Chapter 09 Collaboration/Consultation With Nurse Practitioners

Scope

100 These regulations apply to all individuals licensed to practice medicine or osteopathic medicine in the state of Mississippi.

Definitions

200 For the purpose of Chapter 09 only, the following terms have the meanings indicated:

1. "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.
2. "Free Standing Clinic" means a clinic or other facility wherein patients are treated by a nurse practitioner, which is more than fifteen (15) 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.
3. "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.
4. "Collaborating/Consulting Physician" means a physician who, pursuant to a duly executed protocol has agreed to collaborate/consult with a nurse practitioner.
5. "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.

Board Review

300 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.

301 The requirement for Board appearance and approval set forth in Section 300 above also applies to any physician collaborating/consulting with a nurse practitioner who later moves to a free standing clinic under an existing protocol.

302 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 Section 300 above shall not be required until the next succeeding renewal date for said certificate as required by the Mississippi State Board of Nursing.

303 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 Section 300. 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.

304 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. ~~This quality assurance/quality improvement program must be sufficient to provide a valid evaluation of the practice and be a valid basis for change, if any.~~ The quality assurance/quality improvement program criteria shall consist of:

1. On-site review by primary collaborative physician of a sample of charts that represent 10% 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.
2. The nurse practitioner shall maintain a log of charts reviewed monthly which include the identifier for the patient's charts, reviewers' names, and dates of review. The monthly logs will be maintained in a specified location in the practice site of the nurse practitioner, known to the site administrator and collaborating physician.
3. Suggested areas for review should include:
   a. Adequate assessment performed with appropriate lab work and diagnostic studies.
   b. Diagnosis corresponds with findings of assessment.
   c. Plan of care is determined according to accepted standards of care.
   d. Adverse events.

Re-evaluation of Nurse Practitioner Categories

400 Pursuant to authority granted in Mississippi Code, Section 73-15-5, the Mississippi State Board of Medical Licensure, along with the Mississippi Board of Nursing are granted authority to jointly promulgate rules and regulations governing nurse practitioners. In order to ensure the current nature and accuracy of said rules and regulations, the Board shall perform a review of said regulations every two (2) years. If changes are deemed necessary, joint action by the Board and Mississippi Board of Nursing shall be pursued.

Violation of Regulations

500 Any violation of the rules and regulations as enumerated above shall constitute unprofessional conduct in violation of Mississippi Code, Section 73-25-29(8).

Effective Date of Regulation

600 The above rules and regulations pertaining to collaborating/consulting physicians shall become effective September 21, 1991.

Amended May 19, 2005.