

**Committee of Joint Boards of Nursing and Medicine
and Advisory Committee of Joint Boards of Nursing and Medicine**

Department of Health Professions
Perimeter Center - 9960 Mayland Drive, Conference Center, Suite 201, Henrico, Virginia 23233

**Business Meeting Agenda
October 10, 2018 at 10:00 A.M. in Board Room 2**

Call To Order - Louise Hershkowitz, CRNA, MSHA; Chair

Establishment of Quorum

Announcement

- Joseph Corley has accepted the Nurse Practitioner Licensing Application Compliance Specialist. He starts on October 10, 2018

Review of Minutes

- April 11, 2018 Business Meeting
- April 11, 2018 Formal Hearing
- May 17, 2018 Regulatory Advisory Ad Hoc Committee Meeting

Public Comment

Dialogue with Agency Director – Dr. Brown

Old Business:

- Regulatory Update – Ms. Yeatts

New Business

- Environmental Scan – Ms. Hershkowitz (verbal)
 - ❖ Joint Boards Members and Advisory Members are invited to share current/new nurse practitioner issued in their practice/area
- Board of Nursing Executive Director Report – Ms. Douglas (verbal)
 - ❖ Development of attestation forms and process
 - ❖ Communication to nurse practitioners regarding HB793
 - ❖ Frequently asked questions of staff
 - ❖ DHP Paperless License Initiative
 - ❖ NCSBN APRN Compact Update
- NCSBN APRN issues report – Dr. Hills (verbal)
- NP Licensing Report – Ms. Willinger
 - ❖ Data clean up
 - ❖ Certification availability in NURSYS

Agency Subordinate Recommendations Consideration - Joint Boards Members ONLY

- Anna Alexander Leggett, LNP
- Lea E. Lineberry, LNP
- Judith Tapsell Thompson Gorem LNP

Consent Orders Consideration - Joint Boards Members ONLY

- Anya Williams Howard, LNP

Next Meeting – Wednesday, December 5, 2018, at 9:00 A.M in Board Room 4

Probable Cause Review/Case Presentation – All Joint Boards Members

Adjourn

1:00 P.M – Disciplinary Proceeding begins – Joint Boards Members ONLY

**VIRGINIA BOARD OF NURSING
COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE
BUSINESS MEETING MINUTES
April 11, 2018**

TIME AND PLACE: The meeting of the Committee of the Joint Boards of Nursing and Medicine was convened at 10:0 A.M., April 11, 2018 in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

MEMBERS PRESENT: Louise Hershkowitz, CRNA, MSHA; Chair
Marie Gerardo, MS, RN, ANP-BC
Joyce A. Hahn, PhD, RN, NEA-BC, FNAP
Kenneth Walker, MD

MEMBERS ABSENT: Lori Conklin, MD
Kevin O'Connor, MD

**ADVISORY COMMITTEE
MEMBERS PRESENT:** Kevin E. Brigle, RN, NP
Mark Coles, RN, BA, MSN, NP-C
Wendy Dotson, CNM, MSN
David A. Ellington, MD
Sarah E. Hobgood, MD
Stuart F. Mackler, MD
Janet L. Setnor, CRNA

STAFF PRESENT: Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director; Board of Nursing
Robin L. Hills, DNP, RN, WHNP; Deputy Executive Director for Advanced Practice; Board of Nursing
Stephanie Willinger; Deputy Executive Director for Licensing; Board of Nursing
Huong Vu, Executive Assistant; Board of Nursing
Sylvia Tamayo-Suijk, Discipline Team Coordinator; Board of Nursing

OTHERS PRESENT: Erin Barrett, Assistant Attorney General; Board Counsel
David Brown, DC; Director; Department of Health Professions
Barbara Allison-Bryant, MD, Department of Health Professions Chief Deputy
Elaine Yeatts, Senior Policy Analyst, Department of Health Professions
William L. Harp, MD, Executive Director; Board of Medicine

IN THE AUDIENCE: W. Scott Johnson, Medical Society of Virginia (MSV)
Ralston King, Medical Society of Virginia (MSV)
Richard Grossman, Virginia Council of Nurse Practitioners (VCNP)
Sarah Heisler, Virginia Hospital and Healthcare Association (VHHA)
Ryan LaMirra, Virginia Hospital and Healthcare Association (VHHA)

INTRODUCTIONS: Committee members, Advisory Committee members and staff members introduced themselves.

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ESTABLISHMENT OF A QUORUM:

Ms. Hershkowitz called the meeting to order and established that a quorum was present.

ANNOUNCEMENT:

Ms. Hershkowitz noted the announcement list on the agenda.

REVIEW OF MINUTES:

The minutes of February 7, 2018 Business Meeting and Formal Hearing were reviewed. Ms. Hershkowitz requested correction of the minutes regarding Kassie Schroth who is with the Virginia Association of Nurse Anesthetists (VANA), not the Medical Society of Virginia (MSV). Ms. Gerardo moved to accept all of the minutes with amendment. The motion was seconded and passed unanimously.

PUBLIC COMMENT:

Ms. Hershkowitz asked that no comment about the HB793, Nurse Practitioner Bill, to be received today. She added that Committee will convene a special meeting regarding this bill on May 17, 2018 and there will be opportunity for public comment.

There was no public comment received.

DIALOGUE WITH
AGENCY DIRECTOR:

Dr. Brown reported the following:

- The General Assembly reconvened today to consider possible legislation to expand Medicaid. Many bills were amended and vetoed by the Governor
- DHP was asked to research if legislation is needed:
 - ❖ To regulate community health workers
 - ❖ To regulate outpatient treatment centers
 - ❖ To regulate administration of Naloxone in emergency room
 - ❖ To prohibit conversion therapy to minors

Dr. Brown added that a Workgroup of Board Representatives will be convene to discuss these matters.

- IT, Front Desk, and Business Administration staff have moved to the first floor successfully
- Dr. Brown, Dr. Allison-Bryant, DHP Chief Deputy, and Lisa Hahn, DHP Chief Operation Officer (COO), are studying the need for additional building security.

Ms. Hershkowitz asked if members have questions for Dr. Brown.

Dr. Mackler stated that he was asked by a friend, a psychiatrist, whether nurse practitioners were notified about changes in the laws. Dr. Harp said yes.

Ms. Dotson said that previously there were seminars on training people on addiction treatment. Will there be more training on prescribing for treatment

of addiction. Dr. Brown said there are trainings provided by the Virginia Department of Health (VDH). Additionally, he added that only 50% of people completing the training provide substance abuse disorder treatment.

Dr. Hobgood commented that doctors who take on that responsibility are afraid it will take over their clinical practice due to lack of treatment providers.

SAMHSA has a list of providers to whom waivers have been granted to provide treatment.

OLD BUSINESS:

Regulatory Update:

Ms. Yeatts reviewed the chart of regulatory actions as provided in the handout noting that once the Prescribing Opioids regulations are approved by the Governor, the Emergency Regulations must be replaced within 18 months.

Report of 2018 General Assembly:

Ms. Yeatts reviewed the report as provided in the handout.

POLICY FORUM:

Virginia's Healthcare Workforce Data Center (HWDC) Nurse Practitioner Workforce: Composition by Specialty 2018 Report:

Drs. Carter and Shobo presented the most recent data for CRNAs, CNMs, and NPs noting that only half of the nurse practitioners responded to the survey at renewal. Dr. Carter noted that the findings indicate good employment prospect for all three specialties and asked if the Committee wishes to have this breakdown data included in the annual report going forward.

Ms. Gerardo moved to have the breakdown data into three specialties to be included in the annual report going forward. The motion was seconded and carried unanimously.

Ms. Hershkowitz thanked Drs. Carter and Shobo for their report and requested the Advisory Committee Members to encourage their professional association members to respond to survey when renewing.

RECESS:

The Board recessed at 11:05 AM

RECONVENTION:

The Board reconvened at 11:20 AM

NEW BUSINESS:

Board of Nursing Executive Director Report:

Ms. Douglas reported the following:

- Board staff continues to receive many questions from individuals, facilities, and hospitals regarding HB793.
- Board of Nursing will have an intern who will start on June 10, 2018 to assist Board staff on projects to include nurse practitioner data cleanup.

- There has been an increase in complaints for all professions since the implementation of the online complaint form but not all complaints result in violation of the laws and regulations.

IMPLEMENTATION OF HB793 – Autonomous practice for certain nurse practitioners

Ms. Yeatts provided a handout of tentative timeline for implementation of HB793 noting that the Governor signed the bill on April 4, 2018 so the emergency regulations must be in place within 280 days from its enactment, which will be by January 9, 2019.

Ms. Yeatts reviewed topics for consideration in adoption of regulations and to amend Chapter 30 (NP Licensure) and 40 (Prescriptive Authority) and noting additional suggested topics such as:

- What does it mean to have an attestation to prove five years of full-time equivalent clinical experience?
- What are the requirements for attestation form?

Dr. Mackler suggested looking at other states that already have the regulations in place. Ms. Douglas said that staff plan to utilize the information from other states and from the NCSBN.

Ms. Yeatts commented that there are nine categories of nurse practitioners but this bill does not affect CRNAs and CNMs. Ms. Yeatts suggested that staff send out preliminary comment request to general public before the May 17, 2018 meeting. She added that staff can prepare draft regulations based on the comments received for Committee consideration on May 17. All agreed.

ADJOURNMENT: As there was no additional business, the meeting was adjourned at 12:47 P.M.

Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

**VIRGINIA BOARD OF NURSING
COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE
FORMAL HEARING MINUTES
April 11, 2018**

- TIME AND PLACE:** The meeting of the Committee of the Joint Boards of Nursing and Medicine was convened at 2:00 P.M., April 11, 2018 in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.
- CHAIR:** Louise Hershkowitz, CRNA, MSHA; Chair
- COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE MEMBERS PRESENT:**
Marie Gerardo, MS, RN, ANP-BC, Board of Nursing, Joint Board Member
Joyce A. Hahn, PhD, Rn, NEA-BC, FNAP, Board of Nursing, Joint Board Member
Kenneth Walker, MD, Board of Medicine, Joint Board Member
- STAFF PRESENT:** Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director; Board of Nursing
Robin L. Hills, DNP, RN, WHNP; Deputy Executive Director for Advanced Practice
Darlene Graham, Senior Discipline Specialist; Board of Nursing
- OTHERS PRESENT:** Erin Barrett, Assistant Attorney General; Board Counsel
- ESTABLISHMENT OF A QUORUM:** With four members of the Committee of the Joint Boards present, a quorum was established.
- FORMAL HEARING:** **Karen Diane Beatty, LNP 00024-168880, Authorization to Prescribe 0017-139805**
Ms. Beatty appeared and was accompanied by Jeremy Ball, Esquire, Walter Mostek, MD, Randall Scott, MD, and Brian Brown, Father of Patient A.

David Kazzie, Adjudication Specialist, represented the Commonwealth. Ms. Barrett was legal counsel for the Committee of Joint Boards and Board of Nursing. Andrea Pegram, court reporter, recorded the proceedings.

Pam Twombly, Enforcement Deputy Director, Department of Health Professions, Catherine Merrit, Mother of Patient A, Dr. Walter Mostek, Dr. Randall Scott, and Brian Brown, Father of Patient A, were present and testified.
- RECESS:** The Committee recessed at 3:45 P.M.
- RECONVENTION:** The Committee reconvened at 3:55 P.M.
- CLOSED MEETING:** Ms. Gerardo moved that the Committee of the Joint Boards of Nursing and Medicine convene a closed meeting pursuant to §2.2-3711(A)(7) of the *Code of Virginia* at 3:58 P.M., for consultation with Board Counsel pertaining to actual or probable litigations in the matter of Ms. Beatty. Additionally, Ms. Gerardo moved that Ms. Douglas, Dr. Hills and Ms. Barrett attend the closed meeting because

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their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 5:58 P.M.

Ms. Gerardo moved that the Committee of the Joint Boards of Nursing and Medicine and panel of the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Dr. Hahn moved that the Committee of the Joint Boards of Nursing and Medicine dismiss allegations 2a and 2b in the case against Karen Diane Beatty, LNP. The motion was seconded and carried unanimously.

CLOSED MEETING: Ms. Gerardo moved that the Committee of the Joint Boards of Nursing and Medicine convene a closed meeting pursuant to §2.2-3711(A)(28) of the *Code of Virginia* at 7:06 P.M., for the purpose to reach a decision in the matter of Ms. Beatty. Additionally, Ms. Gerardo moved that Dr. Hills, Ms. Graham and Ms. Barrett attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 7:52 P.M.

Dr. Hahn moved that the Committee of the Joint Boards of Nursing and Medicine certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

Dr. Walker moved that the Committee of the Joint Boards of Nursing and Medicine accept the findings of fact and conclusions of laws as presented by Mr. Kazzie, amended by the Committee of the Joint Boards of Nursing and Medicine. The motion was seconded and carried unanimously.

ACTION: Ms. Gerardo moved that the Committee of the Joint Boards of Nursing and Medicine reprimand Karen Diane Beatty and to impose a \$500.00 monetary penalty to be paid to the Board within 30 days from the date of entry of the Order. The motion was seconded and carried unanimously.

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ADJOURNMENT: The meeting was adjourned at 7:55 P.M.

Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

DRAFT

**VIRGINIA COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE
REGULATORY ADVISORY AD HOC COMMITTEE MEETING MINUTES
May 17, 2018**

TIME AND PLACE: The meeting of the Committee of the Joint Boards of Nursing and Medicine Regulatory Advisory Ad Hoc Committee was convened at 9:01 A.M., May 18, 2018 in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

MEMBERS PRESENT: Louise Hershkowitz, CRNA, MSHA; Chair
Marie Gerardo, MS, RN, ANP-BC
Joyce A. Hahn, PhD, RN, NEA-BC, FNAP
Lori Conklin, MD
Kevin O'Connor, MD

MEMBERS ABSENT: Kenneth Walker, MD

ADVISORY COMMITTEE MEMBERS PRESENT: Mark Coles, RN, BA, MSN, NP-C
Wendy Dotson, CNM, MSN
Stuart F. Mackler, MD
Janet L. Setnor, CRNA

ADVISORY COMMITTEE MEMBERS ABSENT: Kevin E. Brigle, RN, NP
David Alan Ellington, MD
Sarah E. Hobgood, MD
Thorkozeni Lipato, MD

STAFF PRESENT: Jay P. Douglas, MSM, RN, CSAC, FRE, Executive Director, Board of Nursing
William L. Harp, MD, Executive Director, Board of Medicine
Robin L. Hills, DNP, RN, WHNP, Deputy Executive Director for Advanced Practice, Board of Nursing
Stephanie Willinger, Deputy Executive Director for Licensing, Board of Nursing
Sylvia Tamayo-Suijk, Discipline Team Coordinator, Board of Nursing

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Counsel
David Brown, DC, Director, Department of Health Professions
Barbara Allison-Bryant, MD, Chief Deputy, Department of Health Professions
Elaine Yeatts, Senior Policy Analyst, Department of Health Professions
Lisa Speller-Davis, BSN, RN, Policy Assistant, Board of Nursing

CALL TO ORDER: Ms. Hershkowitz called the meeting to order at 9:01 A.M.

INTRODUCTIONS: Committee members, Advisory Committee members and staff members introduced themselves.

COMMENTS FROM THE
DHP DIRECTOR:

Dr. Brown emphasized that having an understanding of the differences between the physician and nurse practitioner professions will aid in drafting and implementing HB 793 regulations.

PUBLIC COMMENT:

Ms. Herskowitz noted that due to the number of people wishing to make public comment, there would be a 30-minute limit imposed. Public comment was received from the following citizens regarding the draft regulations to implement HB793 (Chapter 776 of 2018 General Assembly) legislation which authorizes nurse practitioners who meet certain qualifications to practice without a practice agreement with a patient care team physician:

Carolyn Rutledge, PhD, FNP, Professor, Old Dominion University
Cynthia Fagan, MSN, RN, FNP-BC, Virginia Council of Nurse Practitioners,
Government Relations
Shelly Smith, DNP, ANP, Clinical Assistant Professor & DNP Program Director,
Virginia Commonwealth University
Andrea Knopp, Associate Professor, NP Program Coordinator,
James Madison University School of Nursing
Rosie Taylor-Lewis, DNP, ANP-BC, GNP
Phyllis Everett, NP-C
Winifred Carson Smith, Esq., Counsel, Virginia Council for Nurse Practitioners
Kurtis Elward, MD, President, Medical Society of Virginia
Sam Bartle, MD, American Academy of Pediatrics
Scott Hickey, MD, Virginia College of Emergency Physicians
Hunter Jamerson, Esq., Counsel, Virginia Academy of Family Physicians
Lisa Shea Kennedy, MD, Family Physician
Jacqueline Fogarty, MD

REVIEW OF HB 793:

In order to comply with the second enactment on the bill requiring regulations to be in effect within 280 days, the Committee of the Joint Boards of Nursing and Medicine are meeting today to develop recommended amendments to nurse practitioner regulations to implement the provisions of HB 793. Ms. Yeatts' review of the provisions of HB 793 included the following:

- There are nine categories of licensed nurse practitioners seven of which are affected by this bill (certified registered nurse anesthetists and certified nurse midwives remain unaffected)
- The focus of the regulations will be on amendments to Virginia Code 54.1-2957, particularly (I) which focuses on the requirements for autonomous practice and (E) regarding licensure by endorsement

REVIEW OF TIMELINE
AND TOPICS FOR
CONSIDERATION:

Ms. Yeatts revised the tentative timeline for implementation of HB793 as follows:

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04/11/18	Discussion of legislation and plan for promulgation of emergency regulations which must be effective by 1/9/19
05/17/18	Committee of the Joint Boards to receive public comment, consider draft regulations, and make recommendations (30-day Request for Public Comment on draft regulations posted on TownHall as soon as possible after drafting)
06/?/18	Additional meeting of Joint Boards if necessary to complete recommended regulations
07/17/18	Board of Nursing votes to adopt emergency regulations/NOIRA
08/03/18	Board of Medicine votes to adopt emergency regulations/NOIRA

Ms. Yeatts reviewed the following topics for consideration in adoption of regulations and to amend Chapter 30 (NP Licensure) and 40 (Prescriptive Authority):

- Equivalent of at least five years of full-time clinical experience
- Routinely practiced in a practice area included within the category for which NP was certified and licensed
- Requirements for attestation.
- Fee associated with submission of attestation and issuance of autonomous designation
- Acceptance of “other evidence” demonstrating that the applicant met the requirements
- Endorsement of experience in other states

REVIEW OF WRITTEN
PUBLIC COMMENTS:

Ms. Yeatts noted that there was significant public comment with Nurse Practitioners expressing concern regarding the five-year attestation requirement being too burdensome. Other written comments included the need for establishing competencies which is not authorized by the code.

DISCUSSION:

Dr. Conklin expressed concern regarding quality of nurse practitioner online education and training.

Dr. O’Connor stated that the bill would expand access to citizens who are in need and stated that physician training is different from nurse practitioner training.

Ms. Gerardo stated that the nurse practitioner scope of practice is different from the physician scope of practice and suggested that physicians would benefit from becoming more familiar with how nurse practitioners are educated and trained.

Ms. Dotson emphasized that legislation does not do away with collaborative relationship between physicians and nurse practitioners. She reminded the Regulatory Ad Hoc Committee that the attestation will verify clinical experience not nurse practitioner competency and added that all nurse practitioner programs,

including online programs, are accredited and require comparable practical clinical experience.

Ms. Yeatts provided a handout of a staff working draft of the regulatory language to the RAP committee and members of the audience.

RECESS: The Committee recessed at 10:12 A.M.

RECONVENE: The Committee reconvened at 10:35 A.M.

DISCUSSION AND
APPROVAL OF DRAFT
REGULATIONS:

18VAC90-30-10

The definition for autonomous practice was added as follows:

“Autonomous practice” means practice in a category in which a nurse practitioner is certified and licensed without a written or electronic practice agreement with a patient care team physician in accordance with 18VAC90-30-86.

18VAC90-30-20 - Delegation of authority

Dr. O’Connor suggested that a Joint Boards credentialing committee may need to be considered for review of applications.

18VAC90-30-20 – Fees

The range of \$75-\$100 for the one-time attestation application fee was presented.

Ms. Yeatts reminded the RAP Committee that the Prescriptive Authority license is in the process of being subsumed into the NP license and eliminated.

Replacing the biennial Prescriptive Authority license fee with this one-time attestation application fee would result in lower costs to licensees.

Ms. Gerardo stated that it was appropriate and not excessive or burdensome. Ms. Setnor stated that \$100 seemed fair.

18VAC90-30-86 – Autonomous practice

Definition of full-time experience:

Ms. Yeatts stated that the language of 18VAC90-30-86(A)(1) & (2) requires that the number of direct care hours per year which would constitute full-time clinical experience be defined.

- Dr. Conklin stated that 40 hours per week was reasonable in light of the 32-80 hour range of physicians.

- Dr. Hahn was in favor of 32 hours per week in order to be inclusive of all nurse practitioners considered full-time by the employers.
- Ms. Setnor clarified that precepting students is considered “direct patient care” but that classroom teaching is not.
- Dr. Conklin noted that physicians complete 20,000 clinical hours during residency.
- Dr. Brown asked for an example of what constitutes a 32-hour work week.
- Ms. Hershkowitz questioned if full-time experience or breadth of clinical experience was most important.
- Mr. Coles stated that in the business world, full-time is sometimes considered 32 hours.
- Ms. Dotson stated that at the Veterans Administration, 1600 hours per year is considered full-time.

Dr. O’Connor moved to define full-time clinical experience as 1800 hours per year for a total of 9,000 hours over the course of a five-year period. The motion was seconded but died with a vote of 3 in favor and 5 opposed.

Ms. Gerardo moved to define full-time experience as 1600 hours per year for a total of 8,000 hours over a five-year period. The motion was seconded and carried with 6 in favor and 2 opposed.

Content of attestation:

Dr. Hahn moved to adopt the language in 18VAC90-30-86(B) as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

Multiple attestations if certified in more than one category:

Dr. O’Connor moved to adopt the language in 18VAC90-30-86(C) as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

Attestations for more certification in than one category:

Dr. O’Connor moved to adopt the language in 18VAC90-30-86(D) as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

Other evidence of meeting qualifications for autonomous practice:

The last sentence of 18VAC90-30-86(E) was amended to read:

The burden shall be on the nurse practitioner to provide sufficient evidence to support the nurse practitioner’s inability to obtain an attestation.

Dr. Meckler moved to adopt the language in 18VAC90-30-86(E) as presented by Ms. Yeatts and amended by the RAP Committee. The motion was seconded and carried unanimously.

License by Endorsement:

Ms. Gerardo moved to adopt the language in 18VAC90-30-86(F) as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

Requirements:

Dr. O'Connor moved to adopt the language in 18VAC90-30-86(G) as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

The Committee reviewed editorial amendments to the following regulations:

- 18VAC90-30-110 Reinstatement of license
- 18VAC90-30-120 (A) & (C) Practice of licensed nurse practitioners other than certified registered nurse anesthetists or certified nurse midwives
- 18VAC90-40-90 Practice agreement requirements

Dr. Hahn moved to adopt the language in 18VAC90-30-110, 18VAC90-30-120, and 18VAC90-40-90 as presented by Ms. Yeatts. The motion was seconded and carried unanimously.

Dr. Hahn moved to present a draft with the adopted amendments to the Board of Medicine and to the Board of Nursing for review and approval. The motion was seconded and carried unanimously.

NEXT STEPS:

Ms. Yeatts will submit draft regulations for autonomous practice for nurse practitioners to TownHall and there will be a 30-day comment period. All comments received will be presented to the Board of Medicine and to the Board of Nursing. The Board of Nursing will consider the draft regulations on July 17, 2018, and the Board of Medicine will consider the draft regulations on August 3, 2018. The Boards plan to adopt emergency regulations by mid-December.

The Committee of the Joint Boards of Nursing and Medicine will draft a sample attestation for approval. The goal is to have the methodology for issuing the new licenses in place by early 2019.

ADJOURNMENT:

As there was no additional business, the meeting was adjourned at 11:41 P.M.

Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

**Agenda Item: Regulatory Actions - Chart of Regulatory Actions
As of October 2, 2018**

Board		Boards of Nursing and Medicine
Chapter	Action / Stage Information	
[18 VAC 90 30]	Regulations Governing the Licensure of Nurse Practitioners	<u>Autonomous practice</u> [Action 5132] Emergency/NOIRA - AT Attorney General's Office <i>Adopted by Medicine: 8/3/18</i> <i>Adopted by Nursing: 9/18/18</i>
[18 VAC 90 30]	Regulations Governing the Licensure of Nurse Practitioners	<u>Supervision and direction of laser hair removal</u> [Action 4863] Proposed - At Governor's Office for 27 days
[18 VAC 90 40]	Regulations for Prescriptive Authority for Nurse Practitioners	<u>Elimination of separate license for prescriptive authority</u> [Action 4958] NOIRA - Register Date: 7/23/18 <i>Proposed adopted by Nursing: 9/18/18</i> <i>Proposed to be adopted by Medicine: 10/18/18</i>
[18 VAC 90 40]	Regulations for Prescriptive Authority for Nurse Practitioners	<u>Prescribing of opioids</u> [Action 4797] Proposed - Register Date: 7/9/18 <i>Comment closed: 9/7/18</i> <i>Final to be adopted by Medicine: 10/18/18</i> <i>Final to be adopted by Nursing: 11/13/18</i>

BOARDS OF NURSING AND MEDICINE

Elimination of separate license for prescriptive authority

18VAC90-40-20. Authority and administration of regulations.

A. The statutory authority for this chapter is found in §§ 54.1-2957.01, 54.1-3303, 54.1-3401, and 54.1-3408 of the Code of Virginia.

B. Joint boards of nursing and medicine.

1. The Committee of the Joint Boards of Nursing and Medicine shall be appointed to administer this chapter governing prescriptive authority.

2. The boards hereby delegate to the Executive Director of the Virginia Board of Nursing the authority to issue the initial authorization ~~and biennial renewal~~ to those persons who meet the requirements set forth in this chapter and to grant extensions or exemptions for compliance with continuing competency requirements as set forth in subsection E of 18VAC90-40-55. Questions of eligibility shall be referred to the committee.

3. All records and files related to prescriptive authority for nurse practitioners shall be maintained in the office of the Board of Nursing.

18VAC90-40-50. ~~Renewal of prescriptive authority.~~ (Repealed.)

~~An applicant for renewal of prescriptive authority shall:~~

~~1. Renew biennially at the same time as the renewal of licensure to practice as a nurse practitioner in Virginia.~~

~~2. Submit a completed renewal form attesting to compliance with continuing competency requirements set forth in 18VAC90-40-55 and the renewal fee as prescribed in 18VAC90-40-70.~~

18VAC90-40-55. Continuing competency requirements.

A. ~~In order to renew prescriptive authority, a~~ A licensee with prescriptive authority shall meet continuing competency requirements for biennial renewal as a licensed nurse practitioner. Such requirements shall address issues such as ethical practice, an appropriate standard of care, patient safety, and appropriate communication with patients.

B. A nurse practitioner with prescriptive authority shall obtain a total of eight hours of continuing education in pharmacology or pharmacotherapeutics for each biennium in addition to the minimal requirements for compliance with subsection B of 18VAC90-30-105.

C. The nurse practitioner with prescriptive authority shall retain evidence of compliance and all supporting documentation for a period of four years following the renewal period for which the records apply.

D. The boards shall periodically conduct a random audit of its licensees to determine compliance. The nurse practitioners selected for the audit shall provide the evidence of compliance and supporting documentation within 30 days of receiving notification of the audit.

E. The boards may delegate to the committee the authority to grant an extension or an exemption for all or part of the requirements for circumstances beyond the control of the licensee, such as temporary disability, mandatory military service, or officially declared disasters.

18VAC90-40-60. Reinstatement of prescriptive authority. (Repealed.)

~~A. A nurse practitioner whose prescriptive authority has lapsed may reinstate within one renewal period by payment of the current renewal fee and the late renewal fee.~~

~~B. A nurse practitioner who is applying for reinstatement of lapsed prescriptive authority after one renewal period shall:~~

- ~~1. File the required application;~~
- ~~2. Provide evidence of a current, unrestricted license to practice as a nurse practitioner in Virginia;~~
- ~~3. Pay the fee required for reinstatement of a lapsed authorization as prescribed in 18VAC90-40-70; and~~
- ~~4. If the authorization has lapsed for a period of two or more years, the applicant shall provide proof of:~~

~~a. Continued practice as a licensed nurse practitioner with prescriptive authority in another state; or~~

~~b. Continuing education, in addition to the minimal requirements for current professional certification, consisting of four contact hours in pharmacology or pharmacotherapeutics for each year in which the prescriptive authority has been lapsed in the Commonwealth, not to exceed a total of 16 hours.~~

~~C. An applicant for reinstatement of suspended or revoked authorization shall:~~

- ~~1. Petition for reinstatement and pay the fee for reinstatement of a suspended or revoked authorization as prescribed in 18VAC90-40-70;~~
- ~~2. Present evidence of competence to resume practice as a nurse practitioner with prescriptive authority; and~~
- ~~3. Meet the qualifications and resubmit the application required for initial authorization in 18VAC90-40-40.~~

18VAC90-40-70. Fees for prescriptive authority.

~~A. The following fees have been established by the boards:~~

1. Initial issuance of prescriptive authority	\$75
2. Biennial renewal	\$35
3. Late renewal	\$15
4. Reinstatement of lapsed authorization	\$90
5. Reinstatement of suspended or revoked authorization	\$85
6. Duplicate of authorization	\$15
7. Return check charge	\$35

~~B. For renewal of licensure from July 1, 2017, through June 30, 2019, the following fee shall be in effect:~~

Biennial renewal	\$26
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~~The fee for initial issuance of prescriptive authority shall be \$35.~~

18VAC90-40-110. Disclosure.

A. The nurse practitioner shall include on each prescription ~~written~~ issued or dispensed his signature and the Drug Enforcement Administration (DEA) number, when applicable. If his practice agreement authorizes prescribing of only Schedule VI drugs and the nurse practitioner does not have a DEA number, he shall include the prescriptive authority number as issued by the boards.

B. The nurse practitioner shall disclose to patients at the initial encounter that he is a licensed nurse practitioner. Such disclosure may be included on a prescription pad or may be given in writing to the patient.

C. The nurse practitioner shall disclose, upon request of a patient or a patient's legal representative, the name of the patient care team physician and information regarding how to contact the patient care team physician.

Part IV

Discipline

18VAC90-40-130. Grounds for disciplinary action.

A. The boards may deny approval of prescriptive authority, ~~revoke or suspend authorization,~~ or take other disciplinary actions against a nurse practitioner who:

1. Exceeds his authority to prescribe or prescribes outside of the written or electronic practice agreement with the patient care team physician or, for certified nurse midwives, the practice agreement with the consulting physician;
2. Has had his license as a nurse practitioner suspended, revoked, or otherwise disciplined by the boards pursuant to 18VAC90-30-220; or
3. Fails to comply with requirements for continuing competency as set forth in 18VAC90-40-55.

B. Unauthorized use or disclosure of confidential information received from the Prescription Monitoring Program shall be grounds for disciplinary action.