

Practice Agreement Requirements for Licensed Nurse Practitioners (Advanced Practice Registered Nurses)

KEY POINTS:

- Certified Registered Nurse Anesthetist (“CRNA”) – A practice agreement is *not* required for nurse practitioners licensed in the category of CRNA. The CRNA practices under the supervision of a licensed doctor of medicine, osteopathy, podiatry, or dentistry.
- Certified Nurse Midwife (“CNM”) – Prior to completion of 1,000 practice hours, a nurse practitioner licensed in the category of CNM must enter into a practice agreement with either a CNM who has practiced for at least two years or a licensed physician.
- Clinical Nurse Specialist (“CNS”) – A nurse practitioner licensed in the category of CNS and who prescribes controlled substances must enter into a practice agreement with a licensed physician.
- Nurse Practitioner (“NP”) – A nurse practitioner with less than 3 years of clinical experience must enter into a practice agreement with a patient care team physician; this requirement does not apply for APRNs in the categories of CNM, CRNA, or CNS.
- Nurse practitioners who are required to have a practice agreement are responsible for maintaining the practice agreement and making it available for review by the Board of Nursing upon request.
- Practice agreements do *not* need to be submitted to the Board of Nursing to obtain or renew the professional license.

Applicable statutes by category:

CNM

- A practice agreement entered into between a CNM and a CNM with more than 2 years of experience or a licensed physician must address the availability of the consulting CNM or the licensed physician for routine and urgent consultation on patient care. (Va. Code § 54.1-2957(H).)
- If the CNM will prescribe, the practice agreement must include the parameters of such prescribing of Schedules II through VI controlled substances. (Va. Code § 54.1-2957.01(G).)
- Virginia Code § 54.1-2957(H) describes the requirements for CNMs to practice without a practice agreement.

CNS

A CNS who prescribes controlled substances must practice in consultation with a licensed physician in accordance with a practice agreement.

- A practice agreement entered into between a CNS and a licensed physician must address the availability of the physician for routine and urgent consultation on patient care. (Va. Code § 54.1-2957(J).)
- If the CNS will prescribe, the practice agreement must include the parameters of such prescribing of Schedules II through V controlled substances. (Va. Code § 54.1-2957.01(B).)

NP

A nurse practitioner with less than 3 years of clinical experience must enter into a practice agreement with a patient care team physician as defined in Virginia Code § 54.1-2900. Pursuant to Virginia Code §§ 54.1-2957(C), (D), and 54.1-2957.01(B), when a practice agreement is required for NP practice, it must include:

- Provisions for the periodic review of health records by the patient care team physician and may include provisions for visits to the site where health care is delivered in the manner and at the frequency determined by the patient care team;
- Provisions for appropriate input from health care providers in complex clinical cases and patient emergencies and for referrals;
- Categories of drugs and devices that may be prescribed;
- Guidelines for availability and ongoing communications that provide for and define consultation among the collaborating parties and the patient;
- Provisions for periodic joint evaluation of services provided;
- Provisions for periodic review and revision of the practice agreement; and
- The signature of the patient care team physician or the name of the patient care team physician clearly stated.

Virginia Code § 54.1-2957(I) describes the requirements for NP autonomous practice.