

## DEPARTMENT OF HEALTH, ARKANSAS STATE BOARD OF NURSING

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**SUBJECT:** Chapter Eleven: Full Independent Practice Credentialing Committee

**DESCRIPTION:** The Arkansas State Board of Nursing is proposing amendments to its rules on Full Independent Practice Credentialing Committee. During the 2021 legislative session, Act 412 was passed which permitted Certified Nurse Practitioners to apply for full independent practice. This act was revised by Act 872 of 2023 to include Clinical Nurse Specialists and provide a pathway for APRNs licensed and practicing in another state to apply for independent practice. The revisions made are to align with current statute.

**PUBLIC COMMENT:** A public hearing was held on February 28, 2024. The public comment period expired on March 8, 2024. The board indicated that it received no comments.

Suba Desikan, an attorney with the Bureau of Legislative Research, asked the following question and received the following response:

**Q.** Could you please explain why the definition of Clinical Nurse Specialist in Section II of the rule differ from the statutory definition in Ark. Code Ann. § 17-87-302(a)(4)?

**RESPONSE:** The Chapter 11 definitions of CNP and CNS match the definitions in Chapter 4. They say the same thing but in clearer language. These definitions in Chapter 4 were written back in 1995 (I think) so I assume they believed they were easier for the public to understand.

The proposed effective date is pending legislative review and approval.

**FINANCIAL IMPACT:** The board indicated that the amended rule does not have a financial impact.

**LEGAL AUTHORIZATION:** The Arkansas State Board of Nursing has the power and responsibility to promulgate whatever rules it deems necessary for the implementation of Title 17, Chapter 87, concerning nurses. *See* Ark. Code Ann. § 17-87-203(1)(A). This rule implements Act 872 of 2023, sponsored by Senator Kim Hammer, which allowed full independent practice authority for clinical nurse specialists and authorized experience in another state to qualify for full independent practice authority.

**QUESTIONNAIRE FOR FILING PROPOSED RULES WITH  
THE ARKANSAS LEGISLATIVE COUNCIL**

DEPARTMENT \_\_\_\_\_  
 BOARD/COMMISSION \_\_\_\_\_  
 BOARD/COMMISSION DIRECTOR \_\_\_\_\_  
 CONTACT PERSON \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 PHONE NO. \_\_\_\_\_ EMAIL \_\_\_\_\_  
 NAME OF PRESENTER(S) AT SUBCOMMITTEE MEETING \_\_\_\_\_  
 PRESENTER EMAIL(S) \_\_\_\_\_

**INSTRUCTIONS**

In order to file a proposed rule for legislative review and approval, please submit this Legislative Questionnaire and Financial Impact Statement, and attach (1) a summary of the rule, describing what the rule does, the rule changes being proposed, and the reason for those changes; (2) both a markup and clean copy of the rule; and (3) all documents required by the Questionnaire.

If the rule is being filed for permanent promulgation, please email these items to the attention of Rebecca Miller-Rice, [miller-ricer@blr.arkansas.gov](mailto:miller-ricer@blr.arkansas.gov), for submission to the Administrative Rules Subcommittee.

If the rule is being filed for emergency promulgation, please email these items to the attention of Director Marty Garrity, [garritym@blr.arkansas.gov](mailto:garritym@blr.arkansas.gov), for submission to the Executive Subcommittee.

Please answer each question completely using layman terms.

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1. What is the official title of this rule?  
\_\_\_\_\_
2. What is the subject of the proposed rule? \_\_\_\_\_
3. Is this rule being filed under the emergency provisions of the Arkansas Administrative Procedure Act? Yes      No

*If yes, please attach the statement required by Ark. Code Ann. § 25-15-204(c)(1).*

If yes, will this emergency rule be promulgated under the permanent provisions of the Arkansas Administrative Procedure Act? Yes      No

4. Is this rule being filed for permanent promulgation? Yes No

If yes, was this rule previously reviewed and approved under the emergency provisions of the Arkansas Administrative Procedure Act? Yes No

If yes, what was the effective date of the emergency rule? \_\_\_\_\_

On what date does the emergency rule expire? \_\_\_\_\_

5. Is this rule required to comply with a *federal* statute, rule, or regulation? Yes No

If yes, please provide the federal statute, rule, and/or regulation citation.

6. Is this rule required to comply with a *state* statute or rule? Yes No

If yes, please provide the state statute and/or rule citation.

7. Are two (2) rules being repealed in accord with Executive Order 23-02? Yes No

If yes, please list the rules being repealed.

If no, please explain.

8. Is this a new rule? Yes No

Does this repeal an existing rule? Yes No

If yes, the proposed repeal should be designated by strikethrough. If it is being replaced with a new rule, please attach both the proposed rule to be repealed and the replacement rule.

Is this an amendment to an existing rule? Yes No

If yes, all changes should be indicated by strikethrough and underline. In addition, please be sure to label the markup copy clearly as the markup.

9. What is the state law that grants the agency its rulemaking authority for the proposed rule, outside of the Arkansas Administrative Procedure Act? Please provide the specific Arkansas Code citation(s), including subsection(s).

10. Is the proposed rule the result of any recent legislation by the Arkansas General Assembly?  
Yes      No

If yes, please provide the year of the act(s) and act number(s).

11. What is the reason for this proposed rule? Why is it necessary?

12. Please provide the web address by which the proposed rule can be accessed by the public as provided in Ark. Code Ann. § 25-19-108(b)(1).

13. Will a public hearing be held on this proposed rule? Yes No

If yes, please complete the following:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

*Please be sure to advise Bureau Staff if this information changes for any reason.*

14. On what date does the public comment period expire for the permanent promulgation of the rule? Please provide the specific date. \_\_\_\_\_

15. What is the proposed effective date for this rule? \_\_\_\_\_

16. Please attach (1) a copy of the notice required under Ark. Code Ann. § 25-15-204(a)(1) and (2) proof of the publication of that notice.

17. Please attach proof of filing the rule with the Secretary of State, as required by Ark. Code Ann. § 25-15-204(e)(1)(A).

18. Please give the names of persons, groups, or organizations that you anticipate will comment on these rules. Please also provide their position (for or against), if known.

19. Is the rule expected to be controversial? Yes No

If yes, please explain.

**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY.**

**DEPARTMENT** \_\_\_\_\_  
**BOARD/COMMISSION** \_\_\_\_\_  
**PERSON COMPLETING THIS STATEMENT** \_\_\_\_\_  
**TELEPHONE NO.** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

To comply with Ark. Code Ann. § 25-15-204(e), please complete the Financial Impact Statement and email it with the questionnaire, summary, markup and clean copy of the rule, and other documents. Please attach additional pages, if necessary.

**TITLE OF THIS RULE** \_\_\_\_\_

1. Does this proposed, amended, or repealed rule have a financial impact?  
Yes                      No
  
2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?  
Yes                      No
  
3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes                      No

If no, please explain:

(a) how the additional benefits of the more costly rule justify its additional cost;

(b) the reason for adoption of the more costly rule;

(c) whether the reason for adoption of the more costly rule is based on the interests of public health, safety, or welfare, and if so, how; and

(d) whether the reason for adoption of the more costly rule is within the scope of the agency’s statutory authority, and if so, how.

4. If the purpose of this rule is to implement a *federal* rule or regulation, please state the following:
  - (a) What is the cost to implement the federal rule or regulation?

**Current Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \$0.00 \_\_\_\_\_

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \$0.00 \_\_\_\_\_

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \_\_\_\_\_

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \_\_\_\_\_

5. What is the total estimated cost by fiscal year to any private individual, private entity, or private business subject to the proposed, amended, or repealed rule? Please identify those subject to the rule, and explain how they are affected.

**Current Fiscal Year**

\$ \_\_\_\_\_

**Next Fiscal Year**

\$ \_\_\_\_\_

6. What is the total estimated cost by fiscal year to a state, county, or municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

\$ \_\_\_\_\_

**Next Fiscal Year**

\$ \_\_\_\_\_

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes      No

If yes, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
  - (a) justifies the agency's need for the proposed rule; and
  - (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
  - (a) the rule is achieving the statutory objectives;
  - (b) the benefits of the rule continue to justify its costs; and
  - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.



# PROPOSED COPY

## CHAPTER ELEVEN FULL INDEPENDENT PRACTICE CREDENTIALING COMMITTEE

### SECTION I PURPOSE & AUTHORITY

- A. PURPOSE** - The purpose of the Full Independent Practice Credentialing Committee is to:
1. Review and act on applications for full independent practice authority submitted by Certified Nurse Practitioners and Clinical Nurse Specialist; and
  2. Review and act on complaints filed against Certified Nurse Practitioners and Clinical Nurse Specialist who have full independent practice authority.
- B. LEGAL AUTHORITY** - The authority of the Full Independent Practice Authority Committee is pursuant to Ark. Code Ann. § 17-87-314, et seq.

Amended: 2023

### SECTION II GENERAL MATTERS

- A. DEFINITION OF TERMS**
1. Full Independent Practice Authority: the ability of a Certified Nurse Practitioner or Clinical Nurse Specialist to practice with prescriptive authority without a collaborative practice agreement as described in Ark. Code Ann. § 17-87-310.
  2. Prescriptive Authority: the ability to receive and prescribe drugs, medicines, or therapeutic devices appropriate to the advanced practice registered nurse's area of practice.
  3. Certified Nurse Practitioner: a registered nurse who has successfully completed a nationally accredited graduate or post-graduate APRN education program that prepares nurses for the advanced practice role of nurse practitioner, is nationally certified in the population foci appropriate to the educational preparation and licensed at the advanced practice level.
  4. Clinical Nurse Specialist: a registered nurse who has successfully completed a nationally accredited graduate or post-graduate APRN education program that prepares nurses for the advanced practice role of clinical nurse specialist, is nationally certified in the population foci appropriate to the educational preparation and licensed at the advanced practice level.
- B. MEETING**
1. The Committee shall meet at least quarterly and shall have the power to call and hold special meetings at such times and places as it deems necessary.
  2. Five members shall constitute a quorum at any meeting of the Committee.
- C. MEMBERS**
- The Committee shall be comprised of eight members appointed according to ACA 17-87-314 who may serve up to two 3-year terms, or until successor is appointed.
- D. OFFICERS**
1. The Committee shall elect a Chair, and a Vice-Chair.
  2. Officers may serve no more than two consecutive 1-year terms.
  3. Powers & Duties of the Chair:

## Full Independent Practice Credentialing Committee Rules

# PROPOSED COPY

- a. Sign subpoenas,
  - b. Administer oaths,
  - c. Authenticate all notices and other actions of the Committee, and
  - d. Issue notices of hearings and other processes and as directed by the Committee
4. The Vice-Chair shall assume all duties and privileges of the Chair in the absence of the Chair.

### E. DUTIES

1. Review all applications, initial or renewal, for full independent practice authority submitted by Certified Nurse Practitioners or Clinical Nurse Specialist licensed by the Arkansas State Board of Nursing.
2. Approve or deny applications for full independent practice authority.
  - a. All actions shall be provided, in writing, to the applicant.
  - b. Denial of an application shall include the reason(s) for denial.
3. Review complaints filed in writing against Certified Nurse Practitioners or Clinical Nurse Specialist with full independent practice authority.
  - a. The Committee shall review complaints against Certified Nurse Practitioners or Clinical Nurse Specialist who hold a certificate of full independent practice authority.
  - b. The Committee may take action, suspend or revoke the certificate for full independent practice authority based on the complaint; however, the Committee may not take action against the nursing license of a certified nurse practitioner.
  - c. All complaints and actions shall be reported to the Arkansas State Board of Nursing.

### F. HEARINGS

1. Hearings will be conducted when the Committee takes action to suspend or revoke the certificate of full independent practice authority.
2. Hearings will be conducted according to the Arkansas Administrative Procedures Act.
3. The ~~Certified Nurse Practitioner~~ Certified Nurse Practitioner or Clinical Nurse Specialist will be provided ten (10) days' notice, in writing, to appear before the Full Independent Practice Credentialing Committee.

### G. APPEAL

If a Certified Nurse Practitioner's or Clinical Nurse Specialist's certificate of full independent practice authority is denied, suspended, or revoked they may appeal the action of the Committee under the Arkansas Administrative Procedure Act, §25-15-201.

### F. REPORTS

A quarterly report will be provided to the Senate Committee on Public Health, Welfare and Labor and the House Committee on Public Health, Welfare and Labor. The report will contain, at a minimum, the number of applicants approved and denied a certificate of independent practice authority.

Amended: 2023

## SECTION III

### QUALIFICATIONS FOR FULL INDEPENDENT PRACTICE AUTHORITY

#### A. INITIAL

1. Submission of an application for full independent practice authority.
2. Submission of two (2) letters of recommendation.
3. Hold an active unencumbered Arkansas Certified Nurse Practitioner or Clinical Nurse Specialist license.
4. Hold an unencumbered prescriptive authority certificate or equivalent in the state of licensure.

## Full Independent Practice Credentialing Committee Rules

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5. Submission of documentation showing a minimum of 6,240 hours of practice:
  - a. Under a ~~collaborative practice~~ board required agreement with a physician. Such documentation shall include:
    - 1) An affidavit from a collaborating physician attesting to the number of hours the Certified Nurse Practitioner practiced under a collaborative practice agreement with the physician. Multiple attestations are acceptable.; or
    - 2) Other evidence of meeting the qualifications for full independent practice and an affidavit signed by the nurse practitioner, in the event a collaborating physician has died, become disabled, retired, relocated to another state, or any other circumstance that inhibits the ability of the nurse practitioner from obtaining an affidavit.
      - i. Other evidence may include employment records, military service, Medicare or Medicaid reimbursement records, or other similar records that verify clinical practice in the population foci for which the nurse practitioner is licensed and certified.
      - ii. The burden shall be on the nurse practitioner to provide sufficient evidence to support the nurse practitioner's inability to obtain an affidavit from a collaborating physician.
  - b. In another state, territory, or foreign country that authorizes a certified nurse practitioner or a clinical nurse specialist to practice with prescriptive authority if the certified nurse practitioner or clinical nurse specialist provides proof of:
    - 1) Holding prescriptive authority in the state; and
    - 2) The APRN license is in good standing.
6. Submission of any other relevant documents requested by the Committee in support of application.

HISTORY: Adopted: August 1, 2022

**Amended: 2023**

### **B. RENEWAL**

1. The Certificate for full independent practice authority shall be renewed every three years by submitting the required application and corresponding fee.
2. Renewal applicants must hold an active unencumbered Arkansas Certified Nurse Practitioner or Clinical Nurse Specialist license.

**Amended: 2023**

## **SECTION IV** **FEES**

- A. The Committee shall establish fees for services relating to application for full independent practice authority and renewal of the full independent practice certificate.
  1. The initial application fee shall be \$150.00.
  2. The certificate renewal fee shall be \$50.00.
  3. All funds received shall be deposited in the State Treasury to the credit of the Committee.
  4. Fees paid shall be by credit card.
  5. Fees paid are processing fees and are not refundable.

HISTORY: Adopted: August 1, 2022

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5. Submission of documentation showing a minimum of 6,240 hours of practice:

## Full Independent Practice Credentialing Committee Rules

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