.820;

(D) The practice of denture technology under ORS 680.500 to 680.565;

(E) Direct entry midwifery under ORS 687.405 to 687.495;

(F) Athletic training under ORS 688.701 to 688.734;

(G) Respiratory care and polysomnography under ORS 688.800 to 688.840;

(H) Dietetics under ORS 691.405 to 691.485; or

(I) Environmental or waste water sanitation under ORS chapter 700.

(3) Notwithstanding subsection (2) of this section, if the office or board decides not to impose a disciplinary sanction after conducting an investigation described in subsection (2) of this section:

(a) The office shall disclose information obtained as part of the investigation if the person requesting the information demonstrates by clear and convincing evidence that the public interest in disclosure outweighs other interests in nondisclosure, including the public interest in nondisclosure.

(b) The office may disclose to a complainant who made a complaint related to the investigation a written summary of information obtained as part of the investigation to the extent that disclosure is necessary to explain the office's or board's decision. The person who is the subject of the investigation may review and obtain a copy of a written summary disclosed under this paragraph after the office has redacted any information identifying the complainant.

(4) Notwithstanding subsection (2) of this section, if a decision is made to impose a disciplinary sanction and to issue a notice of intent to impose a disciplinary sanction after conducting an investigation described in subsection (2) of this section, upon written request by the person who is the subject of the investigation, the office shall disclose to the person all information obtained by the office or board during the investigation, except that the office may not disclose:

(a) Information that is otherwise privileged or confidential under state or federal law.

(b) Information identifying a person who provided information that led to the investigation, unless the person will provide testimony at a hearing arising out of the investigation.

(c) Information identifying a complainant.

(d) Reports of expert witnesses.

(5) Information disclosed to a person under subsection (4) of this section may be further disclosed by the person only to the extent that disclosure is necessary to prepare for a hearing arising out of the investigation.

(6) The office shall disclose:

(a) Any notice related to the imposition of a disciplinary sanction.

(b) A final order related to the imposition of a disciplinary sanction.

(c) An emergency suspension order.

(d) A consent order or stipulated agreement that involves the conduct of a person against whom discipline is sought.

(e) Information to further an investigation into board conduct under ORS 192.685.

(7) The office or board must summarize the factual basis for the office's or board's disposition of:

(a) A final order related to the imposition of a disciplinary sanction;

(b) An emergency suspension order; or

(c) A consent order or stipulated agreement that involves the conduct of a person against whom discipline is sought.

(8)(a) An office or board record or order, or any part of an office or board record or order, that is obtained during an investigation described in subsection (2) of this section, during a contested case proceeding or as a result of entering into a consent order or stipulated agreement is not admissible as evidence and may not preclude an issue or claim in a civil proceeding.

(b) This subsection does not apply to a proceeding between the office or board and a person against whom discipline is sought as otherwise authorized by law.

(9)(a) Notwithstanding subsection (2) of this section, the office is not publicly disclosing information when the office permits other public officials and members of the press to attend executive sessions where information obtained as part of an investigation is discussed. Public officials and members of the press attending such executive sessions may not disclose information obtained as part of an investigation to any other member of the public.

(b) For purposes of this subsection, "public official" means a member, member-elect or employee of a public entity as defined in ORS 676.177.

(10) The office may establish fees reasonably calculated to reimburse the actual cost of disclosing information to a person against whom discipline is sought as required by subsection (4) of this section.

SECTION 31. ORS 676.850 is amended to read:

676.850. (1) As used in this section, "board" means the:

(a) State Board of Examiners for Speech-Language Pathology and Audiology;

(b) State Board of Chiropractic Examiners;

(c) State Board of Licensed Social Workers;

(d) Oregon Board of Licensed Professional Counselors and Therapists;

(e) Oregon Board of Dentistry;

(f) Board of Licensed Dietitians **and Nutritionists**;

- 1 (g) State Board of Massage Therapists;
- 2 (h) Oregon Board of Naturopathic Medicine;
- 3 (i) Oregon State Board of Nursing;
- 4 (j) Long Term Care Administrators Board;
- 5 (k) Oregon Board of Optometry;
- 6 (L) State Board of Pharmacy;
- 7 (m) Oregon Medical Board;
- 8 (n) Occupational Therapy Licensing Board;
- 9 (o) Oregon Board of Physical Therapy;
- 10 (p) Oregon Board of Psychology;
- 11 (q) Board of Medical Imaging;
- 12 (r) State Board of Direct Entry Midwifery;
- 13 (s) State Board of Denture Technology;
- 14 (t) Respiratory Therapist and Polysomnographic Technologist Licensing Board;
- 15 (u) Home Care Commission;
- 16 (v) Oregon Health Authority, to the extent that the authority licenses emergency medical ser-

17 vice providers; and

- 18 (w) Health Licensing Office, to the extent that the office licenses lactation consultants.

19 (2)(a) A board shall adopt rules to require a person authorized to practice the profession regu-
 20 lated by the board to complete cultural competency continuing education. Completion of the con-
 21 tinuing education described in this subsection shall be a condition of renewal of an authorization
 22 to practice the profession regulated by the board every other time that the person's authorization
 23 is subject to renewal.

24 (b) Cultural competency continuing education courses may be taken in addition to or, if a board
 25 determines that the cultural competency continuing education fulfills existing continuing education
 26 requirements, instead of any other continuing education requirement imposed by the board.

27 (c) A board shall consider the availability of the continuing education described in this sub-
 28 section when adopting rules regarding the required number of credits of continuing education.

29 (d) A board shall encourage, but may not require, the completion of continuing education ap-
 30 proved by the Oregon Health Authority under ORS 413.450. A board shall accept as meeting the
 31 requirements of this subsection continuing education that meets the skills requirements established
 32 by the authority by rule.

33 (3) The requirements of subsection (2) of this section do not apply to a person authorized to
 34 practice a profession regulated by a board if the person is:

- 35 (a) Retired and not practicing the profession in any state;
- 36 (b) Not practicing the profession in this state; or
- 37 (c) Residing in this state but not practicing the profession in any state.

38 **SECTION 32.** ORS 676.992 is amended to read:

39 676.992. (1) Except as provided in subsection (3) of this section, and in addition to any other
 40 penalty or remedy provided by law, the Health Licensing Office may impose a civil penalty not to
 41 exceed \$5,000 for each violation of the following statutes and any rule adopted under the following
 42 statutes:

- 43 (a) ORS 688.701 to 688.734 (athletic training);
- 44 (b) ORS 690.005 to 690.225 (cosmetology);
- 45 (c) ORS 680.500 to 680.565 (denture technology);

- 1 (d) Subject to ORS 676.616 and 687.445, ORS 687.405 to 687.495 (direct entry midwifery);
- 2 (e) ORS 690.350 to 690.410 (tattooing, electrolysis, body piercing, earlobe piercing, dermal im-
- 3 planting and scarification);
- 4 (f) ORS 694.015 to 694.170 (dealing in hearing aids);
- 5 (g) ORS 688.800 to 688.840 (respiratory therapy and polysomnography);
- 6 (h) ORS chapter 700 (environmental sanitation);
- 7 (i) ORS 675.365 to 675.410 (sexual abuse specific treatment);
- 8 (j) ORS 678.710 to 678.820 (nursing home administrators and residential care facility adminis-
- 9 trators);
- 10 (k) ORS 691.405 to 691.485 (dietitians **and nutritionists**);
- 11 (L) ORS 676.612 (prohibited acts);
- 12 (m) ORS 676.802 to 676.830 (applied behavior analysis);
- 13 (n) ORS 681.700 to 681.730 (music therapy);
- 14 (o) ORS 676.630 to 676.660 (advanced nonablative esthetics procedure);
- 15 (p) ORS 681.740 to 681.758 (art therapy);
- 16 (q) ORS 676.665 to 676.689 (lactation consultation);
- 17 (r) ORS 676.730 to 676.748 (genetic counseling); and
- 18 (s) ORS 676.750 to 676.789 (signed language interpretation).
- 19 (2) The office may take any other disciplinary action that it finds proper, including but not
- 20 limited to assessment of costs of disciplinary proceedings, not to exceed \$5,000, for violation of any
- 21 statute listed in subsection (1) of this section or any rule adopted under any statute listed in sub-
- 22 section (1) of this section.
- 23 (3) Subsection (1) of this section does not limit the amount of the civil penalty resulting from a
- 24 violation of ORS 694.042.
- 25 (4) In imposing a civil penalty under this section, the office shall consider the following factors:
- 26 (a) The immediacy and extent to which the violation threatens the public health or safety;
- 27 (b) Any prior violations of statutes, rules or orders;
- 28 (c) The history of the person incurring a penalty in taking all feasible steps to correct any vio-
- 29 lation; and
- 30 (d) Any other aggravating or mitigating factors.
- 31 (5) Civil penalties under this section shall be imposed as provided in ORS 183.745.
- 32 (6) The moneys received by the office from civil penalties under this section shall be deposited
- 33 in the Health Licensing Office Account and are continuously appropriated to the office for the ad-
- 34 ministration and enforcement of the laws the office is charged with administering and enforcing that
- 35 govern the person against whom the penalty was imposed.
- 36 **SECTION 33.** ORS 743B.454 is amended to read:
- 37 743B.454. (1) As used in this section:
- 38 (a) "Complete application" means a provider's application to a health insurer to become a cre-
- 39 dentialized provider that includes:
- 40 (A) Information required by the health insurer;
- 41 (B) Proof that the provider is licensed by a health professional regulatory board as defined in
- 42 ORS 676.160, the Long Term Care Administrators Board, the Board of Licensed Dietitians **and**
- 43 **Nutritionists** or the Behavior Analysis Regulatory Board;
- 44 (C) Proof of current registration with the Drug Enforcement Administration of the United States
- 45 Department of Justice, if applicable to the provider's practice; and

(D) Proof that the provider is covered by a professional liability insurance policy or certification meeting the health insurer's requirements.

(b) "Credentialing period" means the period beginning on the date a health insurer receives a complete application and ending on the date the health insurer approves or rejects the complete application or 90 days after the health insurer receives the complete application, whichever is earlier.

(c) "Health insurer" means an insurer that offers managed health insurance or preferred provider organization insurance, other than a health maintenance organization as defined in ORS 750.005.

(2) A health insurer shall approve or reject a complete application within 90 days of receiving the application.

(3)(a) A health insurer shall pay all claims for medical services covered by the health insurer that are provided by a provider during the credentialing period.

(b) A provider may submit claims for medical services provided during the credentialing period during or after the credentialing period.

(c) A health insurer may pay claims for medical services provided during the credentialing period:

(A) During or after the credentialing period.

(B) At the rate paid to nonparticipating providers.

(d) If a provider submits a claim for medical services provided during the credentialing period within six months after the end of the credentialing period, the health insurer may not deny payment of the claim on the basis of the health insurer's rules relating to timely claims submission.

(4) Subsection (3) of this section does not require a health insurer to pay claims for medical services provided during the credentialing period if:

(a) The provider was previously rejected or terminated as a participating provider in any health benefit plan underwritten or administered by the health insurer;

(b) The rejection or termination was due to the objectively verifiable failure of the provider to provide medical services within the recognized standards of the provider's profession; and

(c) The provider was given the opportunity to contest the rejection or termination before a panel of peers in a proceeding conducted in conformity with the Health Care Quality Improvement Act of 1986, 42 U.S.C. 11101 et seq.

SECTION 34. ORS 746.600, as amended by section 161, chapter 73, Oregon Laws 2024, is amended to read:

746.600. As used in ORS 746.600 to 746.690:

(1)(a) "Adverse underwriting decision" means any of the following actions with respect to insurance transactions involving insurance coverage that is individually underwritten:

(A) A declination of insurance coverage.

(B) A termination of insurance coverage.

(C) Failure of an insurance producer to apply for insurance coverage with a specific insurer that the insurance producer represents and that is requested by an applicant.

(D) In the case of life or health insurance coverage, an offer to insure at higher than standard rates.

(E) In the case of insurance coverage other than life or health insurance coverage:

(i) Placement by an insurer or insurance producer of a risk with a residual market mechanism, an unauthorized insurer or an insurer that specializes in substandard risks.

1 (ii) The charging of a higher rate on the basis of information that differs from that which the
2 applicant or policyholder furnished.

3 (iii) An increase in any charge imposed by the insurer for any personal insurance in connection
4 with the underwriting of insurance. For purposes of this sub-subparagraph, the imposition of a ser-
5 vice fee is not a charge.

6 (b) "Adverse underwriting decision" does not mean any of the following actions, but the insurer
7 or insurance producer responsible for the occurrence of the action must nevertheless provide the
8 applicant or policyholder with the specific reason or reasons for the occurrence:

9 (A) The termination of an individual policy form on a class or statewide basis.

10 (B) A declination of insurance coverage solely because the coverage is not available on a class
11 or statewide basis.

12 (C) The rescission of a policy.

13 (2) "Affiliate of" a specified person or "person affiliated with" a specified person means a person
14 who directly, or indirectly, through one or more intermediaries, controls, or is controlled by, or is
15 under common control with, the person specified.

16 (3) "Applicant" means a person who seeks to contract for insurance coverage, other than a
17 person seeking group insurance coverage that is not individually underwritten.

18 (4) "Consumer" means an individual, or the personal representative of the individual, who seeks
19 to obtain, obtains or has obtained one or more insurance products or services from a licensee that
20 are to be used primarily for personal, family or household purposes, and about whom the licensee
21 has personal information.

22 (5) "Consumer report" means any written, oral or other communication of information bearing
23 on a natural person's creditworthiness, credit standing, credit capacity, character, general reputa-
24 tion, personal characteristics or mode of living that is used or expected to be used in connection
25 with an insurance transaction.

26 (6) "Consumer reporting agency" means a person that, for monetary fees or dues, or on a co-
27 operative or nonprofit basis:

28 (a) Regularly engages, in whole or in part, in assembling or preparing consumer reports;

29 (b) Obtains information primarily from sources other than insurers; and

30 (c) Furnishes consumer reports to other persons.

31 (7) "Control" means, and the terms "controlled by" or "under common control with" refer to,
32 the possession, directly or indirectly, of the power to direct or cause the direction of the manage-
33 ment and policies of a person, whether through the ownership of voting securities, by contract other
34 than a commercial contract for goods or nonmanagement services, or otherwise, unless the power
35 of the person is the result of a corporate office held in, or an official position held with, the con-
36 trolled person.

37 (8) "Covered entity" means:

38 (a) A health insurer;

39 (b) A health care provider that transmits any health information in electronic form to carry out
40 financial or administrative activities in connection with a transaction covered by ORS 746.607 or
41 by rules adopted under ORS 746.608; or

42 (c) A health care clearinghouse.

43 (9) "Credit history" means any written or other communication of any information by a con-
44 sumer reporting agency that:

45 (a) Bears on a consumer's creditworthiness, credit standing or credit capacity; and

(b) Is used or expected to be used, or collected in whole or in part, as a factor in determining eligibility, premiums or rates for personal insurance.

(10) "Customer" means a consumer who has a continuing relationship with a licensee under which the licensee provides one or more insurance products or services to the consumer that are to be used primarily for personal, family or household purposes.

(11) "Declination of insurance coverage" or "decline coverage" means a denial, in whole or in part, by an insurer or insurance producer of an application for requested insurance coverage.

(12) "Health care" means care, services or supplies related to the health of an individual.

(13) "Health care operations" includes but is not limited to:

(a) Quality assessment, accreditation, auditing and improvement activities;

(b) Case management and care coordination;

(c) Reviewing the competence, qualifications or performance of health care providers or health insurers;

(d) Underwriting activities;

(e) Arranging for legal services;

(f) Business planning;

(g) Customer services;

(h) Resolving internal grievances;

(i) Creating deidentified information; and

(j) Fundraising.

(14) "Health care provider" includes but is not limited to:

(a) A psychologist, occupational therapist, regulated social worker, professional counselor or marriage and family therapist licensed or otherwise authorized to practice under ORS chapter 675 or an employee of the psychologist, occupational therapist, regulated social worker, professional counselor or marriage and family therapist;

(b) A physician or physician associate licensed under ORS chapter 677, an acupuncturist licensed under ORS 677.759 or an employee of the physician, physician associate or acupuncturist;

(c) A nurse or nursing home administrator licensed under ORS chapter 678 or an employee of the nurse or nursing home administrator;

(d) A dentist licensed under ORS chapter 679 or an employee of the dentist;

(e) A dental hygienist or denturist licensed under ORS chapter 680 or an employee of the dental hygienist or denturist;

(f) A speech-language pathologist or audiologist licensed under ORS chapter 681 or an employee of the speech-language pathologist or audiologist;

(g) An emergency medical services provider licensed under ORS chapter 682;

(h) An optometrist licensed under ORS chapter 683 or an employee of the optometrist;

(i) A chiropractic physician licensed under ORS chapter 684 or an employee of the chiropractic physician;

(j) A naturopathic physician licensed under ORS chapter 685 or an employee of the naturopathic physician;

(k) A massage therapist licensed under ORS 687.011 to 687.250 or an employee of the massage therapist;

(L) A direct entry midwife licensed under ORS 687.405 to 687.495 or an employee of the direct entry midwife;

(m) A physical therapist licensed under ORS 688.010 to 688.201 or an employee of the physical

1 therapist;

2 (n) A medical imaging licensee under ORS 688.405 to 688.605 or an employee of the medical
3 imaging licensee;

4 (o) A respiratory care practitioner licensed under ORS 688.815 or an employee of the respiratory
5 care practitioner;

6 (p) A polysomnographic technologist licensed under ORS 688.819 or an employee of the poly-
7 somnographic technologist;

8 (q) A pharmacist licensed under ORS chapter 689 or an employee of the pharmacist;

9 (r) A dietitian **or nutritionist** licensed under ORS 691.405 to 691.485 or an employee of the
10 dietitian **or nutritionist**;

11 (s) A funeral service practitioner licensed under ORS chapter 692 or an employee of the funeral
12 service practitioner;

13 (t) A health care facility as defined in ORS 442.015;

14 (u) A home health agency as defined in ORS 443.014;

15 (v) A hospice program as defined in ORS 443.850;

16 (w) A clinical laboratory as defined in ORS 438.010;

17 (x) A pharmacy as defined in ORS 689.005;

18 (y) A diabetes self-management program as defined in ORS 743.694; and

19 (z) Any other person or entity that furnishes, bills for or is paid for health care in the normal
20 course of business.

21 (15) "Health information" means any oral or written information in any form or medium that:

22 (a) Is created or received by a covered entity, a public health authority, a life insurer, a school,
23 a university or a health care provider that is not a covered entity; and

24 (b) Relates to:

25 (A) The past, present or future physical or mental health or condition of an individual;

26 (B) The provision of health care to an individual; or

27 (C) The past, present or future payment for the provision of health care to an individual.

28 (16) "Health insurer" means an insurer who offers:

29 (a) A health benefit plan as defined in ORS 743B.005;

30 (b) A short term health insurance policy, the duration of which does not exceed three months
31 including renewals;

32 (c) A student health insurance policy;

33 (d) A Medicare supplemental policy; or

34 (e) A dental only policy.

35 (17) "Homeowner insurance" means insurance for residential property consisting of a combina-
36 tion of property insurance and casualty insurance that provides coverage for the risks of owning
37 or occupying a dwelling and that is not intended to cover an owner's interest in rental property or
38 commercial exposures.

39 (18) "Individual" means a natural person who:

40 (a) In the case of life or health insurance, is a past, present or proposed principal insured or
41 certificate holder;

42 (b) In the case of other kinds of insurance, is a past, present or proposed named insured or
43 certificate holder;

44 (c) Is a past, present or proposed policyowner;

45 (d) Is a past or present applicant;

1 (e) Is a past or present claimant; or

2 (f) Derived, derives or is proposed to derive insurance coverage under an insurance policy or
3 certificate that is subject to ORS 746.600 to 746.690.

4 (19) "Individually identifiable health information" means any oral or written health information
5 that is:

6 (a) Created or received by a covered entity or a health care provider that is not a covered en-
7 tity; and

8 (b) Identifiable to an individual, including demographic information that identifies the individual,
9 or for which there is a reasonable basis to believe the information can be used to identify an indi-
10 vidual, and that relates to:

11 (A) The past, present or future physical or mental health or condition of an individual;

12 (B) The provision of health care to an individual; or

13 (C) The past, present or future payment for the provision of health care to an individual.

14 (20) "Institutional source" means a person or governmental entity that provides information
15 about an individual to an insurer, insurance producer or insurance-support organization, other than:

16 (a) An insurance producer;

17 (b) The individual who is the subject of the information; or

18 (c) A natural person acting in a personal capacity rather than in a business or professional ca-
19 pacity.

20 (21) "Insurance producer" or "producer" means a person licensed by the Director of the De-
21 partment of Consumer and Business Services as a resident or nonresident insurance producer.

22 (22) "Insurance score" means a number or rating that is derived from an algorithm, computer
23 application, model or other process that is based in whole or in part on credit history.

24 (23)(a) "Insurance-support organization" means a person who regularly engages, in whole or in
25 part, in assembling or collecting information about natural persons for the primary purpose of pro-
26 viding the information to an insurer or insurance producer for insurance transactions, including:

27 (A) The furnishing of consumer reports to an insurer or insurance producer for use in con-
28 nection with insurance transactions; and

29 (B) The collection of personal information from insurers, insurance producers or other
30 insurance-support organizations for the purpose of detecting or preventing fraud, material misrep-
31 resentation or material nondisclosure in connection with insurance underwriting or insurance claim
32 activity.

33 (b) "Insurance-support organization" does not mean insurers, insurance producers, governmental
34 institutions or health care providers.

35 (24) "Insurance transaction" means any transaction that involves insurance primarily for per-
36 sonal, family or household needs rather than business or professional needs and that entails:

37 (a) The determination of an individual's eligibility for an insurance coverage, benefit or payment;
38 or

39 (b) The servicing of an insurance application, policy or certificate.

40 (25) "Insurer" has the meaning given that term in ORS 731.106.

41 (26) "Investigative consumer report" means a consumer report, or portion of a consumer report,
42 for which information about a natural person's character, general reputation, personal character-
43 istics or mode of living is obtained through personal interviews with the person's neighbors, friends,
44 associates, acquaintances or others who may have knowledge concerning such items of information.

45 (27) "Licensee" means an insurer, insurance producer or other person authorized or required to

1 be authorized, or licensed or required to be licensed, pursuant to the Insurance Code.

2 (28) "Loss history report" means a report provided by, or a database maintained by, an
3 insurance-support organization or consumer reporting agency that contains information regarding
4 the claims history of the individual property that is the subject of the application for a homeowner
5 insurance policy or the consumer applying for a homeowner insurance policy.

6 (29) "Nonaffiliated third party" means any person except:

7 (a) An affiliate of a licensee;

8 (b) A person that is employed jointly by a licensee and by a person that is not an affiliate of the
9 licensee; and

10 (c) As designated by the director by rule.

11 (30) "Payment" includes but is not limited to:

12 (a) Efforts to obtain premiums or reimbursement;

13 (b) Determining eligibility or coverage;

14 (c) Billing activities;

15 (d) Claims management;

16 (e) Reviewing health care to determine medical necessity;

17 (f) Utilization review; and

18 (g) Disclosures to consumer reporting agencies.

19 (31)(a) "Personal financial information" means:

20 (A) Information that is identifiable with an individual, gathered in connection with an insurance
21 transaction from which judgments can be made about the individual's character, habits, avocations,
22 finances, occupations, general reputation, credit or any other personal characteristics; or

23 (B) An individual's name, address and policy number or similar form of access code for the
24 individual's policy.

25 (b) "Personal financial information" does not mean information that a licensee has a reasonable
26 basis to believe is lawfully made available to the general public from federal, state or local gov-
27 ernment records, widely distributed media or disclosures to the public that are required by federal,
28 state or local law.

29 (32) "Personal information" means:

30 (a) Personal financial information;

31 (b) Individually identifiable health information; or

32 (c) Protected health information.

33 (33) "Personal insurance" means the following types of insurance products or services that are
34 to be used primarily for personal, family or household purposes:

35 (a) Private passenger automobile coverage;

36 (b) Homeowner, mobile homeowners, manufactured homeowners, condominium owners and
37 renters coverage;

38 (c) Personal dwelling property coverage;

39 (d) Personal liability and theft coverage, including excess personal liability and theft coverage;
40 and

41 (e) Personal inland marine coverage.

42 (34) "Personal representative" includes but is not limited to:

43 (a) A person appointed as a guardian under ORS 125.305, 419B.372, 419C.481 or 419C.555 with
44 authority to make medical and health care decisions;

45 (b) A person appointed as a health care representative under ORS 127.505 to 127.660 or 127.700

to 127.737 to make health care decisions or mental health treatment decisions;

(c) A person appointed as a personal representative under ORS chapter 113; and

(d) A person described in ORS 746.611.

(35) "Policyholder" means a person who:

(a) In the case of individual policies of life or health insurance, is a current policyowner;

(b) In the case of individual policies of other kinds of insurance, is currently a named insured;

or

(c) In the case of group policies of insurance under which coverage is individually underwritten, is a current certificate holder.

(36) "Pretext interview" means an interview wherein the interviewer, in an attempt to obtain personal information about a natural person, does one or more of the following:

(a) Pretends to be someone the interviewer is not.

(b) Pretends to represent a person the interviewer is not in fact representing.

(c) Misrepresents the true purpose of the interview.

(d) Refuses upon request to identify the interviewer.

(37) "Privileged information" means information that is identifiable with an individual and that:

(a) Relates to a claim for insurance benefits or a civil or criminal proceeding involving the individual; and

(b) Is collected in connection with or in reasonable anticipation of a claim for insurance benefits or a civil or criminal proceeding involving the individual.

(38)(a) "Protected health information" means individually identifiable health information that is transmitted or maintained in any form of electronic or other medium by a covered entity.

(b) "Protected health information" does not mean individually identifiable health information in:

(A) Education records covered by the federal Family Educational Rights and Privacy Act (20 U.S.C. 1232g);

(B) Records described at 20 U.S.C. 1232g(a)(4)(B)(iv); or

(C) Employment records held by a covered entity in its role as employer.

(39) "Residual market mechanism" means an association, organization or other entity involved in the insuring of risks under ORS 735.005 to 735.145, 737.312 or other provisions of the Insurance Code relating to insurance applicants who are unable to procure insurance through normal insurance markets.

(40) "Termination of insurance coverage" or "termination of an insurance policy" means either a cancellation or a nonrenewal of an insurance policy, in whole or in part, for any reason other than the failure of a premium to be paid as required by the policy.

(41) "Treatment" includes but is not limited to:

(a) The provision, coordination or management of health care; and

(b) Consultations and referrals between health care providers.

CAPTIONS

SECTION 35. The unit captions used in this 2025 Act are provided only for the convenience of the reader and do not become part of the statutory law of this state or express any legislative intent in the enactment of this 2025 Act.

OPERATIVE AND EFFECTIVE DATES

1 **SECTION 36.** (1) Sections 2 to 5 of this 2025 Act and the amendments to ORS 192.556,
2 401.651, 413.164, 413.550, 431A.850, 433.045, 433.443, 441.044, 676.108, 676.150, 676.350, 676.400,
3 676.410, 676.565, 676.595, 676.850, 676.992, 691.405, 691.415, 691.435, 691.445, 691.465, 691.475,
4 691.477, 691.485, 743B.454 and 746.600 and section 3, chapter 380, Oregon Laws 2015, by
5 sections 6 to 13 and 15 to 34 of this 2025 Act become operative on January 1, 2026.

6 (2) The Board of Licensed Dietitians and Nutritionists and the Health Licensing Office
7 may take any action before the operative date specified in subsection (1) of this section that
8 is necessary for the board or the office to exercise, on or after the operative date specified
9 in subsection (1) of this section, all of the duties, functions and powers conferred on the
10 board and the office by sections 2 to 5 of this 2025 Act and the amendments to ORS 192.556,
11 401.651, 413.164, 413.550, 431A.850, 433.045, 433.443, 441.044, 676.108, 676.150, 676.350, 676.400,
12 676.410, 676.565, 676.595, 676.850, 676.992, 691.405, 691.415, 691.435, 691.445, 691.465, 691.475,
13 691.477, 691.485, 743B.454 and 746.600 and section 3, chapter 380, Oregon Laws 2015, by
14 sections 6 to 13 and 15 to 34 of this 2025 Act.

15 **SECTION 37.** This 2025 Act takes effect on the 91st day after the date on which the 2025
16 regular session of the Eighty-third Legislative Assembly adjourns sine die.
17

Senate Bill 800

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Governor Tina Kotek for Department of Revenue)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act requires people who seek licenses to show tax compliance. (Flesch Readability Score: 64.9).

Expands provisions requiring tax compliance as a condition of receiving a license to conduct a business, trade or profession or of entering into a contract with a state agency or political subdivision. Requires licensees and contractors to provide a tax compliance certificate from the Department of Revenue, unless a certain compliance rate is demonstrated by holders of the type of license.

Applies to licenses issued, reissued, reinstated or renewed and contracts entered into on or after January 1, 2026.

Takes effect on the 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to compliance with tax laws; creating new provisions; amending ORS 9.565, 305.380 and 305.385; and prescribing an effective date.

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

SECTION 1. ORS 305.380 is amended to read:

305.380. As used in **this section and** ORS 305.385:

(1) "Agency" means any department, board, commission, division or authority of the State of Oregon, or any political subdivision of this state which imposes a local tax administered by the Department of Revenue under ORS 305.620.

(2) "License" means any written authority required by law or ordinance as a prerequisite to the conduct of a business, trade or profession.

(3) "**Licensee**" means a person holding a license in Oregon, or a person applying for the issuance, reissuance, reinstatement or renewal of a license.

(4) "**Owner**" means an owner, as defined in ORS 60.470, of a licensee or provider.

[(3)] (5) "Provider" means any person who contracts to supply goods, services or real estate space to an agency.

[(4)] (6)(a) "Tax" means [*a state tax imposed by ORS 320.005 to 320.150 and 403.200 to 403.250 and ORS chapters 118, 314, 316, 317, 318, 321 and 323*] **state taxes administered by the department under the tax laws of this state** and local taxes administered by the Department of Revenue under ORS 305.620, **and any associated penalties and interest imposed in addition to the tax.**

(b) "**Tax**" does not include ad valorem property taxes.

SECTION 2. ORS 305.385 is amended to read:

305.385. (1) **Annually, on or before March 1, and** upon request of the Department of Revenue, *an agency issuing or renewing a license to conduct a business, trade or profession shall annually, on or before March 1, supply the department with a list of specified licenses issued or re-*

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

newed by the agency during the preceding calendar year.]:

(a) An agency that issues or renews licenses shall supply the department with a list of all licensees holding, during the preceding calendar year, specified licenses issued or renewed by the agency.

(b) The Oregon State Bar shall supply the department with a list of all members who are active or inactive during the preceding calendar year.

(2) Upon request of the department, an agency shall annually, on or before March 1, supply the department with a list of *[specified persons contracting with the agency to provide goods, services or real estate space to the agency]* the agency's providers during the preceding calendar year.

(3) The lists required by subsections (1) and (2) of this section shall contain:

(a) The name, address, Social Security or federal employer identification number of each licensee or provider *[or such other information as the department may by rule require.]* and any owner of each licensee or provider;

(b) The renewal period of the license, if any; and

(c) Any other information as the department may by rule require, in the format and manner specified by the department.

(4) The department may:

(a) By rule establish types of licenses for the purpose of categorizing and compiling information received under this section; and

(b) Use the information obtained under subsections (1) to (3) of this section for the purpose of tax administration, including determination of tax compliance and calculation of the average rate of tax compliance for each specified license type. The information is exempt from disclosure by the department under ORS 192.311 to 192.478.

(5)(a) If required to do so under subsection (6) of this section, at the time of application for the issuance, reissuance, reinstatement or renewal of a license, the licensee and each owner of the licensee shall submit to the licensing agency a certificate issued by the department stating that, as of the date of the certificate, the licensee or owner is in compliance with respect to any returns due and taxes payable to the department.

(b) The certificate described in this subsection must be dated no earlier than 90 days prior to the date that a licensee submits an application for a license.

(c) An application for a license shall be incomplete if not accompanied by a certificate as described in this subsection.

(d) Upon request of a licensee, if the licensee is in compliance with taxes administered by the department, the department shall, within 30 days after a request from the licensee, provide to the licensee a certificate as described in this subsection.

(6) A licensee and each owner of the licensee is subject to subsection (5) of this section:

(a) If, with respect to the entity that seeks a license, the licensee is not an employee as defined in ORS 25.790; and

(b) If the department determines that the average tax compliance rate for licensees holding the type of license sought is less than the average rate of compliance for other taxpayers.

(7) Subsections (5) and (6) of this section do not apply if the average tax compliance rate for licensees holding the type of license sought meets or exceeds 95 percent for the five most recent consecutive calendar years for which compliance rate information is available at the time of the department's determination.

(8) Notwithstanding ORS 314.835, 314.840 or 314.991, the department shall notify an agency if the average tax compliance rate for a type of license issued by the agency is less than 95 percent, as described in subsection (7) of this section.

[(4)(a)] (9)(a) If the department determines that any licensee, **owner** or provider has neglected or refused to file any return or to pay any tax and *[that such person has not filed]* **has not** in good faith *[a petition before the department]* **timely requested a conference with the department, submitted a written objection to the department or timely filed an appeal in the Oregon Tax Court** contesting the tax, and the department has been unable to obtain payment of the tax *[through other methods of collection]*, the Director of the Department of Revenue may, notwithstanding ORS 118.525, 314.835 or 314.840 or any similar provision of law, notify the agency and the person in writing.

(b) Upon receipt of such notice, the agency shall refuse to reissue, **reinstate**, renew or extend any license, contract or agreement until the agency receives a certificate issued by the department that the person is in *[good standing]* **compliance** with respect to any returns due and taxes payable to the department as of the date of the certificate.

(c) Upon the written request of the director and after a hearing and notice to the licensee as required under any applicable provision of law, the agency shall suspend the person's license if the agency finds that the returns and taxes have not been filed or paid and that the licensee **or owner** has not *[filed in good faith a petition before the department contesting the tax]* **contested the tax through a request for a conference with the department, submission of a written objection to the department or timely filing of an appeal in the Oregon Tax Court** and the department has been unable to obtain payment of the tax *[through other methods of collection]*. For the purpose of the agency's findings, the written representation to that effect by the department to the agency shall constitute prima facie evidence of the person's failure to file returns or pay the tax. The department shall have the right to intervene in any license suspension proceeding.

(d) Any license suspended under this subsection *[shall]* **may** not be reissued, **reinstated** or renewed until the agency receives a certificate issued by the department that the licensee **and each owner** is in *[good standing]* **compliance** with respect to any returns due and taxes payable to the department, **including any fee imposed under subsection (10) of this section**, as of the date of the certificate.

(10) The department may impose a fee to be paid, in addition to any tax due, by any licensee subject to suspension under subsection (9) of this section. The fee imposed under this subsection may not exceed the actual legal costs to the department related to a license suspension under subsection (9) of this section. A fee may not be added under this subsection unless the department has provided notice to the licensee of the authority of the department to impose a fee.

[(5)] (11)(a) Following a suspension for which a final order has been issued, the department **and the licensee, owner or provider** may enter into an **agreement with respect to any filing requirement or into an** installment payment agreement *[with a licensee or provider]* with respect to any unpaid tax, penalty and interest. The agreement shall provide for interest on *[the]* **any** outstanding amount at the rate prescribed by ORS 305.220. **The agreement shall provide that any failure, without reasonable cause, by the licensee, owner or provider to satisfy the agreement shall constitute a waiver of the right to a hearing and cause any suspension to remain in place.**

(b) The department may issue a provisional certificate of *[good standing]* **compliance** pursuant

to subsection [(4)(b) and (d)] **(9)(b) and (d)** of this section which shall remain in effect so long as the licensee, **owner** or provider fully complies with the terms of the [installment] agreement. Failure by the licensee, **owner** or provider to fully comply with the terms of the [installment] agreement shall render the agreement and the provisional certificate of [good standing] **compliance** null and void, unless the department determines that the failure was due to reasonable cause. If the department determines that the failure was not due to reasonable cause, the total amount of the tax, penalty and interest shall be immediately due and payable, and the department shall notify any affected agency that the licensee, **owner** or provider is not in [good standing. The agency shall then take appropriate action under subsection (4)(b) and (d) of this section.] **compliance with the tax system. The agency shall immediately suspend or decline to issue a license upon notification by the department that the licensee, owner or provider is not in compliance.**

(c) The licensee, owner or provider may, within 21 days of a determination of lack of reasonable cause, appeal the determination to the Director of the Department of Revenue. Within 14 days after the filing of the appeal, the director must either make a finding in favor of the licensee, owner or provider or give that person opportunity for hearing. If the licensee, owner or provider requests a hearing, the director shall immediately refer the matter to the Office of Administrative Hearings established under ORS 183.605. The hearing shall be conducted as soon as possible. Notwithstanding ORS 183.315, the hearing shall be conducted as a contested case hearing. An issue that was decided in a previous hearing, or for which the licensee, owner or provider was previously afforded an opportunity for hearing, may not be reconsidered. Upon resolution in favor of the licensee, owner or provider, the department shall notify the agency and the agency shall issue, renew or reinstate the license.

[(6)] **(12)** [No] A contract or other agreement for the purpose of providing goods, services or real estate space to any agency [shall] **may not** be entered into, renewed or extended with any person, unless the person certifies in writing, under penalty of perjury, that the person **or any owner or provider associated with the person for purposes of the contract** is, to the best of the person's knowledge, not in violation of **the provisions of** any tax [laws described] **as defined** in ORS 305.380 [(4)].

[(7)] **(13)** The certification under subsection [(6)] **(12)** of this section shall be required for each contract and renewal or extension of a contract or may be provided on an annual basis. A certification [shall] **is** not [be] required for a contract if the consideration for the goods, services or real estate space provided under the contract is no more than [\$1,000] **\$10,000**.

[(8)(a)] **(14)(a)** The requirements of the certification under subsection [(6)] **(12)** of this section shall be subject to the rules adopted by the department in accordance with this section.

(b) The department may by rule exempt certain contracts from the requirements of subsection [(6)] **(12)** of this section.

SECTION 3. ORS 9.565 is amended to read:

9.565. (1) The Department of Revenue may provide to the Oregon State Bar the name and address of any person admitted to practice law in this state if the department has reasonable grounds to believe that:

(a) The person admitted to practice law prepared a return or report for another person that is filed with the department and the return or report was prepared in violation of any provision of ORS 9.460 to 9.542 or 9.705 to 9.757 or the disciplinary rules adopted thereunder;

(b) The person admitted to practice law failed to file a required return, the person has not **timely** filed an appeal contesting the tax [with the department by the filing deadline] and the de-

partment has been unable to obtain payment of the tax *[through other methods of collection]*;

[(c) The person admitted to practice law failed to withhold or remit personal income taxes on behalf of an employee of an entity, the person has been held liable for the failure under ORS 316.207, the person has not filed an appeal contesting the tax with the department by the filing deadline and the department has been unable to obtain payment of the tax through other methods of collection; or]

[(d) The person admitted to practice law failed to withhold or remit personal income taxes on behalf of an employee of an entity in which the person has a direct ownership interest, the person has not filed an appeal contesting the tax with the department by the filing deadline and the department has been unable to obtain payment of the tax through other methods of collection.]

(c) The person admitted to practice law, having a fiduciary duty to withhold, collect or remit taxes on behalf of an employee of an entity, has failed to do so, has been held liable for the failure, has not timely filed an appeal contesting the tax and the department has been unable to obtain payment of the tax; or

(d) The person admitted to practice law failed to withhold, collect or remit taxes due from an entity in which the person has a direct ownership interest, the person has not timely filed an appeal contesting the tax and the department has been unable to obtain payment of the tax.

(2) If the department provides the name and address of a person admitted to practice law under subsection (1) of this section, the department shall also provide to the bar a statement of the basis of the department's belief that a violation may have occurred.

(3) If the department provides the name and address of a person admitted to practice law under subsection (1) of this section *[with regard to a return or report prepared for a person other than the person admitted to practice law, or with regard to a failure to withhold and remit personal income taxes withheld]*, the department may also provide to the bar the name and address of the taxpayer.

(4) The bar and any person or board described in ORS 9.537 (2) shall use the names, addresses and other information provided under this section solely in the enforcement of ORS 9.460 to 9.542 or 9.705 to 9.757 or the disciplinary rules adopted thereunder. Information disclosed by the department pursuant to this section may be used in any bar proceeding relating to discipline or admission or reinstatement of any person to the bar.

(5) Information disclosed by the department pursuant to this section is confidential and not subject to disclosure by the bar unless the state professional responsibility board appointed under ORS 9.532 has found probable cause of a rule violation or the matter investigated is finally resolved by disciplinary board action, a diversion or agreement or an order of the Supreme Court.

SECTION 4. The amendments to ORS 305.385 by section 2 of this 2025 Act apply to licenses issued, reissued, reinstated or renewed and to contracts entered into on or after January 1, 2026.

SECTION 5. This 2025 Act takes effect on the 91st day after the date on which the 2025 regular session of the Eighty-third Legislative Assembly adjourns sine die.

LD AOL COUNT

2022	
Jan	14
Feb	5
Mar	11
Apr	15
May	15
Jun	11
Jul	7
Aug	9
Sep	8
Oct	12
Nov	10
Dec	14
2022 Total	131

2023	
Jan	10
Feb	12
Mar	12
Apr	10
May	11
Jun	7
Jul	6
Aug	16
Sep	6
Oct	8
Nov	11
Dec	13
2023 Total	122

2024	
Jan	12
Feb	28
Mar	20
Apr	17
May	15
Jun	20
Jul	17
Aug	14
Sep	18
Oct	32
Nov	48
Dec	24
2024 Total	265

Discussion

ISSUE STATEMENT: April 16, 2025

ISSUE:

The Board of Licensed Dietitians (Board) needs to review the qualifications required to obtain a Dietitian Nutritionist license in the state of Illinois to determine if the requirements are not less than those needed to obtain a Dietitian license in Oregon.

BACKGROUND:

The Health Licensing Office (HLO) received an application for applicant #156845. The applicant at the time of the application held a Dietitian Nutritionist license in Illinois and applied via the reciprocity pathway. Below is a comparison of the qualifications needed to obtain a license in Oregon and Illinois.

	Oregon (Dietitian)	Illinois (Dietitian Nutritionist)
Education	Received a baccalaureate or postbaccalaureate degree from a regionally accredited college or university in the United States with a major course of study in human nutrition, dietetics, foods and nutrition or food systems management approved by the board as meeting the standards for approval of the course of study. ORS 691.435(a).	Possesses a baccalaureate degree or post baccalaureate degree with a major course of study in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, nutritional biochemistry, nutrition and integrative health, or an equivalent major course of study as recommended by the Board and approved by the Department from a school or program accredited at the time of graduation from the appropriate regional accrediting agency recognized by the Council for Higher Education Accreditation and the United States Department of Education or a college or university in a foreign country that is substantially equivalent to the educational requirements in this Section, as recommended by the Board and approved by the Department. All education programs under this Section shall include education leading to competence in medical nutrition therapy. (225 ILCS 30/45) (from ch. 11, Par.

	Provide official transcripts demonstrating that the individual holds a baccalaureate or post-baccalaureate degree from a regionally accredited college or university in the U.S. in human nutrition, dietetics, foods and nutrition or food systems management. OAR 834-030-0000(3)(a)(A)	8401-45) Holds a baccalaureate degree or post-baccalaureate degree in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health from a school or program accredited by a regional accrediting agency recognized by the Council on Higher Education Accreditation and the U.S. Department of Education or a baccalaureate degree or post-baccalaureate degree in an equivalent major course of study recommended by the Board and approved by the Department. Section 1245.110 (a)(1)
Examination	- Passed an examination prescribed by the office. ORS 691.435(c) - Submit evidence of a passing score on the CDR examination, which may have been taken no more than three years preceding the date of the application (pathway 1). 834-030-0000(3)(a)(B) Submit proof of current, valid CDR registration (pathway 3). 834-030-0000(3)(c)(B).	- Has successfully completed an examination authorized by the Department which may be or may include examinations given by each of the American Clinical Board of Nutrition, the Certification Board of Nutrition Specialists, and the Commission on Dietetic Registration, or another examination approved by the Department. (225 ILCS 30/45) (from ch. 111, par. 8401-45) - The examinations for licensed dietitian nutritionists shall include the examination given through: - The commission on Dietetic Registration - The American Clinical Board of Nutrition - The Board of Certification of Nutrition Specialists - The Clinical Nutrition Certification Board. Section 1245.120(a). In lieu of the documents in subsections (a)(1) and (2), an applicant for licensure as a dietitian nutritionist who, at the time of application, is a certified clinical nutritionist, certified nutrition specialist, diplomate of the American Clinical Board of Nutrition, registered dietitian or

		registered dietitian nutritionist shall submit a copy of his or her current registration or certification. The applicant will not be required to take an examination. (Section 1245.110)(b).
Supervised Experience	- Completed a planned, continuous program of dietetic experience approved by the office of 900 hours under the supervision of a licensed dietitian. ORS 691.435(b) - Submit evidence of having completed 900 hours of a board approved program of dietetic experience under the supervision of a licensed dietitian; OAR 834-030-0000(3)(a)(C)	- Has completed a dietetic internship or documented, supervised practice experience in dietetics and nutrition services of not less than 900 hours under the supervision of a qualified supervisor. All supervised practice experience under this Section shall include training leading to competence in medical nutrition therapy. (225 ILCS 30/45) (from Ch. 111, par. 8401 -45) "Practice experience" means a preprofessional, documented, supervised experience obtained by a supervisee in the practice of dietetics and nutrition and the provision of medical nutrition therapy that is acceptable to the Department as compliance with requirements for licensure, as specified in Section 45. It includes a planned, continuous, and documented, supervised practice experience obtained under the supervision of a qualified supervisor (225 ILCS 30/10) (From Ch. 111, Par. 8401-10) - Verification of 900 hours of practice experience, on forms provided by the Department. Section 1245.110 (a)(2) Applicants for licensure are required to demonstrate successful completion, within a 5 year time frame of a minimum of 900 hours of practice experience in dietetics or nutrition. The practice experience must be under direct supervision. The practice experience may be obtained concurrently with or following the completion of the education requirements. Internships approved by the following

		meet the experience requirements set forth in this section: Accreditation Council for Education in Nutrition and Dietetics. American Clinical Board of Nutrition Board of Certification of Nutrition Specialists Clinical Nutrition Certification Board Section 1245.140
Supervisor Qualifications	▪ Must be a licensed dietitian to conduct supervision. ORS 691.435(3)(b)	▪ When supervising the provision of a medical nutrition therapy by a supervisee, an individual must be: A registered dietitian nutritionist or a certified nutrition specialist. A health care professional licensed under the laws of the state, including a licensed or certified dietitian nutritionist, who acts under the licensed scope of practice. When supervising the provision of nutrition services not constituting medical nutrition therapy by a supervisee, an individual who either meets the requirements above or all of the following requirements: Has been regularly employed or self employed in the field of clinical nutrition for at least 3 of the last 5 years immediately preceding the commencement of the applicant's supervised practice experience and holds a doctoral degree with a major course of study in dietetics, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, nutrition biochemistry, nutrition and integrative health or an equivalent course of study as recommended by the Board and approved by the Dept. (225 ILCS 30/10) (From ch. 111, par. 8401-45) ▪ The supervisor shall observe, supervise and assess the applicant through contact or meetings with the supervisee. Supervision may be individual or group.

	▪ Must be a licensed dietitian to conduct supervision. OAR 834-030-0000(3)(a)(C)	The practice experience shall have been received from a supervisor who, at the time direct supervision took place, had at least 3 years of experience in dietetics or nutrition and was one of the following: An individual who holds an active license under the Act or an actively licensed resident of another jurisdiction if the jurisdiction in which the supervisor practices requires licensure. A licensed practitioner (such as, but not limited to, a licensed physician or registered nurse) whose license includes nutrition care. An individual with a doctoral degree conferred by a U.S. regionally accredited college or university with a major course of study in human nutrition, nutrition education, food and nutrition, dietetics or food systems management, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health. A registered dietitian or registered dietitian nutritionist of the Commission on Dietetic Registration. A certified clinical nutritionist of the Clinical Nutrition Certification Board. A certified nutrition specialist of the Board of Certification of Nutrition Specialists. A diplomate of the Academy of Nutrition and Dietetics A supervisor approved by the Dept. Section 1245.140
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RECOMMENDATIONS:

HLO requests that the Board discuss and vote on whether the requirements to obtain a Dietitian Nutritionist license in Illinois are not less than Oregon's requirements.

ISSUE STATEMENT: April 16, 2025

ISSUE:

The Board of Licensed Dietitians (Board) needs to determine if the Certified Nutritionist Specialist (CNS) credentialing exam issued by the Board for Certification of Nutrition Specialists (BCNS) is not less than the Registered Dietitian (RD) examination issued by the Commission on Dietetic Registration (CDR).

BACKGROUND:

The Health Licensing Office (HLO) received application for applicant #156845. The applicant at the time of the application held a Dietitian Nutritionist license in Illinois and applied via the reciprocity pathway. Below is a comparison of the RD credentialing exam required to obtain licensure in Oregon and the CNS qualifying examination taken in Illinois.

	RD Examination	CNS Examination
Number of Questions	120 multiple choice	200 multiple choice
Domains	Domain I: Principles of Dietetics (21% of exam) Food Science and Nutrient Composition of Foods Nutrition and Supporting Sciences Education, Communication and Technology Research Applications	Domain I: Principles of Nutrition (13% of exam) Practical application of evidenced based research Physiology of the digestive tract (motility, absorption, secretion, intestinal barrier function) Digestion, absorption, and transport of macronutrients and micronutrients Inflammatory pathways including insulin, oxidative stress, and fatty acid oxidation Effect of microbiome on metabolism of macronutrients and micronutrients, including use of probiotics and prebiotics -Nutritional considerations related to physiologic changes associated with life cycle stage Effect of microbiome on body composition and metabolism Tailoring of assessment and therapy specific to life cycle stage Nutritional considerations related to psychological and social factors associated with life cycle stage Effects of age, gender, and physical activity on body composition and energy expenditure Disease risk and prevalence related to

		socioeconomic status, geographic residency, ethnicity, and life cycle stage Regulation of fluid, electrolyte, and acid-base balance Basic understanding of nutritional genomics research in practice Calculation of individual caloric requirements Estimation of caloric values of specific meals
	Domain II: Nutrition Care for Individuals and Groups (45% of exam) Screening and Assessment Diagnosis Planning and Intervention Monitoring and Evaluation	Domain II: Nutritional Biochemistry (12% of exam) Nutritional considerations related to psychological and social factors associated with life cycle stage Metabolism (biochemical pathways and reactions) of carbohydrates, lipids, proteins, and micronutrients physiologic changes associated with life cycle stage Role of oxidative stress and detoxification pathways on health status Nutritional biochemical pathways including energy production and detoxification genomics research in practice Chemistry of enzymes, co-factors and organic acids Lipid metabolism, including cytokine and eicosanoid pathways - Epigenetics: methyl donor biochemistry and hypo and hyper methylation specific to life cycle stage
	Domain III: Management of Food, Nutrition, Services (21% of exam) Functions of Management Human Resources Financial Management Marketing and Public Relations Quality Management and Improvement	Domain III: Nutrients & Human Health (13% of exam) Macronutrient and micronutrient food sources and impact on health Nutrient deficiency and insufficiency: causes, symptoms, and treatment Appropriate use of nutrient supplementation Supplemental sources of nutrients Functional and medical foods and their impact on health Role of oxidative stress and detoxification pathways on health status Structure and function of soluble and insoluble fiber and impacts on health Role of key phytochemicals and zoochemicals in health Chemistry of enzymes, co-factors and organic acids Impact of agricultural methods and food processing, preparation, and storage on nutrient value Tolerable upper intake levels of nutrients Nutrient toxicity: causes, symptoms, and treatment Dietary Guidelines and Dietary Reference Intakes for preventive and therapeutic interventions Nutrients used in fortification and applicable food

	Domain IV: Food Service Systems (13%) Menu Development Procurement, Production, Distribution, and Services Sanitation and Safety Equipment and Facility Planning	sources Domain IV: Nutrition Assessment (13% of exam) Lifestyle factors which impact nutrient needs and compliance such as exercise, stress, and sleep Comprehensive medical nutrition health history Use of behavior change strategies such as Motivational Interviewing and Stages of Change Theory Evaluation of laboratory data including identification of optimal value ranges Identify signs and symptoms of nutrient status Identification of symptoms that require medical referral Evaluation of functional testing (organic acid, stool, and saliva tests for adrenals and hormone Evaluation of hormonal and neurotransmitter imbalances based on laboratory assessment Computerized analysis of food intake Body composition analysis (skin fold, bioelectrical impedance, waist-to-hip, BMI, other) Assessment of single nucleotide polymorphisms (SNPs) Nutritional inborn errors of metabolism Domain V: Clinical Intervention & Monitoring (16% of exam) Gauging and optimizing client compliance Consideration of client's personal and cultural beliefs when developing nutrition intervention plans Malabsorption and effects on macronutrients and micronutrient status Effectiveness and contraindications of various diets Drug/herb action, duration of action, purpose and dose of a client's current therapeutic regimen Interactions between drugs and foods, alcohol, vitamins, minerals, herbs, phytochemicals, and zoochemicals Nutrient depletions related to commonly used drugs Evidence-based dose and duration of nutraceutical use for common conditions Evidence-based use of common botanical supplements for health promotion and common conditions Synergistic effects and antagonistic interactions of nutrients in foods and supplements Effects of disordered eating patterns on nutrition status, body composition, and body functions Safety, toxicity, and interactions of botanical supplements Good manufacturing practices and other quality markers for nutritional supplements Application of national guidelines, policies, consensus recommendations, and evidence-based
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		research in the development of personalized therapeutic interventions Linking childhood behaviors to obesity and other chronic health issues in adults Impact of nutritional genomics on health Domain VI: Medical Nutrition Therapy- MNT (15% of exam) MNT for gastrointestinal disorders MNT for food allergies and intolerances MNT for autoimmune disorders MNT for mental health/mood disorders MNT for insulin resistance and type 2 diabetes MNT for cardiovascular disease, dyslipidemias, and hypertension MNT for endocrine disorders MNT for obesity MNT for cognitive and neurodegenerative disorders MNT for hepatic disorders MNT for neurodivergence MNT for dermatological disorders MNT for bone disorders MNT for type 1 diabetes MNT for cancer MNT for renal disorders MNT for hematologic disorders MNT for mastication, swallowing, and nutrient absorption disorders MNT for pulmonary disorders MNT for surgical procedures MNT for communicable diseases and sequelae MNT for bariatric surgery Domain VII: Public Health (12% of exam) Impact of environmental toxicity on health Translation of nutritional epidemiology into practice Factors that negatively affect food quality and safety Causes and preventative measures for common foodborne illnesses Identification of populations at risk for food safety issues Tracking current outbreaks of food borne illness and communication with clients Domain VIII: Practice Management (6% of exam) Compliance with ethical standards Working within scope of practice and in collaboration with other healthcare professionals as needed Evaluate sources of nutrition information for trustworthiness and bias HIPAA compliance requirements Licensure and certification Cultural competency and mitigating implicit bias
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		Insurance coverage and reimbursement.
Passing Score	The minimum scaled score required to pass the examination is twenty-five on a scale of one to fifty.	Test results are calculated using a scaled score method (100 to 1,000) with a minimum of 600 required to pass.
Time Allotted	3 hours	4 hours
Cost	\$225	\$583

RECOMMENDATIONS:

HLO requests that the Board discuss and vote on whether the CNS credentialing exam is not less than the RD credentialing examination.

Information maintained by the Legislative Reference Bureau

Updating the database of the Illinois Compiled Statutes (ILCS) is an ongoing process. Recent laws may not yet be included in the ILCS database, but they are found on this site as Public Acts soon after they become law. For information concerning the relationship between statutes and Public Acts, refer to the Guide.

Because the statute database is maintained primarily for legislative drafting purposes, statutory changes are sometimes included in the statute database before they take effect. If the source note at the end of a Section of the statutes includes a Public Act that has not yet taken effect, the version of the law that is currently in effect may have already been removed from the database and you should refer to that Public Act to see the changes made to the current law.

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(225 ILCS 30/1) (from Ch. 111, par. 8401-1)

(Section scheduled to be repealed on January 1, 2028)

Sec. 1. Short title. This Act may be cited as the Dietitian Nutritionist Practice Act.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/5) (from Ch. 111, par. 8401-5)

(Section scheduled to be repealed on January 1, 2028)

Sec. 5. Purpose. The practice of dietetics and nutrition, including the provision of medical nutrition therapy, in the State of Illinois is hereby declared to affect the public health, safety, and welfare and to be subject to regulation and control in the public interest. It is further declared that the practice of dietetics and nutrition services plays an important part in the attainment and maintenance of health and that it is in the public's best interest that persons who present themselves as providers of nutrition care services meet specific requirements and qualifications. This Act shall be liberally construed to best carry out these objectives and purposes.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/10) (from Ch. 111, par. 8401-10)

(Section scheduled to be repealed on January 1, 2028)

Sec. 10. Definitions. As used in this Act:

"Accreditation Council for Education in Nutrition and Dietetics" means the autonomous accrediting agency for education programs that prepares students to begin careers as registered dietitian nutritionists or registered nutrition and dietetics technicians.

"Address of record" means the designated address recorded by the Department in the applicant's or licensee's application file or license file as maintained by the Department's licensure maintenance unit.

"Board" means the Dietitian Nutritionist Practice Board appointed by the Secretary.

"Board for Certification of Nutrition Specialists" means the certifying board that credentials certified nutrition specialists.

"Certified clinical nutritionist" means an individual certified by the Clinical Nutrition Certification Board.

"Certified nutrition specialist" means an individual credentialed by the Board for Certification of Nutrition Specialists that authorizes the individual to use the title "certified nutrition specialist" and the abbreviation "C.N.S.".

"Commission on Dietetic Registration" means the credentialing agency for the Academy of Nutrition and Dietetics.

"Department" means the Department of Financial and Professional Regulation.

"Dietetics" means the integration, application, and communication of practice principles derived from the sciences

of food, nutrition, social, business, and basic sciences to achieve and maintain the optimal nutrition status of individuals and groups.

"Diplomate of the American Clinical Board of Nutrition" means an individual credentialed by the American Clinical Board of Nutrition who is authorized to use the title "Diplomate of the American Clinical Board of Nutrition" and the abbreviation "DACBN".

"Email address of record" means the designated email address recorded by the Department in the applicant's application file or the licensee's license file, as maintained by the Department's licensure maintenance unit.

"General nonmedical nutrition information" includes, but is not limited to, information on any of the following:

- (1) principles of good nutrition and food preparation;
- (2) essential nutrients needed by the human body;
- (3) actions of nutrients in the human body;
- (4) nonindividualized effects of deficiencies or excesses of nutrients in the human body;
- (5) foods, herbs, and dietary supplements that are good sources of essential nutrients in the human body or otherwise useful to maintain good health; or
- (6) principles of self-care and healthy relationships with food.

"Health care professional" means a physician licensed under the Medical Practice Act of 1987, an advanced practice registered nurse licensed under the Nurse Practice Act, or a physician assistant licensed under the Physician Assistant Practice Act of 1987.

"Independent private practice of medical nutrition therapy" means the application of dietetics and nutrition knowledge and skills by an individual who regulates and is responsible for the nutritionist's own practice or treatment procedures.

"Licensed dietitian nutritionist" means a person licensed under this Act to practice dietetics and nutrition, including the provision of medical nutrition therapy, as defined in this Section. Activities of a licensed dietitian nutritionist do not include performing medical diagnosis of human ailments or conditions of an individual.

"Medical nutrition therapy" means nutrition care services provided for the treatment or management of a disease or medical condition. "Medical nutrition therapy" includes the provision of any part or all of the following services, with notification to the patient's physician and appropriate record retention, or pursuant to the protocols, policies, or procedures of a health care facility, as defined in Section 3 of the Illinois Health Facilities Planning Act:

- (1) interpreting anthropometric, biochemical, clinical, and dietary data in acute and chronic disease states and recommending and ordering nutrient needs based on the dietary data, including, but not limited to, enteral and parenteral nutrition;
- (2) food and nutrition counseling, including counseling regarding prescription drug interactions;
- (3) developing and managing food service operations with functions in nutrition care, including operations connected with healthcare facilities, implicated in the ordering, preparation, or serving of therapeutic diets, or otherwise utilized in the management or treatment of disease or medical conditions; and
- (4) medical weight control.

"Medical weight control" means medical nutrition therapy for the purpose of reducing, maintaining, or gaining weight.

"Nonmedical weight control" means nutrition care services for the purpose of reducing, maintaining, or gaining weight that do not constitute the treatment of a disease or medical condition. "Nonmedical weight control" includes weight control services for healthy population groups to achieve or maintain a healthy weight.

"Nutrition assessment" means the systematic process of obtaining, verifying, and interpreting biochemical, anthropometric, physical, nutrigenomic, and dietary data in order to make decisions about the nature and cause of nutrition-related problems, including an ongoing, dynamic process that: (i) involves an initial data collection and a reassessment and analysis of client or community needs; and (ii) provides the foundation for identifying and labeling problems and making nutritional recommendations and ordering nutritional interventions, including enteral and parenteral nutrition.

"Nutrition care services" means any part of the following services provided within a systematic process:

- (1) assessing and evaluating the nutritional needs of individuals and groups and determining resources and constraints in the practice setting;

- (2) ordering nutrition-related laboratory tests in accordance with State law to check and track nutrition status and monitor effectiveness of nutrition interventions, dietary plans, and orders;

- (3) establishing priorities, goals, and objectives that meet an individual's nutritional needs and are consistent with available resources and constraints;

- (4) providing nutrition counseling in health and disease;

- (5) developing, implementing, and managing nutrition care systems and food service operations;

- (6) evaluating, making changes in, and maintaining appropriate standards of quality in food and nutrition services; and

- (7) recommending, ordering, and providing therapeutic diets.

"Nutrition counseling" means a supportive process, characterized by a collaborative counselor-patient or counselor-client relationship with individuals or groups, to establish food and nutrition priorities, goals, and individualized action plans and general physical activity guidance that acknowledge and foster responsibility for self-care to treat an existing condition or to promote health.

"Nutrition intervention" means the purposefully planned actions and counseling intended to positively change a nutrition-related behavior, risk factor, environmental condition, or aspect of the health status for an individual, target groups, or the community at large.

"Nutrition monitoring and evaluation" means identifying patient or client outcomes relevant to the patient's or client's identified and labeled nutritional problems and comparing the outcomes with the patient's or client's previous health status, intervention goals, or reference standards to determine the progress made in achieving desired outcomes of nutrition care and whether planned nutrition interventions should be continued or revised.

"Patient" means an individual recipient of medical nutrition therapy, whether in the outpatient, inpatient, or nonclinical setting.

"Practice experience" means a preprofessional, documented, supervised experience obtained by a supervisee in the practice of dietetics and nutrition and the provision of medical nutrition therapy that is acceptable to the Department as

compliance with requirements for licensure, as specified in Section 45. It includes a planned, continuous, and documented, supervised practice experience obtained under the supervision of a qualified supervisor, as defined in this Section, which is a component of the educational requirements for licensure, as specified in Section 45.

"Qualified supervisor" means:

(1) When supervising the provision of medical nutrition therapy by a supervisee, an individual who is:

- (A) a registered dietitian nutritionist or a certified nutrition specialist;
- (B) a licensed dietitian nutritionist licensed pursuant to this Act; or
- (C) a health care professional licensed under the laws of the State, including a licensed or certified dietitian nutritionist, who acts under the licensed scope of practice.

(2) When supervising the provision of nutrition care services not constituting medical nutrition therapy by a supervisee, an individual who either meets the requirements of paragraph (1) or all of the following requirements:

(A) has been regularly employed or self-employed in the field of clinical nutrition for at least 3 of the last 5 years immediately preceding commencement of the applicant's supervised practice experience; and

(B) holds a doctoral degree with a major course of study in dietetics, human nutrition, foods and nutrition, community nutrition, public health nutrition, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, nutritional biochemistry, nutrition and integrative health, or an equivalent course of study as recommended by the Board and approved by the Department conferred by either:

(i) a United States regionally accredited college or university accredited at the time of graduation from the appropriate regional accrediting agency recognized by the Council on Higher Education Accreditation and the United States Department of Education; or

(ii) an institution outside the United States and its territories with the supervisor's doctoral degree validated as equivalent to the doctoral degree conferred by a United States regionally accredited college or university as recommended by the Board and approved by the Department.

A "qualified supervisor" under paragraph (1) shall be licensed in the State if supervising a supervisee providing medical nutrition therapy to an individual in the State.

"Registered dietitian" or "registered dietitian nutritionist" means an individual who is credentialed as a registered dietitian or registered dietitian nutritionist by the Commission on Dietetic Registration, the accrediting body of the Academy of Nutrition and Dietetics, or its successor organization, and is authorized to use the titles "registered dietitian nutritionist" and "registered dietitian" and the corresponding abbreviations "RDN" and "RD".

"Secretary" means the Secretary of Financial and Professional Regulation or a person authorized by the Secretary to act in the Secretary's stead.

"Telehealth" or "telepractice" means the delivery of services under this Act by using electronic communication, information technologies, or other means between an individual

licensed under this Act in one location and a patient or client in another location, with or without an intervening healthcare provider. "Telehealth" or "telepractice" includes direct, interactive patient encounters, asynchronous store-and-forward technologies, and remote monitoring. Telehealth or telepractice is not prohibited under this Act provided that the provision of telehealth or telepractice services is appropriate for the client and the level of care provided meets the required level of care for that client. Individuals providing services regulated by this Act via telepractice shall comply with and are subject to all licensing and disciplinary provisions of this Act.

"Therapeutic diet" means a nutrition intervention prescribed by a health care professional or other authorized practitioner that provides food or nutrients via oral, enteral, and parenteral routes as part of treatment of disease or clinical conditions to modify, eliminate, decrease, or increase identified micronutrients and macronutrients in the diet, or to provide mechanically altered food when indicated.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/12)

(Section scheduled to be repealed on January 1, 2028)

Sec. 12. Address of record; email address of record. All applicants and licensees shall:

(1) provide a valid address and email address to the Department, which shall serve as the address of record and email address of record, respectively, at the time of application for licensure or renewal of a license; and

(2) inform the Department of any change of address of record or email address of record within 14 days after the change either through the Department's website or by contacting the Department's licensure maintenance unit.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/15) (from Ch. 111, par. 8401-15)

(Section scheduled to be repealed on January 1, 2028)

Sec. 15. License required.

(a) No person may provide, offer to provide, or attempt to provide medical nutrition therapy, whether for remuneration, or hold himself or herself out as a licensed dietitian nutritionist or as a qualified provider of nutrition care services, including medical nutrition therapy, unless the person is licensed in accordance with this Act.

(b) This Section does not prohibit the provision of medical nutrition therapy by: a person who is licensed to practice dietetics and nutrition under the law of another state, territory of the United States, or country and has applied in writing to the Department in form and substance satisfactory to the Department for a license as a dietitian nutritionist until (i) the expiration of 6 months after filing the written application, (ii) the withdrawal of the application, or (iii) the denial of the application by the Department.

(c) For the purposes of this Section, the "practice of dietetics and nutrition" means the integration and application of scientific principles derived from the study of food, nutrition, biochemistry, metabolism, nutrigenomics, physiology, food management, and behavioral and social sciences in achieving and maintaining patients' and clients' health throughout their life spans and in providing nutrition care services in person and via telehealth in both clinical and community settings. The primary functions of the "practice of dietetics and nutrition" are medical nutrition therapy provided for the purpose of disease management or to treat or rehabilitate an illness,

injury, or condition and other nutrition care services provided for health and wellness and as primary prevention of chronic disease.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/15.5)

(Section scheduled to be repealed on January 1, 2028)

Sec. 15.5. Unlicensed practice; violation; civil penalty.

(a) Any person who provides, offers to provide, attempts to provide, or holds oneself out as being qualified, licensed, or able to provide medical nutrition therapy or holds oneself out as licensed or qualified to practice dietetics and nutrition without being licensed under this Act shall, in addition to any other penalty provided by law, pay a civil penalty to the Department in an amount not to exceed \$10,000 for each offense as determined by the Department. The civil penalty shall be assessed by the Department after a hearing is held in accordance with the provisions set forth in this Act regarding the provision of a hearing for the discipline of a licensee.

(b) The Department has the authority and power to investigate any and all unlicensed activity.

(c) The civil penalty shall be paid within 60 days after the effective date of the order imposing the civil penalty. The order shall constitute a judgment and may be filed and execution had thereon in the same manner as any judgment from any court of record.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/17)

(Section scheduled to be repealed on January 1, 2028)

Sec. 17. Other activities subject to licensure under this Act.

(a) A licensed dietitian nutritionist may order patient or resident diets, including therapeutic diets, in accordance with the following:

(1) Enteral and parenteral nutrition therapy shall consist of enteral feedings or specialized intravenous solutions and shall only be performed by an individual licensed under this Act who:

(a) is a registered dietitian or registered dietitian nutritionist currently registered with the Commission on Dietetic Registration;

(b) is a certified nutrition support clinician as currently credentialed by the National Board of Nutrition Support Certification; or

(c) meets the requirements set forth in rules that the Department may establish as necessary to implement this Section to be consistent with competencies necessary for evaluating, ordering, and administering enteral and parenteral nutrition therapies.

(2) Notification to the patient's physician and appropriate record retention, or pursuant to the protocols, policies, or procedures of a health care facility, as defined in the Illinois Health Facilities Planning Act, in which the services are provided.

(b) Developing and managing food service operations whose chief function is nutrition care or that are otherwise utilized in the management or treatment of diseases or medical conditions shall only be performed by an individual licensed under this Act with competencies in the management of health care food service.

(c) A licensed dietitian nutritionist may order oral therapeutic diets.

(d) A licensed dietitian nutritionist shall provide

nutrition care services using systematic, evidence-based problem solving methods of the nutrition care process to critically think and make decisions to address nutrition-related problems and provide safe, effective, and quality nutrition services, including medical nutrition therapy, for individuals in clinical and community settings.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/20) (from Ch. 111, par. 8401-20)

(Section scheduled to be repealed on January 1, 2028)

Sec. 20. Exemptions. This Act does not prohibit or restrict:

(a) Any person licensed in this State under any other Act from engaging in the practice for which he or she is licensed as long as the person does not hold oneself out as qualified, able, or licensed to provide medical nutrition therapy or use a title in connection with the person's name whose use is restricted to individuals licensed under this Act, as specified in Section 80.

(b) Any person from providing medical nutrition therapy if that person is employed by the United States or State government or any of its bureaus, divisions, departments, or agencies while in the discharge of the employee's official duties.

(c) The distribution of general nonmedical nutrition information by a person employed as a cooperative extension home economist, to the extent the activities are part of his or her employment.

(d) The provision of medical nutrition therapy by a person pursuing a course of study leading to a degree in dietetics, nutrition, or an equivalent major from a United States regionally accredited school or program, but only if all of the following apply if: (i) the activities and services constitute a part of a supervised course of study; (ii) the person does not engage in the independent private practice of medical nutrition therapy; (iii) the person is appropriately supervised by a qualified supervisor who agrees to assume full professional responsibility for the work of the individual by verifying, directing, and authorizing the work; and (iv) and the person is designated by a title that clearly indicates the person's status as a student, trainee, or supervisee.

(e) (Blank).

(e-5) The activities and services of an individual seeking to fulfill post-degree supervised practice experience requirements in order to qualify for licensing as a licensed dietitian nutritionist under this Act, so long as the individual is not engaged in the independent private practice of medical nutrition therapy and is in compliance with all applicable regulations regarding supervision, including, but not limited to, the requirement that the supervised practice experience must be under the order, control, and full professional responsibility of the individual's supervisor and the individual is designated by a title that clearly indicates the person's status as a student, trainee, or supervisee. The Department may, by rule, adopt further limitations on individuals practicing under this subsection.

(f) A person, including a licensed acupuncturist, from:

(1) providing verbal nutrition information as an operator or employee of a health food store or business that sells health products, including dietary supplements, food, herbs, or food materials; or

(2) disseminating written general nonmedical nutrition information in connection with the marketing and distribution of those products, or discussing the use of those products, both individually and as components of nutritional programs, including explanations of their federally regulated label claims, any known drug-nutrient

interactions, their role in various nonindividualized diets, or suggestions as how to best use and combine them.

(g) The practice of dietetics and nutrition services by an educator who is in the employ of a nonprofit organization; a federal, state, county, or municipal agency, or other political subdivision; an elementary or secondary school; or a regionally accredited institution of higher education, as long as the activities and services of the educator are part of his or her employment.

(h) (Blank).

(h-5) An individual providing medical weight control services for individuals with prediabetes or obesity if:

(1) under a program of instruction approved in writing by, consultation is available from, and no program change can be initiated without prior approval by one of the following: a dietitian nutritionist licensed in this State; or a State-licensed health care professional lawfully practicing within the scope of a license granted by the State to provide the scope of the individual's licensed profession and consistent with accepted professional standards for providing nutrition care services to treat or manage the disease or medical condition for which medical weight control is being provided; or

(2) as part of a plan of care overseen and delegated by a State-licensed health care professional lawfully practicing within the scope of a license granted by the State to provide acting within the scope of the individual's licensed profession and consistent with accepted professional standards for providing nutrition care services to treat or manage the disease or medical condition for which medical weight control is being provided.

(i) The practice of dietetics and nutrition services for the limited purpose of education and research by any person with a masters or doctorate degree with a major in nutrition or equivalent from a regionally accredited school recognized by the Department.

(j) A person from providing general nonmedical nutrition information, nutrition recommendations for prevention and wellness, health coaching, holistic and wellness education, guidance, motivation, behavior change management, nonmedical weight control, or other nutrition care services provided that any such services do not constitute medical nutrition therapy and as long as the person does not hold oneself out as qualified, able, or licensed to provide medical nutrition therapy or use a title in connection with the individual's name whose use is restricted to individuals licensed under this Act, as specified in Section 80.

(k) The provision of nutrition care services by a nutrition and dietetic technician or a graduate of a 2 year associate program or a 4 year baccalaureate program from a school or program accredited at the time of graduation by the appropriate accrediting agency recognized by the Council for Higher Education Accreditation and the United States Department of Education with a major course of study in human nutrition, food and nutrition or its equivalent, as authorized by the Department, who is directly supervised by an individual licensed under this Act.

(l) Providing nutrition information as an employee of a nursing facility operated exclusively by and for those relying upon spiritual means through prayer alone for healing in accordance with the tenets and practices of a recognized church or religious denomination.

(m) A dietary technical support person working in a hospital setting or a regulated Department of Public Health, Department

of Human Services, or Department on Aging facility or program who has been trained and is supervised while engaged in the practice of dietetics and nutrition by a licensed dietitian nutritionist in accordance with this Act and whose services are retained by that facility or program on a full-time or regular, ongoing consultant basis.

(n) The provision of nutrition care services without remuneration to family members.

(o) The practice of dietetics and nutrition for a period not exceeding 6 months by a person who is in the State on a temporary basis to assist in a case of public health emergency and who meets the qualifications for a licensed dietitian nutritionist as set forth in Section 45 and is licensed in another state as a provider of medical nutrition therapy.

The provisions of this Act shall not be construed to prohibit or limit any person from the free dissemination of information, from conducting a class or seminar, or from giving a speech related to nutrition if that person does not hold himself or herself out as a licensed dietitian nutritionist in a manner prohibited by Section 15.

Nothing in this Section shall be construed to permit a student, trainee, or supervisee to offer the student's, trainee's, or supervisee's services as a dietitian or nutritionist to any other person, other than as specifically excepted in this Section, unless the student, trainee, or supervisee is licensed under this Act.

The provisions of this Act shall not be construed to prohibit or limit any physician licensed under the Medical Practice Act of 1987 from practicing or delegating nutrition-related therapies and procedures by consultation, by organization policy, or by contract to an appropriately trained, qualified, and supervised individual licensed under this Act.

Nothing in this Act shall be construed to limit the ability of any other licensed health care professional in this State to order therapeutic diets if the ordering of therapeutic diets falls within the scope of the licensee's license.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/25) (from Ch. 111, par. 8401-25)

(Section scheduled to be repealed on January 1, 2028)

Sec. 25. Powers. The Department shall exercise the powers and duties prescribed by the Civil Administrative Code of Illinois for the administration of licensing acts and shall exercise other powers and duties invested in the Department by this Act.

The Department may promulgate rules consistent with the provisions of this Act for its administration and enforcement, and may prescribe forms which shall be issued in connection with this Act.

(Source: P.A. 87-784; 87-1000.)

(225 ILCS 30/30) (from Ch. 111, par. 8401-30)

(Section scheduled to be repealed on January 1, 2028)

Sec. 30. Dietitian Nutritionist Practice Board. The Secretary shall appoint a Dietitian Nutritionist Practice Board as follows: 7 individuals who shall be appointed by and shall serve in an advisory capacity to the Secretary. Of these 7 individuals, 6 members must be licensed under this Act, 4 of which must be a registered dietitian and 2 of which must be either a certified clinical nutritionist licensed by the Department prior to the effective date of this amendatory Act of the 102nd General Assembly, a certified nutrition specialist, or a diplomate of the American Clinical Board of Nutrition, and one member must be a public member not licensed under this Act.

Members shall serve 3-year terms and until their successors are appointed and qualified. No member shall be reappointed to the Board for a term that would cause his or her continuous service on the Board to be longer than 8 years. Appointments to fill vacancies shall be made in the same manner as original appointments, for the unexpired portion of the vacated term.

Insofar as possible, the licensed professionals appointed to serve on the Board shall be generally representative of the geographical distribution of licensed professionals within this State. Any time there is a vacancy on the Board, any professional association composed of persons licensed under this Act may recommend licensees to fill the vacancy to the Board for the appointment of licensees.

A vacancy in the membership of the Board shall not impair the right of a quorum to exercise all the rights and perform all the duties of the Board.

Members of the Board shall have no liability in any action based upon any disciplinary proceeding or other activity performed in good faith as members of the Board.

The Secretary shall have the authority to remove or suspend any member of the Board for cause at any time before the expiration of his or her term. The Secretary shall be the sole arbiter of cause.

The Secretary shall consider the recommendation of the Board on questions of standards of professional conduct, discipline, and qualifications of candidates or licensees under this Act.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/35) (from Ch. 111, par. 8401-35)

(Section scheduled to be repealed on January 1, 2028)

Sec. 35. Applications. Applications for original licensure shall be made to the Department in writing on forms or electronically as prescribed by the Department and shall be accompanied by the appropriate documentation and the required fee, which shall not be returnable. Every application shall require the information that in the judgment of the Department will enable the Department to pass on the qualifications of the applicant for a license. An applicant has 3 years after the date of application to complete the application process. If the process has not been completed in 3 years, then the application shall be denied, the fee shall be forfeited, and the applicant must reapply and meet the requirements in effect at the time of reapplication. All applications shall contain information that, in the judgment of the Department, will enable the Department to assess the qualifications of the applicant for a license under this Act.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/37)

Sec. 37. (Repealed).

(Source: P.A. 97-400, eff. 1-1-12. Repealed by P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/40) (from Ch. 111, par. 8401-40)

(Section scheduled to be repealed on January 1, 2028)

Sec. 40. Examinations. The Department shall authorize examinations of applicants for a license under this Act at the times and places that it may determine. The examination of applicants shall be of a character to give a fair test of the qualifications of the applicant to practice dietetics and nutrition services. The Department or its designated testing service shall provide initial screening to determine eligibility of applicants for examination.

Applicants for examination shall be required to pay, either

to the Department or the designated testing service, a fee covering the cost of providing the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service, shall result in the forfeiture of the examination fee.

Whenever the Secretary is not satisfied that substantial justice has been done in an examination, the Secretary may order a reexamination.

If an applicant neglects, fails, or refuses to take an examination or fails to pass an examination for a license under this Act within 3 years after filing an application, the application shall be denied. However, the applicant may thereafter make a new application accompanied by the required fee and shall meet the requirements for licensure in force at the time of making the new application.

The Department may employ consultants for the purpose of preparing and conducting examinations.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/45) (from Ch. 111, par. 8401-45)

(Section scheduled to be repealed on January 1, 2028)

Sec. 45. Dietitian nutritionist; qualifications. A person who meets all of the following requirements is qualified to receive a license as a dietitian nutritionist:

(a) has applied in writing in form and substance acceptable to the Department and submits proof of completion of all of the following educational, supervised practice experience, and examination requirements;

(a-5) possesses a baccalaureate degree or post baccalaureate degree with a major course of study in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, nutritional biochemistry, nutrition and integrative health, or an equivalent major course of study as recommended by the Board and approved by the Department from a school or program accredited at the time of graduation from the appropriate regional accrediting agency recognized by the Council for Higher Education Accreditation and the United States Department of Education or a college or university in a foreign country that is substantially equivalent to the educational requirements in this Section, as recommended by the Board and approved by the Department. All education programs under this Section shall include education leading to competence in medical nutrition therapy. The Department may adopt rules as necessary to enforce this provision;

(b) has successfully completed an examination authorized by the Department which may be or may include examinations given by each of the American Clinical Board of Nutrition, the Certification Board of Nutrition Specialists, and the Commission on Dietetic Registration, or another examination approved by the Department. Before the effective date of this amendatory Act of the 102nd General Assembly, the Department may include examinations given by the Clinical Nutrition Certification Board.

The Department shall establish by rule a waiver of the examination requirement to applicants who, at the time of application, are acknowledged to be certified nutrition specialists by the Certification Board of Nutrition Specialists, diplomates of the American Clinical Board of Nutrition, or registered dietitians by the Commission on

Dietetic Registration and who are in compliance with other qualifications as included in the Act. Prior to the effective date of this amendatory Act of the 102nd General Assembly, the Department may waive of the examination requirement to applicants who, at the time of application, are acknowledged to be certified clinical nutritionists by the Clinical Nutrition Certification Board; and

(c) has completed a dietetic internship or documented, supervised practice experience in dietetics and nutrition services of not less than 900 hours under the supervision of a qualified supervisor. All supervised practice experience under this Section shall include training leading to competence in medical nutrition therapy. The Department may adopt rules as necessary to enforce this provision. Prior to the effective date of this amendatory Act of the 102nd General Assembly, supervised practice experience in dietetics and nutrition services of not less than 900 hours under the supervision of a certified clinical nutritionist may also be accepted.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/50) (from Ch. 111, par. 8401-50)

Sec. 50. (Repealed).

(Source: P.A. 87-1000. Repealed by P.A. 92-642, eff. 10-31-03.)

(225 ILCS 30/56)

Sec. 56. (Repealed).

(Source: P.A. 92-642, eff. 7-11-02. Repealed by P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/60) (from Ch. 111, par. 8401-60)

Sec. 60. (Repealed).

(Source: P.A. 87-1000. Repealed by P.A. 92-642, eff. 10-31-03.)

(225 ILCS 30/65) (from Ch. 111, par. 8401-65)

(Section scheduled to be repealed on January 1, 2028)

Sec. 65. Expiration and renewal dates. The expiration date and renewal period for each license issued under this Act shall be set by rule.

As a condition for renewal of a license, the licensee shall be required to complete continuing education in dietetics or nutrition services in accordance with rules established by the Department.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/70) (from Ch. 111, par. 8401-70)

(Section scheduled to be repealed on January 1, 2028)

Sec. 70. Inactive status; restoration; military service.

(a) Any person who notifies the Department in writing on forms or electronically as prescribed by the Department may elect to place his or her license on an inactive status and shall, subject to rules of the Department, be excused from payment of renewal fees until he or she notifies the Department in writing of the desires to resume active status.

(b) A licensee who has permitted his or her license to expire or who has had his or her license on inactive status may have the license restored by making application to the Department by filing proof acceptable to the Department of his or her fitness to have the license restored and by paying the required fees. Proof of fitness may include sworn evidence certifying to active lawful practice in another jurisdiction. If the licensee has not maintained an active practice in another jurisdiction satisfactory to the Department, then the Department

shall determine, by an evaluation program established by rule, his or her fitness for restoration of the license and shall establish procedures and requirements for restoration.

(c) A licensee whose license expired while he or she was (1) in federal service on active duty with the Armed Forces of the United States or the State Militia called into service or training or (2) in training or education under the supervision of the United States before induction into the military service, may have the license restored without paying any lapsed renewal fees if within 2 years after honorable termination of the service, training, or education he or she furnishes the Department with satisfactory evidence to the effect that he or she has been so engaged and that his or her service, training, or education has been so terminated.

(d) Any person requesting restoration from inactive status shall be required to pay the current renewal fee, shall meet continuing education requirements, and shall be required to restore his or her license as provided in Section 65 of this Act.

(e) A person licensed under this Act whose license is on inactive status or in a non-renewed status shall not provide medical nutrition therapy in the State of Illinois or use the title or advertise that he or she performs the services of a licensed dietitian nutritionist.

(f) Any person violating this Section shall be considered to be practicing without a license and will be subject to the disciplinary provisions of this Act.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/75) (from Ch. 111, par. 8401-75)

(Section scheduled to be repealed on January 1, 2028)

Sec. 75. Endorsement. The Department may, in its discretion, license as a dietitian nutritionist, without examination, on payment of required fee, an applicant who is a dietitian, dietitian nutritionist, or nutritionist licensed or certified under the laws of another state, territory, or country, if the Department determines that the requirements for licensure in the state, territory, or country in which the applicant was licensed were, at the date of his or her licensure, substantially equal to the requirements of this Act.

An applicant has 3 years from the date of application to complete the application process. If the process has not been completed within the 3 years, the application shall be denied, the fee forfeited, and the applicant must reapply and meet the requirements in effect at the time of reapplication.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/76)

(Section scheduled to be repealed on January 1, 2028)

Sec. 76. Grandfathering. An individual licensed as a dietitian in the State on the effective date of this amendatory Act of the 102nd General Assembly shall be eligible to maintain and renew a license as a licensed dietitian nutritionist in the State consistent with this Act if that individual meets the renewal requirements set forth in this Act. An individual licensed as a dietitian nutritionist on the effective date of this amendatory Act of the 102nd General Assembly shall not be required to complete any education, experience, or exam requirements specified in Section 45 beyond those which were required when the individual was originally licensed.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/80) (from Ch. 111, par. 8401-80)

(Section scheduled to be repealed on January 1, 2028)

Sec. 80. Use of title; advertising.

(a) Only a person who is issued a license as a dietitian nutritionist under this Act may use the words "licensed dietitian nutritionist", "dietitian nutritionist", or "dietitian" or the letters "L.D.N." or hold oneself out as qualified or licensed to practice under this Act in connection with his or her name.

(b) A licensee shall include in every advertisement for services regulated under this Act his or her title as it appears on the license or the initials authorized under this Act. Advertisements shall not include false, fraudulent, deceptive, or misleading material or guarantees of success.

(c) Use of an earned, federally trademarked nutrition credential is not prohibited, but such use does not give an individual the right to practice dietetics or nutrition or provide medical nutrition therapy unless the individual is licensed under this Act.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/85) (from Ch. 111, par. 8401-85)

(Section scheduled to be repealed on January 1, 2028)

Sec. 85. Fees. The Department shall provide by rule for a schedule of fees for the administration and enforcement of this Act, including, but not limited to, original licensure, registration, renewal, and restoration. The fees shall be nonrefundable.

All fees, fines, and penalties collected under this Act shall be deposited into the General Professions Dedicated Fund and shall be appropriated to the Department for the ordinary and contingent expenses of the Department in the administration of this Act.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/87)

Sec. 87. (Repealed).

(Source: P.A. 92-146, eff. 1-1-02. Repealed by P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/90) (from Ch. 111, par. 8401-90)

Sec. 90. (Repealed).

(Source: P.A. 87-784. Repealed by P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/95) (from Ch. 111, par. 8401-95)

(Section scheduled to be repealed on January 1, 2028)

Sec. 95. Grounds for discipline.

(1) The Department may refuse to issue or renew, or may revoke, suspend, place on probation, reprimand, or take other disciplinary or non-disciplinary action as the Department may deem appropriate, including imposing fines not to exceed \$10,000 for each violation, with regard to any license or certificate for any one or combination of the following causes:

(a) Material misstatement in furnishing information to the Department.

(b) Violations of this Act or of rules adopted under this Act.

(c) Conviction by plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment or by sentencing of any crime, including, but not limited to, convictions, preceding sentences of supervision, conditional discharge, or first offender probation, under the laws of any jurisdiction of the United States (i) that is a felony or (ii) that is a misdemeanor, an essential element of which

is dishonesty, or that is directly related to the practice of the profession.

(d) Fraud or any misrepresentation in applying for or procuring a license under this Act or in connection with applying for renewal of a license under this Act.

(e) Professional incompetence or gross negligence.

(f) Malpractice.

(g) Aiding or assisting another person in violating any provision of this Act or its rules.

(h) Failing to provide information within 60 days in response to a written request made by the Department.

(i) Engaging in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud, or harm the public.

(j) Habitual or excessive use or abuse of drugs defined in law as controlled substances, alcohol, or any other substance that results in the inability to practice with reasonable judgment, skill, or safety.

(k) Discipline by another state, the District of Columbia, territory, country, or governmental agency if at least one of the grounds for the discipline is the same or substantially equivalent to those set forth in this Act.

(l) Charging for professional services not rendered, including filing false statements for the collection of fees for which services are not rendered. Nothing in this paragraph (l) affects any bona fide independent contractor or employment arrangements among health care professionals, health facilities, health care providers, or other entities, except as otherwise prohibited by law. Any employment arrangements may include provisions for compensation, health insurance, pension, or other employment benefits for the provision of services within the scope of the licensee's practice under this Act. Nothing in this paragraph (l) shall be construed to require an employment arrangement to receive professional fees for services rendered.

(m) A finding by the Department that the licensee, after having his or her license placed on probationary status, has violated the terms of probation.

(n) Willfully making or filing false records or reports in his or her practice, including, but not limited to, false records filed with State agencies or departments.

(o) Allowing one's license under this Act to be used by an unlicensed person in violation of this Act.

(p) Practicing under a false or, except as provided by law, an assumed name.

(q) Gross and willful overcharging for professional services.

(r) (Blank).

(s) Willfully failing to report an instance of suspected child abuse or neglect as required by the Abused and Neglected Child Reporting Act.

(t) Cheating on or attempting to subvert a licensing examination administered under this Act.

(u) Mental illness or disability that results in the inability to practice under this Act with reasonable judgment, skill, or safety.

(v) Physical illness, including, but not limited to, deterioration through the aging process or loss of motor skill that results in a licensee's inability to practice under this Act with reasonable judgment, skill, or safety.

(w) Advising an individual to discontinue, reduce, increase, or otherwise alter the intake of a drug prescribed by a physician licensed to practice medicine in all its

branches or by a prescriber as defined in Section 102 of the Illinois Controlled Substances Act.

(2) The Department may refuse to issue or may suspend without hearing, as provided for in the Code of Civil Procedure, the license of any person who fails to file a return, or pay the tax, penalty, or interest shown in a filed return, or pay any final assessment of the tax, penalty, or interest as required by any tax Act administered by the Illinois Department of Revenue, until such time as the requirements of any such tax Act are satisfied in accordance with subsection (g) of Section 2105-15 of the Civil Administrative Code of Illinois.

(3) (Blank).

(4) In cases where the Department of Healthcare and Family Services has previously determined a licensee or a potential licensee is more than 30 days delinquent in the payment of child support and has subsequently certified the delinquency to the Department, the Department may refuse to issue or renew or may revoke or suspend that person's license or may take other disciplinary action against that person based solely upon the certification of delinquency made by the Department of Healthcare and Family Services in accordance with item (5) of subsection (a) of Section 2105-15 of the Civil Administrative Code of Illinois.

(5) The determination by a circuit court that a licensee is subject to involuntary admission or judicial admission, as provided in the Mental Health and Developmental Disabilities Code, operates as an automatic suspension. The suspension shall end only upon a finding by a court that the patient is no longer subject to involuntary admission or judicial admission and the issuance of an order so finding and discharging the patient.

(6) In enforcing this Act, the Department, upon a showing of a possible violation, may compel an individual licensed to practice under this Act, or who has applied for licensure under this Act, to submit to a mental or physical examination, or both, as required by and at the expense of the Department. The Department may order the examining physician to present testimony concerning the mental or physical examination of the licensee or applicant. No information shall be excluded by reason of any common law or statutory privilege relating to communications between the licensee or applicant and the examining physician. The examining physicians shall be specifically designated by the Department. The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of this examination. The examination shall be performed by a physician licensed to practice medicine in all its branches. Failure of an individual to submit to a mental or physical examination, when directed, shall result in an automatic suspension without hearing.

A person holding a license under this Act or who has applied for a license under this Act who, because of a physical or mental illness or disability, including, but not limited to, deterioration through the aging process or loss of motor skill, is unable to practice the profession with reasonable judgment, skill, or safety, may be required by the Department to submit to care, counseling, or treatment by physicians approved or designated by the Department as a condition, term, or restriction for continued, reinstated, or renewed licensure to practice. Submission to care, counseling, or treatment as required by the Department shall not be considered discipline of a license. If the licensee refuses to enter into a care, counseling, or treatment agreement or fails to abide by the terms of the agreement, then the Department may file a complaint to revoke, suspend, or otherwise discipline the license of the individual. The Secretary may order the license suspended

immediately, pending a hearing by the Department. Fines shall not be assessed in disciplinary actions involving physical or mental illness or impairment.

In instances in which the Secretary immediately suspends a person's license under this Section, a hearing on that person's license must be convened by the Department within 15 days after the suspension and completed without appreciable delay. The Department shall have the authority to review the subject individual's record of treatment and counseling regarding the impairment to the extent permitted by applicable federal statutes and regulations safeguarding the confidentiality of medical records.

An individual licensed under this Act and affected under this Section shall be afforded an opportunity to demonstrate to the Department that he or she can resume practice in compliance with acceptable and prevailing standards under the provisions of his or her license.

(Source: P.A. 100-872, eff. 8-14-18.)

(225 ILCS 30/97) (from Ch. 111, par. 8401-97)

(Section scheduled to be repealed on January 1, 2028)

Sec. 97. Payments; penalty for insufficient funds. Any person who delivers a check or other payment to the Department that is returned to the Department unpaid by the financial institution upon which it is drawn shall pay to the Department, in addition to the amount already owed to the Department, a fine of \$50. The fines imposed by this Section are in addition to any other discipline provided under this Act for unlicensed practice or practice on a nonrenewed license. The Department shall notify the person that payment of fees and fines shall be paid to the Department by certified check or money order within 30 calendar days of the notification. If, after the expiration of 30 days from the date of the notification, the person has failed to submit the necessary remittance, the Department shall automatically terminate the license or certificate or deny the application, without hearing. If, after termination or denial, the person seeks a license or certificate, he or she shall apply to the Department for restoration or issuance of the license or certificate and pay all fees and fines due to the Department. The Department may establish a fee for the processing of an application for restoration of a license or certificate to pay all expenses of processing this application. The Secretary may waive the fines due under this Section in individual cases where the Secretary finds that the fines would be unreasonable or unnecessarily burdensome.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/100) (from Ch. 111, par. 8401-100)

(Section scheduled to be repealed on January 1, 2028)

Sec. 100. Injunctions; cease and desist orders.

(a) If any person violates a provision of this Act, the Secretary may, in the name of the People of the State of Illinois through the Attorney General of the State of Illinois or the State's Attorney of the county in which the violation is alleged to have occurred, petition for an order enjoining the violation or for an order enforcing compliance with this Act. Upon the filing of a verified petition, the court may issue a temporary restraining order, without notice or bond, and may preliminarily and permanently enjoin the violation. If it is established that the person has violated or is violating the injunction, the Court may punish the offender for contempt of court. Proceedings under this Section shall be in addition to, and not in lieu of, all other remedies and penalties provided by this Act.

(b) If any person provides, offers to provide, attempts to provide or holds himself or herself out as qualified, licensed, or able to provide medical nutrition therapy or holds oneself out as licensed or qualified to practice dietetics and nutrition or holds oneself out as a licensed dietitian nutritionist or uses words or letters in connection with the person's name in violation of Section 80 without having a valid license under this Act, then any licensee, any interested party, or any person injured thereby may, in addition to the Secretary, petition for relief as provided in subsection (a) of this Section.

(c) Whenever in the opinion of the Department any person violates any provision of this Act, the Department may issue a rule to show cause why an order to cease and desist should be entered against him or her. The rule shall clearly set forth the grounds relied upon by the Department and shall provide a period of 7 days from the date of the rule to file an answer to the satisfaction of the Department. Failure to answer to the satisfaction of the Department shall cause an order to cease and desist to be issued immediately.

(Source: P.A. 102-945, eff. 1-1-23; 103-154, eff. 6-30-23.)

(225 ILCS 30/105) (from Ch. 111, par. 8401-105)

(Section scheduled to be repealed on January 1, 2028)

Sec. 105. Investigation; notice and hearing. The Department may investigate the actions or qualifications of any applicant or of any person or persons holding or claiming to hold a license or certificate of registration. The Department shall, before refusing to issue or renew a license or to discipline a licensee under Section 95, at least 30 days before the date set for the hearing, (i) notify the accused in writing of any charges made and the time and place for a hearing of the charges, (ii) direct him or her to file his or her written answer to the charges under oath within 20 days after the service of the notice, and (iii) inform the applicant or licensee that failure to file an answer shall result in a default judgment being entered against the applicant or licensee. At the time and place fixed in the notice, the Department shall proceed to hear the charges and the parties or their counsel shall be accorded ample opportunity to present any pertinent statements, testimony, evidence, and arguments. The Department may continue the hearing from time to time. In case the person, after receiving the notice, fails to file an answer, his or her license, may, in the discretion of the Department, be revoked, suspended, or placed on probationary status or the Department may take whatever disciplinary action considered proper, including limiting the scope, nature, or extent of the person's practice or the imposition of a fine, without a hearing, if the act or acts charged constitute sufficient grounds for that action under the Act. The written notice and any notice in the subsequent proceeding may be served by mail to the licensee's address of record or by email to the licensee's email address of record.

(Source: P.A. 102-945, eff. 1-1-23; 103-154, eff. 6-30-23.)

(225 ILCS 30/108)

(Section scheduled to be repealed on January 1, 2028)

Sec. 108. Confidentiality. All information collected by the Department in the course of an examination or investigation of a licensee or applicant, including, but not limited to, any complaint against a licensee filed with the Department and information collected to investigate any such complaint, shall be maintained for the confidential use of the Department and shall not be disclosed. The Department may not disclose the information to anyone other than law enforcement officials,

other regulatory agencies that have an appropriate regulatory interest as determined by the Secretary, or a party presenting a lawful subpoena to the Department. Information and documents disclosed to a federal, State, county, or local law enforcement agency shall not be disclosed by the agency for any purpose to any other agency or person. A formal complaint filed against a licensee by the Department or any order issued by the Department against a licensee or applicant shall be a public record, except as otherwise prohibited by law.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/110) (from Ch. 111, par. 8401-110)

(Section scheduled to be repealed on January 1, 2028)

Sec. 110. Record of hearing. The Department, at its expense, shall provide a certified shorthand reporter to take down the testimony and preserve a record of all proceedings at the hearing of any case in which a licensee may be revoked, suspended, placed on probationary status, reprimanded, fined, or subjected to other disciplinary action with reference to the license when a disciplinary action is authorized under this Act and its rules. The notice of hearing, complaint, and all other documents in the nature of pleadings and written portions filed in the proceedings, the transcript of the testimony, the report of the hearing officer, and the orders of the Department shall be the records of the proceedings. The record may be made available to any person interested in the hearing upon payment of the fee required by Section 2105-115 of the Department of Professional Regulation Law of the Civil Administrative Code of Illinois.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/115) (from Ch. 111, par. 8401-115)

(Section scheduled to be repealed on January 1, 2028)

Sec. 115. Subpoenas; oaths; attendance of witnesses.

(a) The Department may subpoena and bring before it any person to take the oral or written testimony or compel the production of any books, papers, records, or any other documents that the Secretary or his or her designee deems relevant or material to any investigation or hearing conducted by the Department with the same fees and mileage and in the same manner as prescribed in civil cases in the courts of this State.

(b) The Secretary, the hearing officer, any member of the Board, or a certified shorthand court reporter may administer oaths at any hearing that the Department conducts. Notwithstanding any other statute or Department rule to the contrary, all requests for testimony, production of documents, or records shall be in accordance with this Act.

(c) Any circuit court, upon application of the Department or licensee, may order the attendance and testimony of witnesses and the production of relevant documents, papers, files, books and records in connection with any hearing or investigations. The court may compel obedience to its order by proceedings for contempt.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/120) (from Ch. 111, par. 8401-120)

(Section scheduled to be repealed on January 1, 2028)

Sec. 120. Board report. At the conclusion of the hearing, the Board shall present to the Secretary a written report of its findings of fact, conclusions of law, and recommendations. The report shall contain a finding whether or not the accused person violated this Act or failed to comply with the conditions required in this Act. The Board shall specify the nature of the violation or failure to comply and shall make its

recommendations to the Secretary.

The report of findings of fact, conclusions of law and recommendation of the Board shall be the basis for the Department's order for refusing to issue, restore, or renew a license or otherwise disciplining a licensee. If the Secretary disagrees in any regard with the report of the Board, the Secretary may issue an order in contravention of the report. The finding is not admissible in evidence against the person in a criminal prosecution brought for the violation of this Act, but the hearing and finding is not a bar to a criminal prosecution brought for the violation of this Act.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/125) (from Ch. 111, par. 8401-125)

(Section scheduled to be repealed on January 1, 2028)

Sec. 125. Motion for rehearing. In any case involving the refusal to issue or renew or the discipline of a licensee, a copy of the Board's report shall be served upon the respondent by the Department, either personally or as provided in this Act for the service of the notice of hearing. Within 20 calendar days after the service, the respondent may present to the Department a motion in writing for a rehearing which shall specify the particular grounds for rehearing. If no motion for rehearing is filed, then upon the expiration of the time specified for filing a motion, or if motion for rehearing is denied, then upon denial, the Secretary may enter an order in accordance with recommendations of the Board, except as provided for in Section 120. If the respondent orders a transcript of the record from the reporting service and pays for it within the time for filing a motion for rehearing, the 20 calendar day period within which a motion for rehearing may be filed shall commence upon the delivery of the transcript to the respondent.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/130) (from Ch. 111, par. 8401-130)

(Section scheduled to be repealed on January 1, 2028)

Sec. 130. Order for rehearing. Whenever the Secretary is not satisfied that substantial justice has been done in the revocation, suspension, or refusal to issue or renew a license the Secretary may order a rehearing by the same or other hearing officers.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/135) (from Ch. 111, par. 8401-135)

(Section scheduled to be repealed on January 1, 2028)

Sec. 135. Hearing officer. The Secretary shall have the authority to appoint any attorney duly licensed to practice law in the State of Illinois to serve as the hearing officer in any action for refusal to issue or renew a license or to discipline a licensee or person holding a license. The hearing officer shall have full authority to conduct the hearing. The hearing officer shall report his or her findings and recommendations to the Board and the Secretary. The Board shall have 60 calendar days from receipt of the report to review the report of the hearing officer and present its findings of fact, conclusions of law, and recommendations to the Secretary. If the Board fails to present its report within the 60 calendar day period, the Secretary may issue an order based on the report of the hearing officer. If the Secretary disagrees with the recommendation of the Board or of the hearing officer, the Secretary may issue an order in contravention of the recommendation.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/140) (from Ch. 111, par. 8401-140)

(Section scheduled to be repealed on January 1, 2028)

Sec. 140. Order; certified copy. An order or a certified copy of an order, over the seal of the Department and purporting to be signed by the Secretary, shall be prima facie proof:

(a) that the signature is the genuine signature of the Secretary;

(b) that the Secretary is duly appointed and qualified; and

(c) that the Board and the members of the Board are qualified to act.

(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/145) (from Ch. 111, par. 8401-145)

(Section scheduled to be repealed on January 1, 2028)

Sec. 145. Restoration of license from discipline. At any time after the successful completion of a term of indefinite probation, suspension, or revocation of a license, the Department may restore the license to the licensee, unless, after an investigation and a hearing, the Secretary determines that restoration is not in the public interest or that the licensee has not been sufficiently rehabilitated to warrant the public trust. No person or entity whose license, certificate, or authority has been revoked as authorized in this Act may apply for restoration of that license, certification, or authority until such time as provided for in the Civil Administrative Code of Illinois.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/150) (from Ch. 111, par. 8401-150)

Sec. 150. (Repealed).

(Source: P.A. 87-784. Repealed by P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/155) (from Ch. 111, par. 8401-155)

(Section scheduled to be repealed on January 1, 2028)

Sec. 155. Summary suspension. The Secretary may summarily suspend the license of a licensee without a hearing, simultaneously with the institution of proceedings for a hearing provided for in Section 105 of this Act, if the Secretary finds that the evidence indicates that a licensee's continuation in practice would constitute an imminent danger to the public. In the event that the Secretary summarily suspends the license without a hearing, a hearing shall be commenced within 30 days after the suspension has occurred and shall be concluded as expeditiously as possible.

(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/160) (from Ch. 111, par. 8401-160)

(Section scheduled to be repealed on January 1, 2028)

Sec. 160. Administrative Review Law. All final administrative decisions of the Department are subject to judicial review under the Administrative Review Law and its rules. The term "administrative decision" is defined as in Section 3-101 of the Code of Civil Procedure.

Proceedings for judicial review shall be commenced in the circuit court of the county in which the party applying for review resides, but if the party is not a resident of this State, the venue shall be in Sangamon County.

(Source: P.A. 87-784.)

(225 ILCS 30/165) (from Ch. 111, par. 8401-165)

(Section scheduled to be repealed on January 1, 2028)

Sec. 165. Certification of record; receipt. The Department

shall not be required to certify any record to the Court or file any answer in court or otherwise appear in any court in a judicial review proceeding, unless and until the Department has received from the plaintiff payment of the costs of furnishing and certifying the record, which costs shall be determined by the Department. Failure on the part of the plaintiff to file a receipt in Court is grounds for dismissal of the action.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/170) (from Ch. 111, par. 8401-170)

(Section scheduled to be repealed on January 1, 2028)

Sec. 170. Violations; penalties. Any person who is found to have violated any provision of this Act is guilty of a Class A misdemeanor for the first offense and a Class 4 felony for second and subsequent offenses.
(Source: P.A. 87-784; 87-1000.)

(225 ILCS 30/175) (from Ch. 111, par. 8401-175)

(Section scheduled to be repealed on January 1, 2028)

Sec. 175. Illinois Administrative Procedure Act. The Illinois Administrative Procedure Act is expressly adopted and incorporated as if all of the provisions of that Act were included in this Act, except that the provision of paragraph (d) of Section 10-65 of the Illinois Administrative Procedure Act, which provides that at hearings the licensee or person holding a license has the right to show compliance with all lawful requirements for retention or continuation of the license, is specifically excluded. For the purpose of this Act, the notice required under Section 10-25 of the Illinois Administrative Procedure Act is deemed sufficient when mailed to the last known address of record of a party or when emailed to the last known email address of record of a party.
(Source: P.A. 102-945, eff. 1-1-23.)

(225 ILCS 30/180) (from Ch. 111, par. 8401-180)

(Section scheduled to be repealed on January 1, 2028)

Sec. 180. Home rule. The regulation and licensing of dietitian nutritionists are exclusive functions of the State. A home rule unit may not regulate or license dietitian nutritionists. This Section is a limitation and denial of home rule powers under paragraph (h) of Section 6 of Article VII of the Illinois Constitution.
(Source: P.A. 97-1141, eff. 12-28-12.)

(225 ILCS 30/200) (from Ch. 111, par. 8401-200)

(Section scheduled to be repealed on January 1, 2028)

Sec. 200. This Act takes effect January 1, 1992.
(Source: P.A. 87-784.)

TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS
PART 1245 DIETITIAN NUTRITIONIST PRACTICE ACT

SUBPART A: DEFINITIONS

- Section 1245.10 Definitions

SUBPART B: DIETITIAN NUTRITIONIST

- Section 1245.100 Application for Licensure as a Dietitian Under Section 60(a) of the Act (Grandfather) (Repealed)
- Section 1245.110 Application for Examination/Licensure
- Section 1245.120 Examinations
- Section 1245.130 Approved Schools or Programs in Dietetics and Nutrition
- Section 1245.140 Practice Experience
- Section 1245.150 Endorsement
- Section 1245.160 Restoration

SUBPART C: NUTRITION COUNSELOR

- Section 1245.200 Application for Licensure as a Nutrition Counselor Under Section 60(b) of the Act (Grandfather) (Repealed)
- Section 1245.210 Application for Examination/Licensure (Repealed)
- Section 1245.220 Examination (Repealed)
- Section 1245.230 Approved Programs of Nutrition Counselors (Repealed)
- Section 1245.240 Experience (Repealed)
- Section 1245.250 Endorsement (Repealed)
- Section 1245.260 Restoration (Repealed)

SUBPART D: GENERAL

- Section 1245.300 Renewal
- Section 1245.305 Fees
- Section 1245.310 Continuing Education
- Section 1245.320 Inactive Status
- Section 1245.325 Supervision Under Section 20(m) of the Act
- Section 1245.330 Unprofessional Conduct
- Section 1245.340 Granting Variances

AUTHORITY: Implementing the Dietitian Nutritionist Practice Act [225 ILCS 30] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15(7)].

SOURCE: Adopted at 19 Ill. Reg. 7598, effective May 26, 1995; expedited correction at 19 Ill. Reg. 11678, effective May 26, 1995; amended at 22 Ill. Reg. 8445, effective May 4, 1998; amended at 22 Ill. Reg. 19856, effective October 30, 1998; amended at 24 Ill. Reg. 518, effective December 31, 1999; emergency amendment at 27 Ill. Reg. 3121, effective February 19, 2003, for a maximum of 150 days; amended at 27 Ill. Reg. 10228, effective June 26, 2003; amended at 28 Ill. Reg. 4867, effective March 5, 2004; amended at 40 Ill. Reg. 3658, effective March 11, 2016.

SUBPART A: DEFINITIONS

Section 1245.10 Definitions

"Act" means the Dietitian Nutritionist Practice Act [225 ILCS 30].

"Board" means the Dietitian Nutritionist Practice Board appointed by the Secretary.

"Certified clinical nutritionist" means an individual certified by the Clinical Nutrition Certification Board.

"Certified nutrition specialist" means an individual certified by the Board for Certification of Nutrition Specialists.

"Department" means the Department of Financial and Professional Regulation.

"Diplomate of the American Clinical Board of Nutrition" means an individual certified by the American Clinical Board of Nutrition.

"Director" means the Director of the Division of Professional Regulation, with the authority delegated by the Secretary.

"Direct supervision" means supervision by a licensed dietitian nutritionist or other appropriate supervisor as defined in Section 1245.140. The supervisor shall:

- Meet at regularly scheduled sessions with the supervisee a minimum of one hour per average week;

- Be responsible for the standard of work performed by the supervisee; and

- Have knowledge of patients/clients and the case information.

"Division" means the Department of Financial and Professional Regulation-Division of Professional Regulation.

"Licensed dietitian nutritionist" means a person licensed to practice dietetics and nutrition services, as set forth in the Act. Activities of a licensed dietitian nutritionist do not include the medical differential diagnosis of the health status of an individual.

"Nutrition assessment" means the evaluation of the nutrition needs of individuals or groups using appropriate data to determine nutrient needs or status and make appropriate nutrition recommendations. The mere collection of nutrition and health data is not nutrition assessment and does not require licensure under the Act, unless activities include an evaluation of nutrition needs and nutrition recommendations.

"Nutrition care" means a dietary intervention whose primary function is to improve an individual's nutrition status and involves modification to meet individual needs. Provision of food for general sustenance of being is not construed as nutrition care and not subject to regulation under the Act and this Part.

"Nutrition counseling" means advising and assisting individuals or groups on appropriate nutrition information by integrating information from the nutrition assessment. The distribution by an individual of written nutrition educational material prepared by or approved in writing by a licensee is not nutrition counseling or nutrition education and any person distributing such written material need not be licensed under this Act.

"Nutrition education" means a planned nutrition program based on learning objectives with expected outcomes.

"Nutrition information" is oral or written factual data that includes:

Food sources of vitamins, minerals and nutrients;

Nutrient analysis of food, food items, recipes and menus;

Reporting the results of published scientific studies as long as the source is cited and recommendations are general in nature and are limited to those included in the published study;

Instruction and uses of food, dietary supplements and food material consistent with State and federal laws (i.e., Federal Food and Drug Administration, Department of Public Health); and

The display or distribution of printed, audio or video nutrition education information developed by a licensee, an entity of any federal, state or local government, or any nonprofit organization as outlined in Section 20(g) of the Act.

All health claims shall be consistent with the Federal Food and Drug Administration regulations.

Individuals are not required to be licensed to provide nutrition information; however, the evaluation of an individual's or group's dietary intake and/or recommendation for dietary changes is considered nutrition services and a license would be required to perform these activities.

"Registered dietitian" and/or "registered dietitian nutritionist" means a person registered with the Commission on Dietetic Registration, the credentialing body of the Academy of Nutrition and Dietetics, formerly known as the American Dietetic Association.

"Restorative care to attainment of optimal health" relates to the use of foods, nutrients and/or dietary supplements for individuals or groups who may or may not have a diagnosed disease or medical condition, as long as it is not medical nutrition therapy.

"Secretary" means the Secretary of the Department of Financial and Professional Regulation.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

SUBPART B: DIETITIAN NUTRITIONIST

Section 1245.100 Application for Licensure as a Dietitian Under Section 60(a) of the Act (Grandfather) (Repealed)

(Source: Repealed at 24 Ill. Reg. 518, effective December 31, 1999)

Section 1245.110 Application for Examination/Licensure

- a) An applicant for examination to obtain licensure as a dietitian nutritionist shall file an application, on forms provided by the Department, at least 90 days prior to the examination date. The application shall include:
- 1) Certification of education and an official transcript indicating the applicant holds one of the following:
 - A) A baccalaureate degree or post-baccalaureate degree in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health from a school or program accredited by a regional accrediting agency recognized by the Council on Higher Education Accreditation and the U.S. Department of Education; or
 - B) A baccalaureate degree or post-baccalaureate degree in an equivalent major course of study recommended by the Board and approved by the Department in accordance with Section 1245.130;
 - 2) Verification of 900 hours of practice experience, on forms provided by the Department; and
 - 3) The required fee set forth in Section 1245.305.
- b) In lieu of the documents in subsections (a)(1) and (2), an applicant for licensure as a dietitian nutritionist who, at the time of application, is a certified clinical nutritionist, certified nutrition specialist, diplomate of the American Clinical Board of Nutrition, registered dietitian or registered dietitian nutritionist shall submit a copy of his or her current registration or certification. The applicant will not be required to take an examination set forth in Section 1245.120.
- c) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Department or the Board because of lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant seeking licensure may be requested to:
- 1) Provide such information as may be necessary; and/or
 - 2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information, or clear up any discrepancies or conflicts in information.
- d) An applicant who has filed a completed application with the Department may work under direct supervision, as defined in Section 1245.10, until the earliest of the following:
- 1) 6 months after the filing of his or her written application with the Department;
 - 2) Upon the withdrawal of the application for licensure under the Act;
 - 3) The denial of the application by the Department; or
 - 4) Upon delivery of a notice of intent to deny the application from the Department.
- e) Upon receipt of his or her examination score, an applicant shall direct the testing entity to submit his or her examination score to the Department.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.120 Examinations

- a) The examinations for licensed dietitian nutritionists shall include the examinations given through:
 - 1) the Commission on Dietetic Registration;
 - 2) the American Clinical Board of Nutrition;
 - 3) the Board for Certification of Nutrition Specialists; and
 - 4) the Clinical Nutrition Certification Board.
- b) The passing score on an examination shall be the passing score of the testing entity.
- c) Applicants who fail an examination 3 times in Illinois or any other jurisdiction shall be required to submit proof to the Department of the completion of 6 semester hours of dietetic or nutrition course work as set forth in Section 1245.130(a)(5) prior to sitting for an examination a fourth time.
- d) If an applicant is not a certified clinical nutritionist, certified nutrition specialist, diplomate of the American Clinical Board of Nutrition, registered dietitian or registered dietitian nutritionist, but has taken and passed an examination set forth in subsection (a) within the 12 months prior to applying for licensure, the applicant shall not be required to retake the examination. The examination scores shall be submitted to the Department directly by the testing entity.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.130 Approved Schools or Programs in Dietetics and Nutrition

- a) The education requirements are as follows:
 - 1) The school or program is accredited by a regional accrediting agency recognized by the Council on Higher Education Accreditation, or is a foreign school or program that has been validated by an accrediting agency approved by the U.S. Department of Education as offering a degree equivalent to the baccalaureate or post baccalaureate degree conferred by a regionally accredited college or university in the United States;
 - 2) The school or program has a sufficient number of full-time instructors to assure that educational obligations to the student are fulfilled. The faculty must have demonstrated competence as evidenced by appropriate degrees in their areas of teaching from professional colleges or institutions;
 - 3) The school or program has a designated program director;
 - 4) The school or program maintains permanent student records that summarize the credentials for admission, attendance, grades and other records of performance; and
 - 5) The applicant holds one of the following:

- A) A baccalaureate or post-baccalaureate degree in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health; or
- B) A baccalaureate or post-baccalaureate degree with a major course of study that includes the following:
- i) 18 semester hours of clinical or life science, comprised of the following:
 - 3 semester hours of anatomy and/or physiology;
 - 3 semester hours of counseling and/or behavioral sciences;
 - 12 hours of other clinical and/or life science, including but not limited to the following: medicine, organic chemistry, biology, microbiology, molecular biology, biotechnology, botany, nutrition science, neuroscience, environmental science, immunotherapy, pathology, research methods and applied statistics, biostatistics, epidemiology, genetics, genomics and/or pharmacology; and
 - ii) 18 semester hours of nutrition and/or metabolism, comprised of the following:
 - 6 semester hours of biochemistry;
 - 12 other hours of nutrition and/or metabolism, including but not limited to the following: micronutrients, macronutrients, vitamins and minerals, nutrition education, nutrition counseling, nutrition through the life cycle, endocrinology, therapeutic nutrition, nutritional aspects of disease, pathophysiologic basis of metabolic disease, functional medicine nutrition, molecular metabolism and/or developmental nutrition.
- b) The Department has determined that dietetic and nutrition schools and programs authorized by the following are approved:
- 1) Accreditation Council for Education in Nutrition and Dietetics;
 - 2) Academy of Nutrition and Dietetics;
 - 3) American Clinical Board of Nutrition;
 - 4) Board for Certification of Nutrition Specialists; and
 - 5) Clinical Nutrition Certification Board.

- c) Individuals who are deficient in any of the courses set forth in subsection (a)(5) above may complete those courses in an approved school or program.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.140 Practice Experience

- a) Pursuant to Section 45 of the Act, applicants for licensure are required to demonstrate successful completion, within a 5 year time frame, of a minimum of 900 hours of practice experience in dietetics or nutrition, as defined in Section 10 of the Act.
- b) The practice experience shall have been received from a supervisor who, at the time direct supervision took place, had at least 3 years of experience in dietetics or nutrition and was one of the following:
 - 1) An individual who holds an active license under the Act or an actively licensed resident of another jurisdiction if the jurisdiction in which the supervisor practices requires licensure;
 - 2) A licensed practitioner (such as, but not limited to, a licensed physician or registered nurse) whose license includes nutrition care;
 - 3) An individual with a doctoral degree conferred by a U.S. regionally accredited college or university with a major course of study in human nutrition, nutrition education, food and nutrition, dietetics or food systems management, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health;
 - 4) A registered dietitian or registered dietitian nutritionist of the Commission on Dietetic Registration;
 - 5) A certified clinical nutritionist of the Clinical Nutrition Certification Board;
 - 6) A certified nutrition specialist of the Board of Certification of Nutrition Specialists;
 - 7) A diplomate of the Academy of Nutrition and Dietetics; or
 - 8) A supervisor approved by the Department.
- c) Practice experience must be completed in the United States or its territories.
- d) The supervisor shall observe, supervise and assess the applicant through contact or meetings with the supervisee. Supervision may be individual or group.
- e) The practice experience must be under direct supervision as defined in Section 1245.10 and documented by the supervisor as satisfactory or better.
- f) The practice experience may be obtained concurrently with or following the completion of the education requirements.
- g) Internships approved by the following meet the experience requirements set forth in this Section:
 - 1) Accreditation Council for Education in Nutrition and Dietetics;

- 2) American Clinical Board of Nutrition;
- 3) Board for Certification of Nutrition Specialists; and
- 4) Clinical Nutrition Certification Board.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.150 Endorsement

- a) An applicant who is licensed, certified or registered under the laws of another state or territory of the United States or of a foreign country and who wishes to be licensed in Illinois as a dietitian nutritionist shall file an application with the Department, on forms provided by the Department, that includes:
 - 1) Certification of education and an official transcript from a baccalaureate or post baccalaureate degree program in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health from a school or program accredited by a regional accrediting agency recognized by the Council on Higher Education Accreditation, or an equivalent major course of study recommended by the Board and approved by the Department in accordance with Section 1245.130;
 - 2) Certification of at least 900 hours of practice experience as set forth in Section 1245.140;
 - 3) Certification from the state or territory of the United States or the foreign country in which the applicant was originally licensed, certified or registered and any location in which the applicant predominantly practices and is currently licensed, certified or registered, stating:
 - A) The time during which the applicant was originally licensed, certified or registered;
 - B) Whether the file of the applicant contains any record of disciplinary actions taken or pending; and
 - C) Examinations taken and examination scores received;
 - 4) Proof of successful completion of an examination in accordance with Section 1245.120; and
 - 5) The required fee as set forth in Section 1245.305.
- b) In lieu of the documents in subsections (a)(1), (2) and (4), an applicant for licensure as a dietitian nutritionist may submit a copy of any of the following current designations:
 - 1) registered dietitian or registered dietitian nutritionist of the Commission on Dietetic Registration;
 - 2) certified clinical nutritionist of the Clinical Nutrition Certification Board;

- 3) certified nutrition specialist of the Board for Certification of Nutrition Specialists;
or
 - 4) diplomate of the Academy of Nutrition and Dietetics.
- c) An applicant for licensure as a dietitian nutritionist who is licensed, certified or registered under the laws of another state or territory of the United States or of a foreign country or is a registered dietitian or registered dietitian nutritionist, certified clinical nutritionist, certified nutrition specialist or diplomate of the American Clinical Board of Nutrition may practice dietetics in this State:
- 1) Until 6 months after the filing of his or her written application to the Department;
 - 2) Upon the withdrawal of the application for licensure under the Act;
 - 3) Until the denial of the application by the Department; or
 - 4) Upon delivery of a notice of intent to deny the application from the Department.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.160 Restoration

- a) Any dietitian nutritionist whose license has expired or has been placed on inactive status for 5 years or less may have the license restored by paying the fees required by Section 1245.305 and providing proof of meeting the CE requirements of Section 1245.310 during the 2 years prior to restoration.
- b) Any person seeking restoration of a license that has been expired or placed on inactive status for more than 5 years shall file an application, on forms supplied by the Department, together with the fee required by Section 1245.305 and proof of meeting the CE requirements of Section 1245.310 during the 2 years prior to restoration. The applicant shall also submit:
 - 1) Sworn evidence of active practice in another jurisdiction. That evidence shall include a statement from an appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of active practice;
 - 2) An affidavit attesting to military service as provided in Section 70 of the Act;
 - 3) Proof of passage of the Commission on Dietetic Registration examination for dietitian nutritionists during the period the license was lapsed or on inactive status;
or
 - 4) Evidence of current status as a registered dietitian or registered dietitian nutritionist, certified clinical nutritionist, certified nutrition specialist, or diplomate of the American Clinical Board of Nutrition.
- c) Any person seeking restoration of a license within 2 years after honorable termination from military service pursuant to Section 70 of the Act will be required to pay only the current renewal fee and will not be required to submit proof of meeting the CE requirements.

- d) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Department because of a lack of information, discrepancies or conflicts in information given, or a need for clarification, the licensee seeking restoration may be requested to:
- 1) Provide such information as may be necessary; and/or
 - 2) Appear for an interview before the Board to explain such relevance or sufficiency, clarify information or clear up any discrepancies or conflicts in information.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

SUBPART C: NUTRITION COUNSELOR

Section 1245.200 Application for Licensure as a Nutrition Counselor Under Section 60(b) of the Act (Grandfather) (Repealed)

(Source: Repealed at 24 Ill. Reg. 518, effective December 31, 1999)

Section 1245.210 Application for Examination/Licensure (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

Section 1245.220 Examination (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

Section 1245.230 Approved Programs of Nutrition Counselors (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

Section 1245.240 Experience (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

Section 1245.250 Endorsement (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

Section 1245.260 Restoration (Repealed)

(Source: Repealed at 28 Ill. Reg. 4867, effective March 5, 2004)

SUBPART D: GENERAL

Section 1245.300 Renewal

- a) Every license issued under the Act shall expire on October 31 of each odd-numbered year. In order to renew a license, a licensee shall be required to complete 30 hours of CE in accordance with Section 1245.310. The holder of a license may renew such license during the month preceding the expiration date by paying the required fee.

- b) It is the responsibility of each licensee to notify the Department of any change of address. Failure to receive a renewal form from the Department shall not constitute an excuse for failure to pay the renewal fee or to renew one's license.
- c) Practicing or attempting to practice without a valid license or while a license is not active shall be considered unlicensed practice and shall be grounds for discipline in accordance with Section 15.5 of the Act.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.305 Fees

The following fees shall be paid to the Department and are not refundable:

- a) Application Fees
 - 1) The fee for application for a license as a dietitian nutritionist is \$100. In addition, applicants for an examination shall be required to pay, either to the Department or to the designated testing service, a fee covering the cost of determining an applicant's eligibility and providing an examination. Failure to appear for an examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service, shall result in the forfeiture of the examination fee.
 - 2) The fee for application as a CE sponsor is \$500. State colleges and universities and State agencies are exempt from payment of this fee.
- b) Renewal Fees
 - 1) The fee for the renewal of a license shall be calculated at the rate of \$50 per year.
 - 2) The fee for renewal of CE sponsor approval is \$250 for the renewal period.
- c) General Fees
 - 1) The fee for the restoration of a license other than from inactive status is \$20 plus payment of all lapsed renewal fees, but not to exceed \$300.
 - 2) The fee for the issuance of a duplicate license, for the issuance of a replacement license for a license that has been lost or destroyed, or for the issuance of a license with a change of name or address, other than during the renewal period, is \$20. No fee is required for name and address changes on Department records when no duplicate license is issued.
 - 3) The fee for certification of a licensee's record for any purpose is \$20.
 - 4) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.
 - 5) The fee for a roster of persons licensed as dietitian nutritionists in this State shall be the actual cost of producing the roster.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.310 Continuing Education

a) Continuing Education Hours Requirements

- 1) In order to renew a license, a licensee shall be required to complete 30 hours of CE during the renewal period.
- 2) A renewal period is the 24 months preceding October 31 of each odd-numbered year.
- 3) One CE hour shall equal one clock hour. After completion of the initial CE hour, credit may be given in one-half hour increments.
- 4) Courses that are part of the curriculum of a regionally accredited university or college shall be allotted CE credit at the rate of 15 CE hours for each semester hour, 14 CE hours for each trimester hour and 10 CE hours for each quarter hour of school credit awarded.
- 5) A renewal applicant shall not be required to comply with CE requirements for the first renewal of an Illinois license.
- 6) Dietitian nutritionists licensed in Illinois but residing and practicing in other states shall comply with the CE requirements set forth in this Section.
- 7) CE credit hours used to satisfy the CE requirements of another jurisdiction may be applied to fulfill the CE requirements of the State of Illinois.

b) Approved Continuing Education

- 1) CE hours shall be earned by verified attendance (e.g., certificate of attendance or certificate of completion) at or participation in a program or course that is offered or sponsored by an approved CE sponsor who meets the requirements set forth in subsection (c), except for those activities provided in subsections (b)(2), (3) and (4).
- 2) CE credit may be earned through postgraduate training programs (e.g., extern, residency or fellowship programs) or completion of dietetic and nutrition services related courses that are a part of the curriculum of a college or university.
- 3) CE credit may be earned for verified teaching in a regionally accredited college, university or graduate school of dietetics and nutrition services approved in accordance with Section 1245.130 as an instructor of CE programs given by approved sponsors. Credit will be applied at the rate of 1.5 hours for every clock hour taught and only for the first presentation of the program (i.e., credit shall not be allowed for repetitious presentations). A person may earn a maximum of 10 hours per renewal period.
- 4) CE credit may be earned for authoring papers, publications or books and for preparing presentations and exhibits. The preparation of each published paper, book chapter or audio-visual presentation dealing with dietetics and nutrition services may be claimed as 5 hours of credit per renewal period. A presentation must be before an audience of dietitian nutritionists. Five credit hours may be claimed for only the first time the information is published or presented.

c) Approved CE Sponsors and Programs

- 1) Sponsor, as used in this Section, shall mean one of the following:
 - A) Academy of Nutrition and Dietetics, branch associations, or organizations approved as sponsors of CE by the Commission on Dietetic Registration;
 - B) Board for Certification of Nutrition Specialists, branch associations, or organizations approved as sponsors of CE by the Board for Certification of Nutrition Specialists;
 - C) American Clinical Board of Nutrition, branch associations, or organizations approved as sponsors of CE by the American Clinical Board of Nutrition;
 - D) Clinical Nutrition Certification Board, branch associations, or organizations approved as sponsors of CE by the Clinical Nutrition Certification Board;
 - E) Colleges and universities accredited by a regional accrediting agency recognized by the Council on Higher Education Accreditation;
 - F) Employers licensed under the Hospital Licensing Act [210 ILCS 85];
 - G) Illinois State agencies;
 - H) Providers approved by another state's board of dietitian nutritionist practice; or
 - I) A person, firm, association, corporation or any other group that applies pursuant to subsection (c)(2) and has been approved and authorized by the Department to coordinate and present CE courses and programs.
- 2) An entity seeking approval as a CE sponsor shall submit an application, on forms supplied by the Department, along with the required fee as set forth in Section 1245.305. (State agencies, State colleges and State universities in Illinois shall be exempt from paying this fee.) The application shall include:
 - A) Certification that:
 - i) All programs offered by the sponsor for CE credit shall comply with the criteria in this Section;
 - ii) The sponsor shall be responsible for verifying attendance at each program and provide a certificate of attendance to the participant as set forth in subsection (c)(7);
 - iii) Upon request by the Department, the sponsor will submit evidence (e.g., certificate of attendance or course material) as is necessary to establish compliance with this Section. Evidence shall be required when the Department has reason to believe that there is not full compliance with the Act and this Part and that this information is necessary to ensure compliance; and
 - B) A copy of a 3 hour sample program with faculty, course materials and syllabi.

- 3) All programs shall:
 - A) Contribute to the advancement, extension and enhancement of the professional skills and scientific knowledge of the licensee in the practice of dietetics and nutrition services;
 - B) Foster the enhancement of general or specialized work in the practice of dietetics and nutrition services;
 - C) Be developed and presented by persons with education and/or experience in the subject matter of the program;
 - D) Specify the course objectives, course content and teaching methods to be used; and
 - E) Specify the number of CE hours that may be applied to fulfilling the Illinois CE requirements for renewal of a license.
- 4) Each CE program shall provide a mechanism for evaluation of the program and instructor by the participants. The evaluation may be completed on-site immediately following the program presentation or an evaluation questionnaire may be distributed to participants to be completed and returned by mail or electronically. The sponsor and the instructor, together, shall review the evaluation outcome and revise subsequent programs accordingly.
- 5) An approved sponsor may subcontract with individuals and organizations to provide approved programs. All advertising, promotional materials and certificates of attendance must identify the licensed sponsor and the sponsor's license number. The presenter of the program may also be identified, but should be identified as a presenter. When a licensed sponsor subcontracts with a presenter, the licensed sponsor retains all responsibility for monitoring attendance, providing certificates of attendance and ensuring the program meets all of the criteria established by the Act and this Part, including the maintenance of records.
- 6) All programs given by approved sponsors shall be open to all dietitian nutritionists and not be limited to members of a single organization or group.
- 7) Certification of Attendance. It shall be the responsibility of a sponsor to provide each participant in a program with a certificate of attendance or participation. The sponsor's certificate of attendance shall contain:
 - A) The name, address and license number of the sponsor;
 - B) The name and address of the participant;
 - C) A brief statement of the subject matter;
 - D) The number of hours attended in each program;
 - E) The date and place of the program; and
 - F) The signature of the sponsor.

- 8) The sponsor shall maintain attendance records for not less than 5 years.
 - 9) The sponsor shall be responsible for assuring that no renewal applicant shall receive CE credit for time not actually spent attending the program.
 - 10) Upon the failure of a sponsor to comply with any one of the requirements of this subsection (c), the Department, after notice to the sponsor and hearing before the Department, shall thereafter refuse to accept for CE credit attendance at or participation in any of that sponsor's CE programs until the Department receives assurances of compliance with requirements of this Section.
 - 11) Notwithstanding any other provision of this Section, the Department or Board may evaluate any sponsor of any approved CE program at any time to ensure compliance with requirements of this Section.
- d) Certification of Compliance with CE Requirements
- 1) Each renewal applicant shall certify, on the renewal application, full compliance with the CE requirements set forth in this Section.
 - 2) The Department may require additional evidence demonstrating compliance with the CE requirements (e.g., certificate of attendance). It is the responsibility of each renewal applicant to retain or otherwise produce evidence of compliance.
 - 3) The Department may conduct a random audit to verify compliance with the CE requirements.
 - 4) When there appears to be a lack of compliance with CE requirements, an applicant shall be notified in writing.
- e) Continuing Education Earned in Other Jurisdictions
- 1) If a licensee has earned CE hours offered in another jurisdiction not given by an approved sponsor for which the licensee will be claiming credit toward full compliance in Illinois, the licensee shall submit an individual program approval request form, along with a \$20 processing fee, within 90 days prior to expiration of the license. The Board shall review and recommend approval or disapproval of the program using criteria set forth in subsection (c)(3) of this Section. Licensees may seek individual program approval prior to participating in the program.
 - 2) If a licensee fails to submit an out of state CE approval form within the required time frame, late approval may be obtained by submitting the approval request form with the \$20 processing fee plus a \$10 per hour late fee not to exceed \$150. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in this Section.
- f) Waiver of CE Requirements
- 1) Any renewal applicant seeking renewal of a license without having fully complied with these CE requirements shall file with the Department a renewal application along with the required fee set forth in Section 1245.305, a statement setting forth the facts concerning noncompliance and request for waiver of the CE requirements on the basis of these facts. A request for waiver shall be made prior to the renewal date. If the Department finds, from an affidavit or any other evidence submitted,

that extreme hardship has been shown for granting a waiver, the Department shall waive enforcement of CE requirements for the renewal period for which the applicant has applied.

- 2) Extreme hardship shall be determined on an individual basis and be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:
 - A) Full-time service in the armed forces of the United States of America during a substantial part of the prerenewal period;
 - B) An incapacitating illness documented by a statement from a currently licensed physician; or
 - C) Any other similar extenuating circumstance.
- 3) Any renewal applicant who, prior to the expiration date of the license, submits a request for a waiver, in whole or in part, pursuant to the provisions of this Section shall be deemed to be in good standing until the final decision on the application is made by the Department.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.320 Inactive Status

- a) A licensed dietitian nutritionist who notifies the Department, on forms provided by the Department, may place the license on inactive status and shall be excused from paying renewal fees until he or she notifies the Department in writing of the intention to resume active practice.
- b) Any dietitian nutritionist whose license is on inactive status shall not practice dietetics and nutrition services and shall not use the title "dietitian nutritionist", "dietitian", "licensed nutritionist", or "nutrition counselor" or the letters "L.D.N." in the State of Illinois. Any person violating this subsection shall be considered to be practicing without a license and shall be subject to the disciplinary provisions of the Act.
- c) Any licensee seeking restoration from inactive status shall do so in accordance with Section 1245.160.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.325 Supervision Under Section 20(m) of the Act

Under Section 20(m) of the Act, "supervision", when referring to *a dietary technical support person working in a hospital setting or a regulated Department of Public Health or Department on Aging facility or program who has been trained and is supervised while engaged in the practice of dietetics by a licensed dietitian nutritionist*, means supervision by a licensed dietitian nutritionist or other appropriate supervisor.

The supervisor shall:

- a) Meet at regularly scheduled sessions with the supervisee a minimum of one hour per month;
- b) Be responsible for the standard of work performed by the supervisee; and

- c) Have knowledge of patients, clients and case information.

(Source: Added at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.330 Unprofessional Conduct

- a) The Department may suspend or revoke a license, refuse to issue or renew a license or take other disciplinary action based upon its finding of "unethical, unauthorized, or unprofessional conduct" within the meaning of Section 95 of the Act, which is interpreted to include, but is not limited to, the following acts or practices:
- 1) Discriminating against clients on the basis of race, gender, religion, age, national origin, political affiliation, social or economic status, choice of lifestyle or sexual orientation;
 - 2) Promoting or endorsing products in a manner that is not true or is misleading;
 - 3) Permitting the use of his or her name to certify that professional services have been rendered when the licensee has not provided or supervised those services. When providing supervision the licensee shall assume responsibility for the actions of any person under their supervision;
 - 4) Making gross or deliberate misrepresentations or misleading claims as to his or her professional qualifications or of the efficacy or value of his or her nutrition services, or those of another practitioner;
 - 5) Submission of fraudulent claims for services to any health insurance company or health service plan or third party payor;
 - 6) Refusing to divulge to the Department techniques or procedures used in his or her professional activities upon request;
 - 7) Practicing or offering to practice beyond one's competency (for example, providing services and techniques for which one is not qualified by education, training and experience);
 - 8) Directly or indirectly giving to or receiving from any person, firm or corporation any fee, commission, rebate or other form of compensation for any professional services not actually rendered;
 - 9) Making false or misleading statements designed to induce a client to purchase services, goods, appliances or drugs as to exploit the client for the financial gain of the licensee or of a third party;
 - 10) Failing to make available to a client, upon request, copies of documents in the possession or under the control of the licensee that have been prepared for and paid for by the client;
 - 11) Revealing of personally identifiable facts, data or information obtained in a professional capacity without the prior consent of the client, except as authorized or required by law;
 - 12) Delegating professional responsibilities to a person when the licensee delegating those responsibilities knows or has reason to know that the person is not qualified,

by training, by experience or by licensure, to perform them;

- 13) Performing professional services that have not been duly authorized by the client or his or her legal representative;
 - 14) Failing to comply with the following applicable designation:
 - A) the 2009 American Dietetic Association/Commission on Dietetic Registration Code of Ethics for the Profession of Dietetics and Process for Consideration of Ethics Issues, published July 22, 2009 by the Academy of Nutrition and Dietetics, 120 S. Riverside Plaza, Suite 2000, Chicago, Illinois, are hereby incorporated by reference with no later amendments or editions;
 - B) the 2004 American Clinical Board of Nutrition Certification Agreement, published December 1, 2005 by the American Clinical Board of Nutrition Certification, 6855 Browntown Road, Front Royal, Virginia 22630, are hereby incorporated by reference with no later amendments or editions;
 - C) the Certified Clinical Nutritionist Code of Professional Ethics and Responsibility, published December 15, 1991 by the Clinical Nutrition Certification Board, 15280 Addison Road, Suite 130, Addison, Texas 75001, are hereby incorporated by reference with no later amendments or editions; or
 - D) the Board for Certification of Nutrition Specialists 2013 Code of Ethics and Professional Conduct, effective July 23, 2013, published by the Board for Certification of Nutrition Specialists, 4707 Willow Springs Road, Suite 207, La Grange, Illinois 60525, are hereby incorporated by reference with no later amendments or editions.
- b) A dietitian nutritionist shall not advertise in any way that is fraudulent, false, deceptive or misleading. Any advertising shall be considered fraudulent, false, deceptive or misleading if it:
- 1) Contains a misrepresentation of facts;
 - 2) Makes only a partial disclosure of relevant, material facts;
 - 3) Represents that professional services can or will be completely performed for a stated fee when this is not the case, or makes representations with respect to fees for professional services that do not disclose all variables affecting the fees that will in fact be charged;
 - 4) Represents the licensee in a deceptive or misleading manner with respect to the profession or professional status of the licensee;
 - 5) Contains any representation of a special area of practice by the licensee that implies that the licensee requires a superior license or formal recognition by the Department other than a licensed dietitian nutritionist;
 - 6) Makes false, unproven or misleading claims about the validity, safety, or effectiveness of any dietetic or nutrition related service, product or test;

- 7) Fails to conspicuously identify the licensee by name in the advertisement; or
- 8) Makes a guarantee of success.

(Source: Amended at 40 Ill. Reg. 3658, effective March 11, 2016)

Section 1245.340 Granting Variances

- a) The Director may grant variances from these rules in individual cases where:
 - 1) The provision from which the variance is granted is not statutorily mandated;
 - 2) No party will be injured by the granting of the variance; and
 - 3) The rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.
- b) The Director shall notify the Dietitian Nutritionist Practice Board in writing of the granting of a variance, and the reasons therefor.

(Source: Amended at 28 Ill. Reg. 4867, effective March 5, 2004)

Item for Board Action

Public/Interested Parties' Feedback

Other Board Business