# REPORT OF THE VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS

Report on a Process for Adding Nurse Practitioners to the Practitioner Profile (Chapter 776, 2018)

TO THE GENERAL ASSEMBLY OF VIRGINIA



## **HOUSE DOCUMENT NO. 8**

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## COMMONWEALTH of VIRGINIA

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TO:

The Honorable Ralph S. Northam

Governor of Virginia

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FROM:

David E. Brown, D.C.

Director

Department of Health Professions

RE:

Report on a Process for Adding Nurse Practitioners to the Practitioner

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**Profile** 

Attached is the report of the Department of Health Professions on the process for adding nurse practitioners with autonomous practice to the Practitioner Profile currently maintained for doctors of medicine, osteopathic medicine, and podiatry. The report is required pursuant to an enactment clause in Chapter 776 of the 2018 Acts of the Assembly.

Should you have questions about this report, please feel free to contact Jay Douglas, R.N., Executive Director of the Board of Nursing at jay.douglas@dhp.virginia.gov or (804) 367-4623.

## Report on Process for Adding Nurse Practitioners to the Practitioner Profile

## Virginia Department of Health Professions

Pursuant to Chapter 776 of the 2018 Acts of the Assembly

October, 2020

#### Report on Process for Adding Nurse Practitioners to the Practitioner Profile

#### **Background**

Chapter 776 of the 2018 Acts of the Assembly included a third enactment clause as follows:

3. That the Department of Health Professions shall, by November 1, 2020, report to the General Assembly a process by which nurse practitioners who practice without a practice agreement may be included in the online Practitioner Profile maintained by the Department of Health Professions.

The Practitioner Profile, currently accessible through the Department of Health Professions (DHP) website, includes information about Doctors of Medicine, Osteopathic Medicine, and Podiatry licensed by the Board of Medicine. Elements required to be included in the Profile are outlined in § 54.1-2910.1 of the Code of Virginia and in Board of Medicine regulations. There is also a guidance document # 85-19 that is instructive on Profile usage.

Nurse practitioners are jointly licensed by the Boards of Nursing and Medicine, but they are not currently included in the Profile. Nurse practitioners who meet the requirements of subsection I of § 54.1-2957 may practice autonomously without a practice agreement with a physician.

The statutory provisions for the Practitioner Profile are found in:

#### § 54.1-2910.1. Certain data required.

- A. The Board of Medicine shall require all doctors of medicine, osteopathy and podiatry to report and shall make available the following information:
- 1. The names of the schools of medicine, osteopathy, or podiatry and the years of graduation;
- 2. Any graduate medical, osteopathic, or podiatric education at any institution approved by the Accreditation Council for Graduation Medical Education, the American Osteopathic Association or the Council on Podiatric Medical Education;
- 3. Any specialty board certification as approved by the American Board of Medical Specialties, the Bureau of Osteopathic Specialists of the American Osteopathic Association, the American Board of Multiple Specialties in Podiatry, or the Council on Podiatric Medical Education of the American Podiatric Medical Association:
- 4. The number of years in active, clinical practice as specified by regulations of the Board;
- 5. Any hospital affiliations;

- 6. Any appointments, within the most recent 10-year period, of the doctor to the faculty of a school of medicine, osteopathy or podiatry and any publications in peer-reviewed literature within the most recent five-year period and as specified by regulations of the Board;
- 7. The location and telephone number of any primary and secondary practice settings and the approximate percentage of the doctor's time spent practicing in each setting. For the sole purpose of expedited dissemination of information about a public health emergency, the doctor shall also provide to the Board any e-mail address or facsimile number; however, such e-mail address or facsimile number shall not be published on the profile database and shall not be released or made available for any other purpose;
- 8. The access to any translating service provided to the primary and secondary practice settings of the doctor;
- 9. The status of the doctor's participation in the Virginia Medicaid Program;
- 10. Any final disciplinary or other action required to be reported to the Board by health care institutions, other practitioners, insurance companies, health maintenance organizations, and professional organizations pursuant to  $\S\S$  54.1-2400.6, 54.1-2908, and 54.1-2909 that results in a suspension or revocation of privileges or the termination of employment or a final order of the Board relating to disciplinary action;
- 11. Conviction of any felony; and
- 12. Other information related to the competency of doctors of medicine, osteopathy, and podiatry, as specified in the regulations of the Board.
- B. In addition, the Board shall provide for voluntary reporting of insurance plans accepted and managed care plans in which the doctor participates.
- C. The Board shall promulgate regulations to implement the provisions of this section, including, but not limited to, the release, upon request from a consumer, of such information relating to a specific doctor. The Board's regulations shall provide for reports to include all medical malpractice judgments and medical malpractice settlements of more than \$10,000 within the most recent 10-year period in categories indicating the level of significance of each award or settlement; however, the specific numeric values of reported paid claims shall not be released in any individually identifiable manner under any circumstances. Notwithstanding this subsection, a licensee shall report a medical malpractice judgment or medical malpractice settlement of less than \$10,000 if any other medical malpractice judgment or medical malpractice settlement has been paid by or for the licensee within the preceding 12 months.
- D. This section shall not apply to any person licensed pursuant to §§ 54.1-2928.1, 54.1-2933.1, 54.1-2936, and 54.1-2937 or to any person holding an inactive license to practice medicine, osteopathy, or podiatry.

### **Content of the Practitioner Profile**

	ing information contained in the Profile database is provided directly from the records d of Medicine.
□ Ord	Licensee name, license number, date of issue, date of expiration and any Board ers and notices
penalty of l have the au warranted,	ing information in the Profile is required to be self-reported by licensees under aw. This information is not verified by the Board. The Department and the Board thority to investigate reported inaccuracies in the displayed information and if seek correction and licensee compliance with the law and regulations governing the information system.
Required i	nformation provided by doctors:
	Practice information (location(s), phone number(s), translating services, centage of time spent at location(s)
	Education
	Years in active clinical practice
	Board Certifications
	Hospital affiliations
	Academic appointments
	Publications
	Medicaid participation
	Actions
	Felony convictions
	Paid claims in the most recent ten years
Optional i	nformation doctors may choose to include:
	Insurance plans accepted or managed care plans in which they participate
	Self-Designated practice area

Honors and awards received
Medicare information
Hours of continuing education
Practice name
Days of the week at practice location
Maiden name
Web site address
Non-emergency email address

The Board of Medicine does not comprehensively verify the information required to be self-reported by doctors, and therefore does not accept responsibility for the accuracy of self-reported information. The Board conducts periodic random audits of profiles as an effort to improve the accuracy and timeliness of the information.

Note that if a practitioner's license is not active, the licensee is under no obligation to update the Profile so the information contained may not be up-to-date.

#### Proposed process to add Nurse Practitioners (NP) to the Practitioner Profile

- Legislation would be needed to amend the Code to provide the statutory authority for inclusion of nurse practitioners who are approved for autonomous practice in the Profile.
- DHP would modify the existing profile system, including the database, public-facing web site, and secure web site to accommodate information specific to NP profiles.
- DHP would extract basic licensure and demographic data from our licensing database to establish the basis for the NP profile.
- The onboarding process would be modified to include NPs, and notification would be sent by the Board to NPs with autonomous practice designation letting them know of their addition to the profile and the information they are required to provide, as well as information they may voluntarily provide.
- DHP would establish a mechanism for electronic submission of information by the NP that pertained to their education, specialty certifications, and years of practice that a practitioner could voluntarily submit to be included in the self-reported portions of the profile.
- DHP would add NPs to the list of professions included and provide information on the Board of Nursing website directing the public as to how to access the profiles.
- DHP would maintain online access for NPs to update any voluntary information.