ESSENTIAL INFORMATION
April 2016

Nurse Practitioner Scope of Practice Laws
Prepared by the Policy Surveillance Program Staff

SUMMARY
This interactive map identifies variations in state laws regulating nurse practitioners' scope of practice. The map addresses whether nurse practitioners are provided full or limited practice authority, whether there is a transition to practice requirement and what activities they may conduct without collaborating or working under the supervision of another health care provider.

ABOUT NURSE PRACTITIONER SCOPE OF PRACTICE LAWS & THE DATA
Nurse practitioners play a critical role in delivering health care services in the United States. As the U.S. health care system continues to expand, the demand for nurse practitioners is projected to increase significantly.

In some states, nurse practitioners may practice autonomously, while in others, they must work in collaboration or under the supervision of another health care provider. State scope of practice laws govern the level of autonomy nurse practitioners have to treat patients.

In states that provide full practice authority, nurse practitioners may have to participate in a transition to practice period with another provider before they can practice independently. In states that limit the practice authority of nurse practitioners, collaboration and supervision requirements provide two distinct forms of practice limitations. Collaboration requirements mandate that nurse practitioners work in collaboration with another health care provider. In contrast, supervision requirements are more restrictive, requiring nurse practitioners to report to another provider regularly, be closely monitored and/or only conduct activities that are delegated to them under a written agreement.

This dataset is longitudinal, displaying laws from May 1, 2015 through April 1, 2016.

NAVIGATING THE DATA
To navigate the interactive map, click the “Start Here” button to the right of the map. Two phrases will display in a pop up window. The phrases relate to the two major groups of states in terms of nurse practitioner practice autonomy: (1) full practice authority; and (2) limited practice authority.

If “Yes” is selected for “State law provides full practice authority,” three additional questions appear:

1. Is a transition to practice period required before a nurse practitioner is granted full practice authority?
2. Which provider may a nurse practitioner collaborate with during the transition to practice period?
3. What is the length of the transition to practice period?
In contrast, if “Yes” is selected for “State law limits practice authority,” six separate questions appear:

1. Must nurse practitioners collaborate with a provider as part of their practice?
2. Must a nurse practitioner collaborate with a provider in order to prescribe medication?
3. What activities can nurse practitioners perform without collaboration?
4. Must nurse practitioners be supervised by a provider as part of their practice?
5. Must a nurse practitioner be supervised by a provider in order to prescribe medication?
6. What activities can nurse practitioners perform without supervision?

ADDITIONAL INFORMATION

To learn about how this data was created, including detail about the exact methods used during legal research and coding, refer to the Research Protocol and the Codebook. The Codebook provides a list of the questions that were coded, including their variable names and response set. The data is available for download into Microsoft Excel. The Research Protocol, Codebook, data and Report are available for download on the Nurse Practitioner Scope of Practice Laws webpage.

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