

Report of the Nursing Practice Committee

BRN Board Meeting Nursing Practice Committee August 17, 2022 Table of Contents

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Information Only: Updates on the Nurse Practitioner Advisory Committee, Nurse-Midwifery Advisory Committee, and Nursing Education and Workforce Advisory Committee

BOARD OF REGISTERED NURSING Agenda Item Summary

AGENDA ITEM: 7.1 DATE: August 17, 2022

ACTION REQUESTED: Information only: Updates on the Nurse Practitioner Advisory

Committee, Nurse-Midwifery Advisory Committee, and Nursing

Education and Workforce Advisory Committee

REQUESTED BY: Elizabeth (Betty) Woods, RN, FNP, MSN

Nursing Practice Committee Chair

BACKGROUND:

The Chairs/Vice Chairs of the committees or Loretta Melby, Executive Officer, will provide updates on the Nurse Practitioner Advisory Committee, Nurse-Midwifery Advisory Committee, and Nursing Education and Workforce Advisory Committee.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY:

PERSON(S) TO CONTACT: McCaulie Feusahrens

Chief of the Licensing Division

California Board of Registered Nursing mccaulie.feusahrens@dca.ca.gov



Information only: Update from the Department of Consumer Affairs, Office of Professional Examination Services, Regarding Occupational Analysis Mandated under Business and Professions Code section 2837.105

BOARD OF REGISTERED NURSING Agenda Item Summary

AGENDA ITEM: 7.2 DATE: August 17, 2022

ACTION REQUESTED: Information only: Update from the Department of Consumer Affairs,

Office of Professional Examination Services, regarding occupational analysis mandated under Business and Professions Code section

2837.105

REQUESTED BY: Elizabeth (Betty) Woods, RN, FNP, MSN

Nursing Practice Committee Chair

BACKGROUND:

The OPES will provide updates on the occupational analysis pursuant to BPC Section 2837.105 and the Board members may discuss the information presented.

RESOURCES:

https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=BPC§ionNum=28 37.105.

BPC Section 2837.105:

- (a)(1) The board shall request the department's Office of Professional Examination Services, or an equivalent organization, to perform an occupational analysis of nurse practitioners performing the functions specified in subdivision (c) of Section 2837.103 pursuant to that subdivision.
- (2) The board, together with the Office of Professional Examination Services, shall assess the alignment of the competencies tested in the national nurse practitioner certification examination required by subparagraph (A) of paragraph (1) of subdivision (a) of Section 2837.103 with the occupational analysis performed according to paragraph (1).
- (3) The occupational analysis shall be completed by January 1, 2023.
- (4) If the assessment performed according to paragraph (2) identifies additional competencies necessary to perform the functions specified in subdivision (c) of Section 2837.103 pursuant to that subdivision that are not sufficiently validated by the national nurse practitioner board certification examination required by subparagraph (A) of paragraph (1) of subdivision (a) of Section 2837.103, the board shall identify and develop a supplemental exam that properly validates identified competencies.
- (b) The examination process shall be regularly reviewed pursuant to Section 139.

NEXT STEPS:

FISCAL IMPACT, IF ANY:

PERSON(S) TO CONTACT: McCaulie Feusahrens

Chief of the Licensing Division

California Board of Registered Nursing mccaulie.feusahrens@dca.ca.gov



Information Only: Guidance on the BRN website regarding ordering of home care services by clinical nurse specialists and nurse practitioners

BOARD OF REGISTERED NURSING Agenda Item Summary

AGENDA ITEM: 7.3 DATE: August 17, 2022

ACTION REQUESTED: Information Only: Guidance on the BRN website for licensee and public

access regarding Clinical Nurse Specialist (CNS) and Nurse Practitioner (NP)

ordering of home care services.

REQUESTED BY: Elizabeth (Betty) Woods, RN, FNP, MSN

Nursing Practice Committee Chair

BACKGROUND:

The national Coronavirus Aid, Relief, and Economic Security Act of 2020 (CARES Act), details practice changes for Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS). Beginning March 1, 2020, NPs and CNSs may certify that patients are eligible for Medicare home health services, order these services, and establish and review home health plans of care. These changes are effective for Medicare Claims with a date on or after March 1, 2020.

Allowed practitioners include:

- A NP collaborating with a physician according to state law;
- · A CNS collaborating with a physician; and,
- A Physician Assistant working in accordance with state law. (No BRN oversight)

The Advanced Practice Registered Nursing Advisory Committee (APRNAC) developed a guidance document which was approved by the APRNAC during the November 2021 Committee meeting. It was posted to the BRN website in December 2021, as approved. The FAQ document is titled "Frequently Asked Questions (FAQs) related to Advanced Practice Registered Nurses (APRN) Practice and the CARES Act of 2020" and is located in the "Advanced Practice Information" section on the "Publications" webpage.

For convenience, the FAQ document is included in these materials. Additionally, the direct links to the FAQs and the publications webpage are below and screenshots of steps on how to find the document are as follows:

Option 1: Individuals may search "CARES Act" by using the search tool on the BRN homepage.



Option 2, Step 1: From the homepage, hover on the "Consumers" tab and click on "Forms and Publications"



Option 2, Step 2: On the "Forms and Publications" page, click on "Publications"



Option 2, Step 3: On the "Publications" page, click on "Nursing Practice Publications" and click on "Advanced Practice Information." You can also scroll to the bottom of the page to find the "Advanced Practice Information" section.



Option 2, Step 4: Within this "Advanced Practice Information" section, there is a table with all the documents. The first column is the document name (in alphabetical order) and the second column is the updated date.

Advanced Practice Information

Advanced practice information, advisories, and guidelines are provided by the BRN to ensure ongoing communication of competency standards to consumers, advanced practice nurses (nurse practitioners, nurse-midwives, clinical nurse specialists, nurse anesthetists, and psychiatric/mental health nurses), employers, educators, and other regulators. As the scope of advanced practice nursing changes and grows, so does this information. You may wish to check back often for updates.

AB 890 Nurse Practitioners: Scope of Practice and Practice Without Standardized Procedures

With the passage of AB 890 the Nurse Practitioner may be able to practice independently once certain provisions have been met. All Nurse Practitioners will not meet the provisions outlined within AB 890 by January 1, 2023. Until those conditions are met, the Nurse Practitioner will continue to operate using Standardized Procedures, the mechanism for Nurse Practitioners to perform functions which would be considered the practice of medicine.

Per the statutory requirement in Business and Professions Code (BPC) section 2837.103 (a)(1)(D), the transition to practice must include a minimum of three (3) full-time equivalent years of practice or 4600 hours. Upon completion of the transition to practice, a nurse practitioner may practice in limited settings or organizations in which one or more physicians and surgeons practice with the nurse practitioner without standardized procedures.

Additionally, in order for a nurse practitioner to expand their practice outside of those settings, a nurse practitioner must practice within the limits of their knowledge, experience, and national certification and have practiced in good standing for at least three (3) years after meeting the requirements to transition to practice. Furthermore, a nurse practitioner who is practicing outside of the limited settings outlined in BPC section 2837.103 shall consult and collaborate with other healing arts providers based on the clinical condition of the patient to whom health care is provided and establish a plan for referral of complex medical cases and emergencies to a physician and surgeon or other appropriate healing arts providers.

The Board is interested in moving forward with its duties to implement the bill efficiently and thoughtfully. Though the exact timeframes are not certain nor guaranteed, the Board expects that it will be able to take the necessary steps required by the legislature for implementation of AB 890 on or before January 1, 2023.



RESOURCES:

Link to FAQ document: https://rn.ca.gov/pdfs/regulations/faqs-aprn.pdf

Link to "Publications" webpage: https://www.rn.ca.gov/forms/pubs.shtml#adv

CMS – Qualifying for Home Health Services: https://www.cms.gov/files/document/r10438bp.pdf

Home Health Manual Update to Incorporate Allowed Practitioners into Home Health Policy: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Home-Health-Benefit-Fact-Sheet-ICN908143.pdf

CMS Manual System - Centers for Medicare & Medicaid Services: https://www.cms.gov/files/document/r10438bp.pdf

Medicare Home Health Benefit:

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Medicare-Home-Health-Benefit-Text-Only.pdf

NEXT STEPS:

FISCAL IMPACT, IF ANY: PERSON(S) TO CONTACT:

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Frequently Asked Questions (FAQs) related to Advanced Practice Registered Nurses (APRN) Practice and the CARES Act of 2020

The national Centers for Medicare and Medicaid Services (CMS) has amended Chapter 7 of the Medicare Benefit Policy Manual (Pub 100-02), pertaining to Home Health Services, to incorporate Nurse Practitioners (NPs) and Clinical Nurse Specialists (CNSs) as "allowed practitioners." The changes give regulatory permission for CNSs and NPs to certify and recertify home health services in California.

This new allowance will currently be incorporated into standardized procedures for both NPs and CNSs. Upon full regulatory implementation of Assembly Bill 890 (Reg. Sess. 2019-2020), the permission to certify and recertify home health services will be allowable without standardized procedures for eligible NPs in accordance with Business and Professions Code sections 2837.103 and 2837.104. For CNSs in California, the standardized procedure requirement remains.

What is the CARES Act of 2020?

The Coronavirus Aid, Relief, and Economic Security Act¹, also known as the CARES Act, is a piece of federal legislation that was passed in 2020 in response to the impacts of the COVID-19 pandemic. In addition to significant economic stimulus measures, the CARES Act made changes to healthcare laws to allow for greater flexibility, including changes to Medicare payment rules.

How does the CARES Act affect California APRN practice?

As a result of the CARES Act², CMS updated its regulations to designate NPs and CNSs as "allowed practitioners" that can order home health services for Medicare home health beneficiaries.

Are there specific requirements for APRNs to be able to order home health services? Yes. The practitioner must be practicing according to state law. The NP or CNS must hold national certification in order to be eligible for reimbursement.

How does the CARES Act improve access to care?

This change increases access to care by allowing qualified APRNs to be able to assess patients and timely facilitate the provision of needed care and treatment while patients remain in the safety of their homes. An individual no longer has to be solely under the care of a physician – an individual who is under the care of a NP or CNS will also qualify. The NP or CNS can establish the patient's plan of care and certify the patient's eligibility. This allows the NP or CNS to sign the Home Health Certification and Plan of Care (Form CMS-485) and interim orders directly. It will eliminate the extra step of having the supervising physician sign orders that are properly given by the non-physician practitioner. This also allows the NP or CNS to perform the required face-to-face encounter.

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¹ Pub.L. No. 116–136 (March 27, 2020) 134 Stat. 281.

² § 3708, subd. (f).



Are there additional benefits that may affect APRN practice?

Yes. The CARES Act also supports broader use of telecommunications systems, including remote patient monitoring, to deliver home health services under certain circumstances (such as when the beneficiary is presented from an originating site located in a rural health professional shortage area or in a county outside of a Metropolitan Statistical Area). This would allow certain patients to receive home health services without a provider entering their home.

For more detailed and up-to-date information, interested parties should consult the text of the CMS Medicare Benefit Policy Manual.

RESOURCES:

- CMS Publication "Home Health Manual Update to Incorporate Allowed Practitioners into Home Health Policy": https://www.cms.gov/files/document/r10438bp.pdf
- Medicare Benefit Policy Manual, Chapter 7 Home Health Services:
 https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c07.pdf

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