## State Approaches to Scope of Practice



## ADVANCED PRACTICE REGISTERED NURSES

January 2015

Advanced practice registered nurses (APRNs) are "nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that certifies nurses for advanced practice roles as certified nurse practitioners, certified nurse anesthetists, certified nurse midwives, and clinical nurse specialists." Although a variety of nuances exist, there are generally three approaches (Figure 1) used by states to regulate the relationship between physicians and advanced practice registered nurses (APRNs) as it relates to diagnosis and treatment:<sup>2</sup>

- Requirement for physician supervision—Eight states<sup>3</sup> require physician supervision for an APRN to diagnose and treat patients. "Supervision" in each state varies, and may not require a physician to be on-site or have face-to-face interaction with the APRN. In some cases, physicians may be required to sign APRN charts to receive reimbursement.
- Requirement for written documentation of physician involvement—Twelve states<sup>4</sup> require written documentation of physician involvement for an APRN to diagnose and treat patients. Written documentation of physician involvement is often memorialized in "collaborative practice agreements," the specified contents of which may vary from state to state and sometimes include physician supervision provisions.
- No requirement for physician involvement—The remaining states and the District of Columbia<sup>5</sup> require no physician supervision or collaboration for an APRN to diagnose and treat patients.

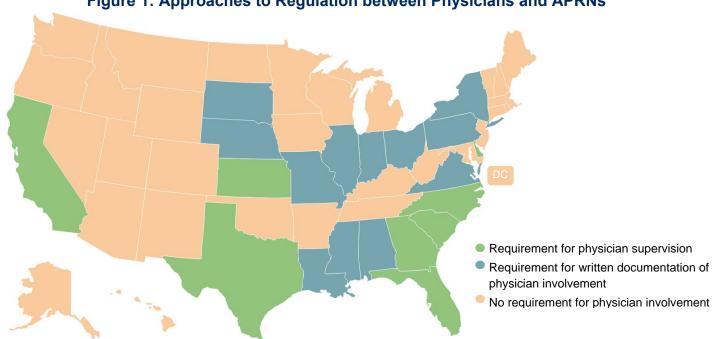


Figure 1: Approaches to Regulation between Physicians and APRNs

<sup>&</sup>lt;sup>1</sup> A.C.A. §17-87-102 (4)(A)

<sup>&</sup>lt;sup>2</sup> Pearson LJ. "The Pearson Report 2014." Jones & Bartlett Learning. Web 10 Dec. 2014. http://www.jblearning.com/catalog/9781284050714/

<sup>&</sup>lt;sup>3</sup> California, Delaware, Florida, Georgia, Kansas, North Carolina, South Carolina, and Texas.

<sup>&</sup>lt;sup>4</sup> Alabama, Indiana, Illinois, Louisiana, Mississippi, Missouri, Nebraska, New York, Ohio, Pennsylvania, South Dakota, and Virginia.

<sup>&</sup>lt;sup>5</sup> Alaska, Arizona, Arkansas, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Iowa, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, North Dakota, Oklahoma, Oregon, Rhode Island, Tennessee, Utah, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.

State regulation of APRN prescriptive authority (Figure 2) can be divided into two categories:<sup>2</sup>

- Requirement for written documentation of physician involvement—Twenty-nine states<sup>6</sup> require
  physician supervision or collaboration and written documentation of the relationship for APRNs to
  prescribe medications.
- **No requirement for physician involvement**—Twenty-one states and the District of Columbia<sup>7</sup> have no requirement for physician supervision or collaboration for an APRN to prescribe medications. Although categorized as requiring no physician involvement, some of these states nonetheless require articulated plans or attestations for physician collaboration or consultation for certain classes of drugs.

Even within these broad categories, there is a great deal of variety. For instance, *Michigan* has a statutorily defined scope of practice within which APRNs may diagnose and treat independently, and anything beyond the statutory scope of practice must be provided under physician supervision. *California* uses the standardized procedure (SP) as the legal mechanism for nurse practitioners to perform functions that would otherwise be considered the practice of medicine. SPs are developed collaboratively by the departments of the health care system in which they will be used. Some states, such as *Maine* and *Missouri*, distinguish between "medical" and "nursing" diagnoses.

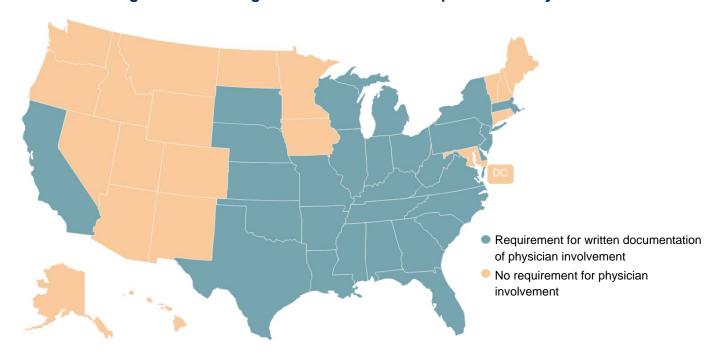


Figure 2: State Regulation of APRN Prescriptive Authority

<sup>&</sup>lt;sup>7</sup> Alaska, Arizona, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Iowa, Maine, Maryland, Minnesota, Montana, Nevada, New Hampshire, New Mexico, North Dakota, Oregon, Rhode Island, Utah, Vermont, Washington, and Wyoming.



<sup>&</sup>lt;sup>6</sup> Alabama, Arkansas, California, Delaware, Florida, Georgia, Illinois, Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Michigan, Mississippi, Missouri, Nebraska, New Jersey, New York, North Carolina, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Virginia, West Virginia, and Wisconsin.