

REMINDERS AND RECOMMENDATIONS FOR PHYSICIANS COLLABORATING WITH MID-LEVEL PROVIDERS

Review the Mississippi State Board of Medical Licensure (MSBML) regulations for collaboration with nurse practitioners and supervision of physician assistants which can be found at <u>https://www.msbml.ms.gov/administrative</u> under "Administrative Rules". Advanced practice registered nurses (APRNs) are responsible for reviewing the regulations from the Mississippi Board of Nursing (MBON) which may be found at <u>https://www.msbn.ms.gov/laws-rules/administrative-code</u> under "Part 2840 - Advanced Practice".

Recommendations for supervising and collaborating with mid-level providers:

- Should have a compatible practice treat same patient population, same medical specialty, trained in same procedures. For example, physicians who desire to collaborate with or supervise a mid-level to perform aesthetics procedures should also be trained in the performance of those same procedures.
- **Every** primary collaborating/supervisory physician should sign, date, and keep a copy of the collaboration agreement/protocol for each mid-level provider.
- Collaboration agreement/protocol should be a document that contains the necessary information as outlined by the MSBML and MBON rules. A hospital

document detailing the duties and procedures a midlevel provider is credentialed to perform may not meet all of the requirements.

- The collaboration agreement/protocol should be signed and dated by the mid-level provider, the primary supervisory/collaborating physician, and any back-up/secondary collaborating physician(s).
- Primary collaborating physician should maintain his/ her own copy of the log of charts reviewed and other required information contained therein as well as the documentation of the quarterly QA meetings.

Excerpts from MSBML and MBON Rules

MSBML Rule	Applies to APRNs	Applies to PAs
Supervising/collaborating physician must practice within Mississippi a minimum of 20 hours/week or 80 hours/month.*	x	х
Physician must submit a duly executed protocol and obtain approval from MSBML. See rules for infor- mation on what a protocol/collaboration agreement should address.**	x	х
The MBON requires the APRN to submit the formal collaborative agreement(s) to the MBON prior to beginning practice.	x	
Physician must add APRN to his/her file via the MELS Online Licensure Gateway and submit all required information prior to commencement of patient care.	x	
New graduate/newly licensed PAs must initially practice 120 days or 960 hours with the on-site pres- ence of their supervising physician. A clerkship with the same physician may reduce this requirement.		х
Mid-level's practice is confined to the primary office/clinic of the supervising physician, or hospital(s)/ clinic(s)/health care facilities within 75 miles of where the primary office is located.*	x	х
No mileage restriction for primary care providers (family medicine, general/internal medicine, mental health, women's health, general pediatrics) if certain conditions are met.	x	х
Primary collaborating physician must ensure backup physician coverage when he/she is unavailable or outside the approved distance. Backup physician must also sign collaboration agreement/protocol.	x	
The mid-level provider <i>must</i> be able to communicate reliably with a collaborating physician while prac- ticing.	x	х
Protocol must describe in detail the back-up coverage in the event the supervisory physician is away from the primary office.		х
QA/QI program to include review by supervisory/collaborative physician of random sample of charts chosen by the physician that represent 10% or 20 charts, whichever is less, each month. Any patient on which physician was consulted may count as 1 chart.	х	х
Physician shall ensure maintenance of a log of charts reviewed containing chart identifier, reviewers' names, dates of review, conditions treated, any comments made by physician regarding care provided.	x	
PA should maintain a log of monthly charts reviewed containing chart identifier, reviewers' names, dates of review.		Х
Mid-level and supervising/collaborating physician must meet in person or via video conference once per quarter for QA purposes and the meeting must be documented. See the rules for more information on what should be addressed and documented in these meetings	х	х

*Exceptions may be granted.

**Not required to submit to the MSBML the protocol for approval of APRN collaboration if APRN will practice within 75 miles of physician or physician and APRN meet the conditions for a primary care extended mileage exception.

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