



MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

To Whom It May Concern:

This will acknowledge your request to obtain approval to collaborate with an advanced practice registered nurse (APRN) in a free standing clinic. Enclosed is a copy of the primary collaborating physician application which should be completed by the physician and returned to the Mississippi State Board of Medical Licensure (Board) for review. Please note there are several documents required and these documents must be included when you return the application. Your application **will not be considered** until all documentation required is received. The following is a list of required documents to be returned with your application:

1. A letter from both the primary collaborator and the backup (secondary) physician(s) acknowledging collaborative responsibility for the APRN. These letters should indicate that the collaborative physician(s) have read Title 30, Part 2630, of the Board's Administrative Code regarding collaboration and are aware of all responsibilities stated therein.
2. A signed and dated protocol¹ between the primary collaborator and the APRN which must address the following, but is not limited to:
 - a) The level of care you have agreed upon in the free standing clinic (e.g., what procedures or types of cases the APRN is allowed to handle while in collaboration with the collaborating physician[s]).
 - b) The 10% or 20 charts the primary collaborator must review, whichever is *less each month*.
 - c) Creation and maintenance of a log which will indicate charts reviewed, including the identifier for the patient's charts, reviewer(s) names, dates of review and the comments generated regarding patient care.
 - d) Arrangements for the collaborative physician to meet face-to-face with the APRN once per quarter for the purpose of quality assurance. This meeting should be documented, mentioning the date, time, persons present, and issues discussed. Anything of substance should be appropriately documented in an updated/new protocol.

¹ An appropriate protocol is properly defined in number 2. The documentation between the APRN and the Mississippi Board of Nursing which evidences the collaborative relationship's existence does **not** constitute an appropriate protocol.



- e) The physician(s) after hours contact information.
 - f) The arrangements for referral of patients, such as to an emergency room, diagnostic testing, mammogram interpretation, etc.
 - g) Controlled substance authority authorized by the collaborative physician(s) (e.g., what schedules the APRN may prescribe in while in collaboration with the physicians noted within the protocol).
3. If this will be a federally funded clinic, please provide supporting documentation (you may be excluded from the definition and requirements of a free standing clinic) so the collaborative practice can be appropriately documented.
4. The collaborative physician(s) have the right and obligation to monitor and review the controlled substance prescriptions issued by the APRN via the Mississippi Prescription Monitoring Program (PMP). The physician(s) should include in their letter(s) to the Board that he/she understands they are expected to monitor the APRN(s) prescribing via the PMP and will appropriately do so via chart review.

Once all the above information has been returned, the application, along with the signed and dated protocol, will be reviewed and an appointment will be arranged for the primary collaborative physician to speak with the Executive Director of the Board. A physician **may not** collaborate with an APRN who is free standing *prior to* obtaining approval from the Board. Any physician discovered doing so will face formal disciplinary action.

If you have any questions regarding this matter, please do not hesitate to contact the Board for assistance.

Part 2630 Collaboration

Part 2630 Chapter 1: Collaboration with Nurse Practitioners

Rule 1.1 Scope. These rules apply to all individuals licensed to practice medicine or osteopathic medicine in the state of Mississippi.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 1.2 Definitions. For the purpose of Part 2630, Chapter 1 only, the following terms have the meanings indicated:

- A. “Physician” means any person licensed to practice medicine or osteopathic medicine in the state of Mississippi who holds an unrestricted license or whose practice or prescriptive authority is not limited as a result of voluntary surrender or legal/regulatory order.
- B. “Free Standing Clinic” means a clinic or other facility wherein patients are treated by a nurse practitioner, which is more than seventy-five (75) miles away from the primary office of the collaborative/consultative physician. Excluded from this definition are all licensed hospitals, state health department facilities, federally qualified community health clinics and volunteer clinics.
- C. “Primary Office” means the usual practice location of a physician and being the same location reported by that physician to the Mississippi State Board of Medical Licensure and the United States Drug Enforcement Administration.
- D. “Collaborating/Consulting Physician” means a physician who, pursuant to a duly executed protocol has agreed to collaborate/consult with a nurse practitioner.
- E. “Nurse Practitioner” means any person licensed to practice nursing in the state of Mississippi and certified by the Mississippi Board of Nursing to practice in an expanded role as a nurse practitioner.
- F. “Advanced Practice Registered Nurse” includes all nurse practitioners, certified nurse midwives and certified registered nurse anesthetists.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 1.3 Board Review. Physicians who wish to collaborate/consult with a nurse practitioner who plans or anticipates practicing in a free standing clinic, must first (a) appear personally or by telephone before the Mississippi State Board of Medical Licensure and/or the Joint Committee of the Board of Medical Licensure and the Board of Nursing if the Board of Medical Licensure determines that the collaborative/consultative relationship may not be approved absent action from the Joint Committee, (b) present and discuss the protocol, and (c) obtain approval from the Board to act as a collaborating/consulting physician. The facts and matters to be considered by the Board shall include, but are not limited to, how the collaborating/consulting physician and nurse practitioner plan to implement the protocol, the method and manner of collaboration, consultation, and referral.

The requirement for Board appearance and approval set forth in the preceding paragraph also applies to any physician collaborating/consulting with a nurse practitioner who later moves to a free standing clinic under an existing protocol.

Where a nurse practitioner is practicing in a free standing clinic pursuant to an existing protocol as of the effective date of this regulation, the requirements of personal appearance or telephone interview and Board approval set forth in the paragraph above shall not be required until the next succeeding renewal date for said certificate as required by the Mississippi State Board of Nursing.

Where two or more physicians anticipate executing a protocol to collaborate/consult with a nurse practitioner practicing in a free standing clinic, it shall not be necessary that all of the physicians personally appear before the Mississippi State Board of Medical Licensure as required in the preceding paragraph. In this situation, the physician who will bear the primary responsibility for the collaboration/consultation with the nurse practitioner shall make the required personal appearance or telephone interview.

Each collaborative/consultative relationship shall include and implement a formal quality improvement program which shall be maintained on site and shall be available for inspection by representatives of the Mississippi State Board of Medical Licensure. The quality assurance/quality improvement program shall consist of:

- A. Review by collaborative physician of a random sample of charts that represent 10% or 20 charts, whichever is less, of patients seen by the nurse practitioner every month. Charts should represent the variety of patient types seen by the nurse practitioner. Patients that the nurse practitioner and collaborating physician have consulted on during the month will count as one chart review.
- B. The nurse practitioner shall maintain a log of charts reviewed which include the identifier for the patient's charts, reviewers' names, and dates of review.
- C. Each nurse practitioner shall meet face to face with a collaborating physician once per quarter for the purpose of quality assurance and this meeting should be documented.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 1.4 Collaborative/Consultative Relationships. Physicians with collaborative relationships with APRN must ensure backup physician coverage when the primary collaborative physician is unavailable. The backup physician must be on APRN protocol. In the event of death, disability (physical/mental), or relocation, which would result in the APRN not having a collaborative physician, the APRN has the duty to immediately notify the Mississippi Board of Nursing as jointly agreed by the Mississippi Board of Nursing and the Mississippi Board of Medical Licensure. The Nursing Board will then immediately notify the Mississippi State Board of Medical Licensure.

In order that patients may continue to be treated without interruption of care, the APRN may be allowed to continue to practice for a 90-day grace period while the APRN attempts to secure a collaborative physician without such practice being considered the practice of medicine. The Mississippi State Board of Medical Licensure or its designee, will serve as the APRN's collaborative physician with the agreement of the Mississippi Board of Nursing. The Mississippi State Board of Medical Licensure and the Mississippi State Board of Nursing will assist the APRN in their attempt to secure a collaborative physician. If a collaborative physician has not been secured at the end of the 90-day grace period, an additional 90-day extension may be granted by mutual agreement of the Executive Committee of the Mississippi Board of Nursing and the Executive Committee of the Mississippi State Board of Medical Licensure. During this

additional 90-day extension, the above described collaborative agreement will continue. The APRN will not be allowed to practice until the previously described collaborative arrangement with the Mississippi State Board of Medical Licensure is agreed upon.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 1.5 Violation of Rules. Any violation of the rules as enumerated above shall constitute unprofessional conduct in violation of Mississippi Code, Section 73-25-29(8).

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 1.6 Effective Date of Regulation. The above rules pertaining to collaborating/consulting physicians shall become effective September 21, 1991.

Amended May 19, 2005. Amended March 13, 2009. Amended November 19, 2009. Amended July 14, 2011. Amended April 4, 2016.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Part 2630 Chapter 2: The Supervision of Pharmacists

Rule 2.1 Preamble. To optimize the favorable professional working relationship that already exists between the state of Mississippi's physician and pharmacist communities, the following is directed.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 2.2 Scope. These rules apply to all individuals licensed to practice medicine or osteopathic medicine in the state of Mississippi.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 2.3 Definitions. For the purpose of Part 2630, Chapter 2 only, the following terms have the meanings indicated:

- A. "Physician" means any person licensed to practice medicine or osteopathic medicine in the state of Mississippi.
- B. "Supervising Physician" means a physician who, pursuant to a duly executed written guideline or protocol as hereinafter defined, has agreed to supervise a pharmacist and is the physician responsible for the overall management and supervision for the activities of the pharmacist as is directly related to patients receiving medications or disease management services under the protocol.
- C. "Pharmacist" means any person licensed to practice pharmacy in the state of Mississippi, who has met all requirements of Article XXXVI of the rules and regulations of the Mississippi State Board of Pharmacy to either (i) accept patients referred by a physician, (ii) initiate or modify drug therapy, or (iii) order lab work, all in accordance with written guidelines or protocols as hereinafter defined.
- D. "Written Guideline" or "Protocol" means an agreement in which a physician authorized to prescribe drugs delegates to a pharmacist authority to consult with a patient or to conduct specific prescribing functions in an institutional setting, or with

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE
APPLICATION FOR SUPERVISION OF NURSE PRACTITIONER(S) IN A FREE STANDING CLINIC



PRIMARY SUPERVISING PHYSICIAN

PLEASE PRINT OR TYPE

LAST NAME

FIRST

LICENSE#

SPECIALTY:

PRACTICE LOCATION ADDRESS

STREET

CITY

STATE

ZIP CODE

NURSE PRACTITIONER(S)

NURSE PRACTITIONER #1

LAST NAME

FIRST

MI

LICENSE#

Specialty:

Social Security Number:

BACK UP PHYSICIANS:

NAME

PRACTICE LOCATION ADDRESS

MEDICAL LICENSE#

1.

SPECIALTY:

2.

SPECIALTY:

3.

SPECIALTY:

FREE STANDING CLINIC LOCATION(S):

CLINIC NAME

ADDRESS

TELEPHONE#

1.

2.

3.

Date of meeting _____

LAST NAME	FIRST	NURSE PRACTITIONER #2 MI	LICENSE#
Specialty:		Social Security Number:	

BACK UP PHYSICIAN(S):		
NAME	ADDRESS	MEDICAL LICENSE #
1.		SPECIALTY:
2.		SPECIALTY:
3.		SPECIALTY:

FREE STANDING CLINIC LOCATION(S):		
CLINIC NAME	ADDRESS	TELEPHONE#
1.		
2.		
3.		

SUPERVISING PHYSICIANS:		
NAME OF HOSPITAL(S) IN WHICH YOU HAVE HOSPITAL ADMITTING PRIVILEGES:		
PHYSICIAN	HOSPITAL NAME	CITY

