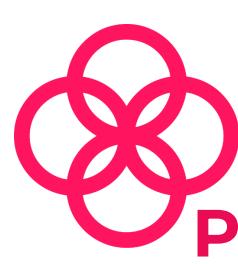




Nurse Practitioner Collaborating Agreement Guide



Purpose

The purpose of this document is to provide an easy-to-use, comprehensive guide for any information needed before, during, and after collaborating. Please keep this handy on your desktop or bookmarked as a shortcut, as most questions can be answered with this document.

Collaborative Agreements

A Collaborative agreement is a formal agreement between two or more medical professionals that define the relationship and any delegated medical acts with the purpose of ensuring appropriate care standards are upheld when treating patients. These agreements outline the terms and conditions of the collaboration, including the responsibilities of each party, the scope of work, and the expected outcomes. They help establish clear expectations, clinical QA oversight, ensure effective communication, and provide a framework for resolving conflicts or disputes that may arise during the collaboration. Collaborative agreements play a crucial role in supporting APRNs in their ability to exercise their full scope of practice in the states that require it.

Points of Contact for Collaboration Needs/Questions

1. Ben Brogger
2. Arianna Sorrentino
3. Rachel Cabrera
4. Nikka Untalasco



Glossary

CPA: Collaborative Practice Agreement

CS: Controlled Substances

DD: Dangerous Drugs (State-specific term for non-controlled substances) used in Texas, Massachusetts and Alabama primarily

FPA: Full Practice Authority (this may sometimes be with or without prescriptive authority).

FTE: Full Time Employee

NCS: Legend, Non-Controlled Substances

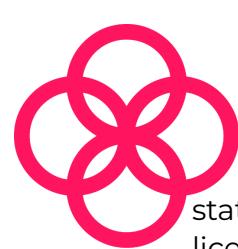
Rx Authority: Prescriptive Authority

Ratio Information

Some states have a physician to APP ratio. These ratios vary for each state. Some states have ratios that take into account only NPs, NPs and PAs, or separate ratios for both. Due to ratio-limits from states, this may make it more difficult to collaborate within certain states. Below is a list of states that have ratio-limits between physicians and nurse practitioners and what those limits are:

- Alabama: 9 FTE (360 hours per week) to 1 physician
- California: 4 NPs to 1 physician
- Georgia: 4 NPs to 1 physician
- Mississippi: 4 NPs to 1 physician
- Missouri: 6 (FTE) NPs to 1 physician
- New York: 4 NPs to 1 physician
- Ohio: 5 NPs to 1 physician
- Oklahoma: 6 NPs to 1 physician
- South Carolina: 6 NPs to 1 physician
- Texas: 7 (FTE) NPs to 1 physician
- Virginia: 6 NPs to 1 physician

*****Important to note,** for the states that have (FTE) listed, this means "Full Time Employee". Therefore, the state considers 1 FTE to be 40 hours per week. For most states, you will likely only see patients 5-10 hours per week. When establishing the collab agreement, we will indicate the number of hours of practice per week in that



state. This allows multiple NPs to be able to take up only 1 ratio slot of the physician's license.

Licensure Information

Quick Reference for License Requirements

States where a CPA is ALWAYS needed:

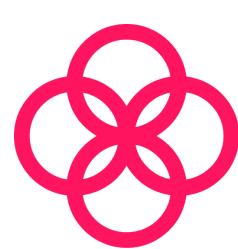
- AL
- GA
- IN
- LA
- MO
- MS
- NC
- NJ
- OH
- OK
- PA
- SC
- TN
- TX
- WI

States where the APRN license grants automatic FPA + Rx authority:

- AK
- DC
- NH
- OR
- RI
- UT
- WY

States where Rx authority needs to be applied for separately from the NP License to grant FPA:

- AZ
- CO
- HI
- ID
- MT
- ND
- NM



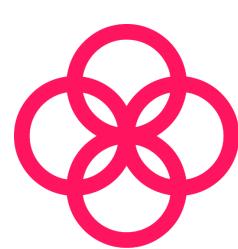
- NV
- WA
- WV

States where the APRN can apply for FPA & the approved FPA grants practice authority + Rx authority:

- CT
- DE
- FL
- IA
- IL
- KS
- KY
- MD
- ME
- NE
- NY
- SD
- VA
- VT

States where once the CPA is approved, this will grant both practice authority + Rx authority:

- AL
- AR
- CT
- FL
- GA
- IL
- IN
- KY
- LA
- MD
- ME
- MI
- MO
- MS
- NC
- NE
- NJ
- NY
- OH
- OK



- PA
- SC
- SD
- TN
- TX
- VA
- VT
- WI
- WV

Breakdown of Each State License

Alabama

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

Alabama will always require an NP to enter into a collab agreement to practice. The collab will grant both practice authority as well as Rx authority.

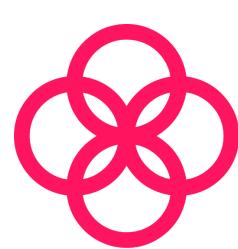
Steps to set up CPA:

After signing the QA Plan & Standard Protocol via DocuSign, you will receive a copy for your records. The physician will apply for initial approval within their portal while the NP will concurrently apply for initial or modified approval within the Alabama nursing portal. The board reporting will require physician details, therefore please contact a team member from the Collab Team to assist with retrieving these details. Any fees for the application WILL be reimbursed by OpenLoop. Upon completion, the Alabama nursing board will grant the NP temporary approval. This allows the NP to practice fully underneath the collab agreement with Rx authority. Eventually, the board will grant full approval, however temp approval will serve the same purpose.

Alaska

Full Practice Authority:

An Alaska NP license allows for both full practice authority as well as Rx authority. Nothing else is needed here besides an NP license in Alaska.



Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Alaska.

Arizona

Full Practice Authority:

In Arizona, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Arizona NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Arizona.

Arkansas

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab is always needed here. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

After completing the DocuSign, you will receive a copy for your records. If you have already been giving Rx authority in AR, you will need to submit a request within the message center on the AR portal to change your collaborator. The AR board will require the form filled out via DocuSign AS WELL AS the DocuSign certificate that shows when the signatures were made. Please contact a Collab Team member when you are ready to submit so we can give you the DocuSign certificate.

If you are applying for initial Rx authority, meaning you have not had a collaboration agreement set up here before, you will need to complete a verification of prescribing hours first. We are able to verify this as the employer and can notarize the document for submission as long as you have been practicing at OpenLoop for



over 500 hours. If it has not been 500 hours of practice at OpenLoop, you will need to contact your previous employer to get this form completed.

In both cases, we will need to wait for a notification from the AR board letting us know you have been approved.

California

Full Practice Authority:

California has both an FPA route, as well as a collab route. In California, you will need 3 years or 4,600 hours of supervised practice within the state of California before you can apply for full practice authority.

Collaborative Practice Requirements:

If you have not met the FPA requirements, a collab will be required. BEFORE establishing a California collab, you will need to get a California furnishing license. This will allow for Rx authority. Once a furnishing license is obtained, the Collab Team is able to set up a collab agreement.

Steps to set up CPA:

After obtaining the furnishing license, a California collab agreement will be sent to both the NP and collab physician. Once signed by both parties, the collab is considered effective. California does require that a copy of the Collaborative Practice Agreement is kept in your records and is updated frequently enough to ensure that patients are receiving appropriate care.

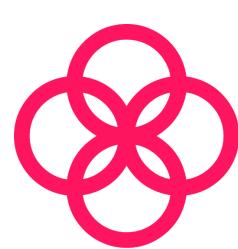
Colorado

Full Practice Authority:

In Colorado, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Colorado NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Colorado.



Connecticut

Full Practice Authority:

Connecticut has both an FPA route, as well as a collab route. In Connecticut, you will need 3 years or no less than 2,000 hours of supervised practice before you can apply for full practice authority. The supervised practice does need to be within the state of Connecticut to qualify for FPA.

Collaborative Practice Requirements:

If FPA has not been met, a CT collab will need to be established. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

A Connecticut collab agreement will be sent to both the NP and collab physician. Once signed by both parties, the collab is considered effective.

Delaware

Full Practice Authority:

In Delaware, the NP license is considered FPA. This grants both practice authority, as well as Rx authority. Nothing additional is needed.

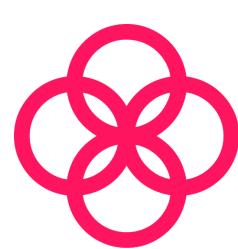
Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Delaware.

Florida

Full Practice Authority:

Florida FPA requirements are 3,000 hours of practice within the 5 years preceding registration request. Once met, FPA can be applied for on the regular Florida state license. However, if obtaining a FL telehealth license (this will be a "TPAN000" license), this will allow the same abilities as a full practice authority license. The TPAN license grants full practice authority as well as Rx authority.



Collaborative Practice Requirements:

A collab will need to be set up for the regular FL APRN license if requirements have not been met for FPA. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

This collab agreement will be sent to both the NP and collab physician. This is considered effective once signed by both parties. The only requirement for the board is that the physician must notify the FL board of the number of collab agreements they have, however the specific NP names do not need to be disclosed or approved by the board.

Georgia

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab is needed. The collab will grant both practice authority as well as Rx authority.

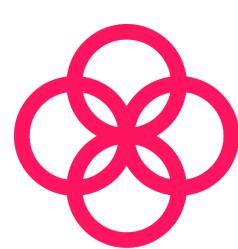
Steps to set up CPA:

For Georgia, while technically the collab is considered effective when signed by both parties, a physical packet inclusive of the signed CPA, licensure copies, and a check to the GA Composite Medical Board will need to be mailed for their full approval or their denial. You are allowed to practice under the agreement until one of those verdicts is sent back.

Hawaii

Full Practice Authority:

In Hawaii, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Hawaii NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.



Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Hawaii.

Idaho

Full Practice Authority:

In Idaho, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Idaho NP license. Idaho considers this an endorsement onto the NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Idaho.

Illinois

Full Practice Authority:

Illinois has an FPA route. FPA can be applied for once the NP has 4,000 hours of supervised practice and 250 hours of continuing education.

Collaborative Practice Requirements:

A collab will be needed for NPs that do not have FPA. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

This collab agreement will be sent to both the NP and collab physician. This is considered effective once signed by both parties. No board reporting is needed.

Indiana

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:



A collab will always be needed in Indiana. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

There is a board submission component for the IN collab. The NP will need to log into their IN portal and upload the signed CPA to their “license documents”. The board will process the CPA and denote the collab on the public search portal. The only way to verify the collab is approved is by looking up the NP license on the public search portal to check if the collaborating physician is listed on the NP license. This will not be verifiable within the NP portal. The IN board will contact the NP if they have any missing information needed in order to process the CPA.

Iowa

Full Practice Authority:

In Iowa, the NP license is considered FPA. This grants both practice authority, as well as Rx authority. Nothing additional is needed.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Iowa.

Kansas

Full Practice Authority:

In Kansas, the NP license is considered FPA. This grants both practice authority, as well as Rx authority. Nothing additional is needed.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Kansas.

Kentucky

Full Practice Authority:

There is an FPA route in KY that differs when requesting non-controlled prescriptive authority vs controlled prescriptive authority.

Non-controlled FPA qualifications (CAPA-NS Waiver): 4 years of prescribing



non-controlled substances as an NP under collaboration with physicians in Kentucky.

Controlled FPA qualifications (CAPA-CS Exemption):

Submit a request for exemption through the KBN portal. Ensure that the KBN has on file a copy of current DEA registration, PDMP/KASPER master account, & CAPA-CS. Pay the required fee & be determined to be in good standing.

Collaborative Practice Requirements:

A collab, as well as a CAPA-NS form must be obtained if FPA is not met. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

In order to set up a collab in KY, the NP & physician will both need to sign the CPA & the CAPA-NS. The NP will then submit both forms to the KY board for approval. Once approved, the KY board will send the NP a message within the KY portal. The KY collab (& FPA), cannot be publicly verified.

Louisiana

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

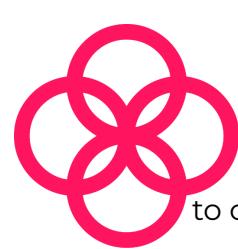
Collaborative Practice Requirements:

A collab will always be needed in LA. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

The CPA form to sign will come to you via Docusign. This form is directly from the LA BON. Additionally, if you already have had Rx authority in LA and only need to add a collaborator, you will need to sign the "Attestation of APRN Collaborative Practice" form. This form needs to be signed by both the NP and the collaborating physician in **WET INK** then uploaded to the NP's LA portal.

If you are applying for initial Rx authority, meaning you have not had a collaboration agreement set up here before, you will need to complete a verification of prescribing hours first. We are able to verify this as the employer and can notarize the document for submission as long as you have been practicing at OpenLoop for over 500 hours. If it has not been 500 hours of practice at OpenLoop, you will need



to contact your previous employer to get this form completed.

After the submission, the LA BON will send you a notice letting you know when the Rx authority has been approved.

Maine

Full Practice Authority:

Maine allows for FPA after 24 months of practice. The FPA will grant both practice authority as well as Rx authority. If the Maine NP license is applied for AFTER the NP already has 24 months of practice, the initial license is granted as an FPA license. If the NP gets a Maine license before 24 months of practice, they will need to apply for FPA once they reach 24 months of practice.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team to assist.

Maryland

Full Practice Authority:

Maryland allows for FPA after 18 months of practice. The FPA will grant both practice authority as well as Rx authority. If the Maryland NP license is applied for AFTER the NP already has 18 months of practice, the initial license is granted as an FPA license. If the NP gets a Maryland license before 18 months of practice, they will need to apply for FPA once they reach 18 months of practice.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team to assist.

Massachusetts

Full Practice Authority:

Massachusetts allows for independent practice after 2 years of supervision for prescriptive practice. Additionally, the NP will also need to apply for independent



prescriptive authority, regardless of status.

Collaborative Practice Requirements:

A collab will be needed for practice authority if the 2 years has not been met. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

MA doesn't require the collaborative agreement to be submitted -- or filed. This will be effective upon signature and execution. Once both of you have signed - DocuSign will automatically send over a copy of the completed agreement for your records.

However - the APRN will need to apply for independent prescriptive authority.

Instructions for applying for APRN prescriptive authority can be found at the following link: <https://www.mass.gov/how-to/apply-for-aprn-prescriptive-authority>

Michigan

Full Practice Authority:

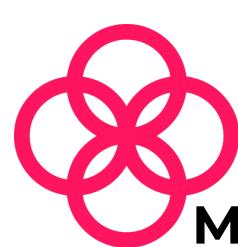
A Michigan license allows for FPA. HOWEVER, a collaborative agreement in Michigan is required for Medicaid participation in the state (inclusive of prescribing to Medicaid patients).

Collaborative Practice Requirements:

While having a Michigan license allows for full practice, the collab team will set up a CPA so that there is true full practice authority inclusive of Medicaid patients. The collab will grant both practice authority as well as Rx authority for Medicaid patients.

Steps to set up CPA:

Advanced Practice Registered Nurses (APRNs) must maintain a copy of their Collaborative Practice Agreement in their records. Once both parties have signed - DocuSign will automatically send over a copy of the completed agreement for your records.



Minnesota

Full Practice Authority:

Minnesota allows for FPA 2080 hours of practice. The FPA will grant both practice authority as well as Rx authority. If the Minnesota NP license is applied for AFTER the NP already has 2080 hours of practice, the initial license is granted as an FPA license. If the NP gets a Minnesota license before 2080 hours of practice, they will need to apply for FPA once they reach 2080 hours of practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Minnesota.

Mississippi

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

Mississippi collab requirements are that the Physician practice site must be within 75 miles of the APRN practice site, unless a waiver is granted by the MS Board of Medical Licensure. We do not have a current waiver, but are in process of getting one granted.

Steps to set up CPA:

We currently do not collab in Mississippi.

Missouri

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

Missouri will always require an NP to enter into a collab agreement to practice. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:



As of September 1st, 2023 - Missouri officially modified their administrative code (20 CSR 2200-4.200) related to collaborative practice agreements to account for the telehealth practice of APRNs. Pursuant to this enacted regulatory change, the geographic proximity requirements for collaborative practice agreements between APRNs and Physicians are automatically waived as long as the collaborative agreements specifically denote the practice of telehealth within the body of the agreement (APRN practicing pursuant to section 335.175, RSMo).

There is no board submission/approval component required for Missouri collaborative agreements - and no waiver form required for exemption from the geographic proximity requirements according to the Missouri Board of Nursing. This will be effective upon signature and execution. Once both of you have signed - DocuSign will automatically send over a copy of the completed agreement for your records.

Montana

Full Practice Authority:

In Montana you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Montana NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Montana.

Nebraska

Full Practice Authority:

Nebraska allows for FPA after 2,000 hours of practice. The FPA will grant both practice authority as well as Rx authority. If the Nebraska NP license is applied for AFTER the NP already has 2,000 hours of practice, the initial license is granted as an FPA license. If the NP gets a Nebraska license before 2,000 hours of practice, they will need to apply for FPA once they reach 2,000 hours of practice.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team



Nevada

Full Practice Authority:

In Nevada, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Nevada NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Nevada.

New Hampshire

Full Practice Authority:

In New Hampshire, the NP license is considered FPA. This grants both practice authority, as well as Rx authority. Nothing additional is needed.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in New Hampshire.

New Jersey

Full Practice Authority:

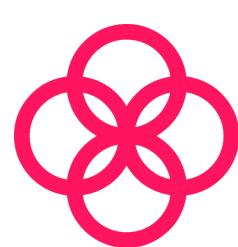
There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

New Jersey will always require an NP to enter into a collab agreement to practice. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

There is no board submission/approval component required for New Jersey collaborative agreements. This will be effective upon signature and execution. Once both of you have signed - DocuSign will automatically send over a copy of the completed agreement for your records.



New Mexico

Full Practice Authority:

In New Mexico, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular New Mexico NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in New Mexico.

New York

Full Practice Authority:

After obtaining 3,600 hours of practice, you qualify for FPA in New York. To grant FPA, you will need to fill out the Nurse Practitioner Form Collaborative Relationships Attestation Form provided by the NY board. This form will only need to be signed by the NP. A collab team member will fill out the information regarding the physician you are associated with. Just to clarify on this, Dr. Mohit Joshipura is listed as one of the available NY-licensed physicians we are required to list on the NY-CRA form (which is actually the full practice authority attestation) - there is not a formal collaborative agreement required here. This form does not get submitted to the NY board and only needs to be kept on file.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team to assist.

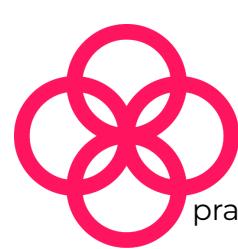
North Carolina

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

North Carolina will always require an NP to enter into a collab agreement to



practice. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

North Carolina requires board notification through the nurse portal. Please log in to your North Carolina portal, select your Nurse Practitioner license and complete the "Physician Maintenance" request. Once both of you have signed - DocuSign will automatically send over a copy of the completed agreement for your records. Check back periodically within the portal to see if the request has been approved.

North Dakota

Full Practice Authority:

In North Dakota, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular North Dakota NP license. North Dakota considers this an endorsement onto the NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in North Dakota.

Ohio

Full Practice Authority:

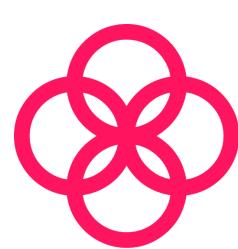
There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

Ohio will always require an NP to enter into a collab agreement to practice. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

The Ohio CPA will be sent to both parties to sign. There is "technically" not a filing requirement for the CPA, but they do request that the NP submits documentation denoting that a new collab agreement exists on the provider dashboard. Although providing a copy of the CPA is not "requested", it is likely the best document to upload to substantiate the update request.



When inquiring where to submit this, it is not in the "option" drop down menu on the provider dashboard. It is in the down-arrow (untitled) drop-down menu next to the APRN endorsement - "update collaborating physician". Please let a team member know that something has been uploaded to your portal so we can approve this within our systems.

Oklahoma

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab agreement will need to be set up for Oklahoma. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

In the DocuSign envelope for an Oklahoma collab, there will be two forms: the CPA as well as the collab form needed by the Oklahoma board.

The form provided by the board will indicate if you are applying for initial prescriptive authority or if you are adding a collaborator to your already approved prescriptive authority.

AFTER this form has been signed by both parties, the form will need to be notarized.

Ben Brogger is able to notarize this document. After the form has been notarized, it will then need to be uploaded to the NP portal along with the application fee. All fees will be reimbursed by OpenLoop. The OK BON will notify you when the application has been accepted.

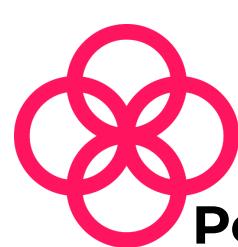
Oregon

Full Practice Authority:

An Oregon NP license allows for both full practice authority as well as Rx authority. Nothing else is needed here besides an NP license in Oregon.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Oregon.



Pennsylvania

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab will need to be put in place in Pennsylvania. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

After signing the collaboration agreement, the NP will need to initiate the Rx authority request within the PALS portal. This can be done by logging in and under the license, there should be an option to request prescriptive authority. The one thing that they are going to ask for here that may hold things up will be their required Opioid CME for initial prescriptive authority in the state. As a basic summary - this only needs to be completed once and must consist of 4 CME hours of Board-approved education consisting of 2 hours in pain management or the identification of addiction and 2 hours in the practices of prescribing or dispensing of opioids. Have the CEU certs ready to go when starting this process. If you are wondering if certain courses qualify, PA has a website where you can check to see if they will accept your courses.

After logging into the PALS portal and applying for prescriptive authority, it will send your request to the collaborating physician. The collaborating physician will then need to log into their PALS account and accept the request. AFTER they have accepted your request, you will then need to go back into your PALS one final time and accept, as well as pay the application fee. OpenLoop will reimburse you for this fee.

Once all of this is complete, you will need to check back into the PALS portal periodically to check if the application was accepted by the board, or if they are requesting anything additional.

Rhode Island

Full Practice Authority:

A Rhode Island NP license allows for both full practice authority as well as Rx authority. Nothing else is needed here besides an NP license in Rhode Island.

Collaborative Practice Requirements:



A collaborative agreement is not required for APRNs in Rhode Island.

South Carolina

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab will be needed in South Carolina. Depending on if you are applying for initial Rx authority or if you are changing a collaborator, the requirements will be different. For initial Rx authority, the NP will need evidence of completion of forty-five (45) contact hours of education in pharmacotherapeutics acceptable to the board, within two (2) years before application. At least fifteen (15) of the forty-five (45) hours should be in controlled substances.

Steps to set up CPA:

The Docusign envelope will contain the CPA as well as the form for Rx authority. The Rx form will need to be submitted to the SC board. The link on where to apply directly will be found on the Rx form. It should be uploaded to the documents within the SC portal. They will notify you when approved, or you can search your collaborating physician's name on the public search portal and search for your name listed under their license.

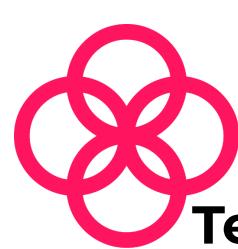
South Dakota

Full Practice Authority:

FPA can be applied for after completing 1,040 hours of practice.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team to assist.



Tennessee

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab will be needed in TN. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

A Tennessee collab will be sent to both parties via Docusign. Tennessee requires that the collaborative agreement is made available upon request to the Department of Health and be maintained on file. OpenLoop will maintain a copy of this and you will also receive a completed copy of this via email from Docusign once all parties have signed the agreement for your records.

The actual agreement itself doesn't need to be submitted to the board or approved. However, there is an online connection component that is required for TN. This can either be completed via electronic connection/approval submission within the NP's portal and then approved on the Physician's portal - or this can be immediately connected via the Physician's portal.

Texas

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab will always be needed in Texas. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

Once the CPA is signed by both parties, the NP will need to initiate the request with the TMB portal for the collaborating relationship. The NP must submit the collaborating physician name, license number, hours of practice under the CPA per week (for telehealth, this number is likely close to 5 hours), the address of practice, then submit this to the collaborating physician. Once submitted by the NP, the collaborating physician will also need to log into the TMB portal and accept the



request. Once both parties have completed the above steps, the request will show green on both ends and be considered effective.

Utah

Full Practice Authority:

A Utah NP license allows for both full practice authority as well as Rx authority. Nothing else is needed here besides an NP license in Utah.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Utah.

Vermont

Full Practice Authority:

Vermont FPA requirements are 24 months and 2,400 hours, then 12 months and 1,200 hours for additional population focus.

Collaborative Practice Requirements:

A collab will be needed if FPA requirements are not met. The collab will grant both practice authority as well as Rx authority.

Steps to set up CPA:

In Vermont, the CPA will be considered effective once signed by both the NP & the collaborating physician. This does not need to be submitted to the board for approval.

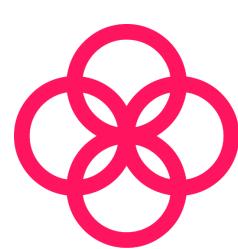
Virginia

Full Practice Authority:

Virginia FPA requires 5 years of full-time practice before qualifying.

Collaborative Practice Requirements:

If FPA is not met, a CPA will need to be in place. The collab will grant both practice authority as well as Rx authority.



Steps to set up CPA:

In Virginia, the CPA will be considered effective once signed by both the NP & the collaborating physician. This does not need to be submitted to the board for approval.

Washington

Full Practice Authority:

In Washington, you will not need a collab agreement, however you will need to apply for Rx authority separate from the regular Washington NP license. Once Rx authority is granted, this grants the entire full practice authority. Without Rx authority, you only have partial ability to practice.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Washington.

West Virginia

Full Practice Authority:

FPA in WV is able to be obtained after 3 years of supervised practice.

Collaborative Practice Requirements:

Traditionally, we do not set up a CPA here due to the ease of meeting FPA requirements. If there is a need to set up a CPA here, please contact the collab team to assist.

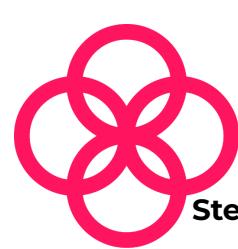
Wisconsin

Full Practice Authority:

There is no FPA route. The NP will always need a collaborator.

Collaborative Practice Requirements:

A collab will always be needed in WI. The collab will grant both practice authority as well as Rx authority.



Steps to set up CPA:

The CPA will be sent to both the NP & the collaborating physician. Once signed by both parties, the collab is considered effective & does not need to be submitted to the board.

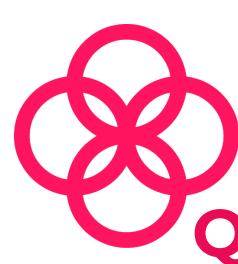
Wyoming

Full Practice Authority:

A Wyoming NP license allows for both full practice authority as well as Rx authority. Nothing else is needed here besides an NP license in Wyoming.

Collaborative Practice Requirements:

A collaborative agreement is not required for APRNs in Wyoming.



Quality Assurance

Jennifer Harrison

Chart Review

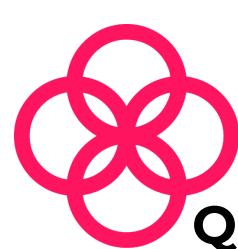
Chart review requirements vary by state. The chart reviews will happen on the collaborating physician's end. It is OpenLoop's policy for physicians to review 5% or 20 charts, whichever is less, per quarter unless specific state regulations specify differently. [States with Additional Requirements for Advanced Practice Providers](#):

- Alabama
 - Review of at least 10% of medical records, plus all adverse outcomes.
- Georgia
 - Chart review required for all charts where controlled substances are prescribed.
- Mississippi
 - Medical record review of 10% or 20 , whichever is less, quarterly.
- Indiana
 - Review at least 5% of medical records monthly.
- Missouri
 - The collaborating physician must review the work and records of the NP at least once every 2 weeks.
- Tennessee
 - 20% of Nurse Practitioner charts will be reviewed by the Collaborating Physician every month.
- Texas
 - Review at least 10% of medical records monthly.

All Chart Reviews will be documented via the Chart Audit Form Tool.

The provider may present any additional charts they would like to review based on questions about diagnosis or treatment plan.

OpenLoop will retain a copy of any documentation verifying the chart review. Copies of documentation will be retained while the Collaborative Agreement is in effect and for two years after the date the Collaborative Agreement is terminated.



Quality Assurance Meetings

Quality Assurance (QA) meetings are held quarterly unless specific state regulations specify differently. [States with Additional Requirements](#):

- Illinois- Monthly
- Tennessee- Monthly
- Texas- Monthly (for 1 year)

Meetings will be to share information related to patient treatment and care, changes needed in patient care plans, issues related to referrals, and patient care improvement.

QA Meeting Steps

1. Meet with Collaborating Physician Monthly/Quarterly
2. Complete the [Collab QA Meeting Attendance Form](#)

QA meetings/feedback sessions will be documented via the QA meeting google form tool.

Jennifer Harrison will be responsible for setting up the QA meeting based on the collaborating physician's schedule, then adding all NPs that have a collab with the physician to the meeting. The Collab Team will try our best to pair you with the same collab physician for multiple states so that it is easier to conduct QA meetings. The QA shared Calendly link can be found here: [QA shared Calendly link](#)

OpenLoop will retain a copy of any documentation while the Collaborative Agreement is in effect and for two years after the date the Collaborative Agreement is terminated. The day, time or location of any QA meeting may be changed at the prior request of either party with the other's consent as long as the statutory requirements for meetings are met.

Additional QA Items

For additional information regarding QA, chart reviews, sample audit questions, and more, please check out this Notion board that contains in-depth resources. [Provider Quality Assurance and Collaboration Agreement Resources](#)

If access is needed for this Notion page, please reach out to any point of contact listed at the end of this document so that we can have the IT grant this for you.

Jennifer Harrison will be the best point of contact for anything QA related.



Becoming an OpenLoop NP

In order to start assigning collaborative agreements to an NP, they must go through the credentialing and onboarding process first. Our credentialing team will reach out for all required paperwork to get your licenses set up at OpenLoop. After this, you will go through the onboarding process to learn the different platforms. While this is happening, the IT team will be setting up your OpenLoop email, Slack account, and making sure you have access to all systems required. The collab team will NOT start sending collaborative agreements until your OpenLoop email account and Slack account are fully set up. Please be diligent in getting logged in to both of these accounts, as they will hinder your timeline to getting approved collab agreements if not done quickly.

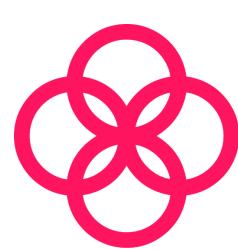
Collaboration Process

After completing credentialing and getting set up on email and Slack with the IT team, this triggers the Collab Team to contact you.

First, an introduction message will be sent via Slack between you, the Collab Team, the Quality Assurance director, and other personnel utilized in OpenLoop's collab process. This gives you an opportunity to meet the people you may utilize for anything collab related. This also gives you an opportunity to inform the collab team of all external collab numbers. After being sent the collab Slack introduction, the collab team may start utilizing your licenses for collaboration agreements.

Collaborative agreements will be sent via DocuSign. The DocuSign will prompt you to input your signature and other necessary information. The collaborating physician will also be sent the same DocuSign where they will enter their information and signature. After BOTH parties have signed, DocuSign will automatically send you a copy for your records. OpenLoop will also maintain a copy for our own records.

After the DocuSign is sent, the collab team member will start a Slack thread between you, the collaborating physician, and the collab team. All information regarding **any** collabs between you and the physician will be included here. This will provide specific information needed to make sure the collaboration agreement becomes activated. This also allows you to get to know who you are collaborating with. **It is very important that you check Slack daily, as there may be outstanding actions needed in order to make the collab live.**



Some states allow collaboration agreements to become active once signed by both parties. Here is a list of states where there is no board reporting component and the collaboration agreement is **active once signed**:

- Connecticut
- Florida (partially)
- Georgia (partially)
- Illinois
- Massachusetts
- Michigan
- Missouri
- New Jersey
- New York
- Ohio (partially)
- Vermont
- Virginia
- Wisconsin

Board Specific Processes

Some states have additional actions that need to be taken in order to get the collaborative agreement approved by the board. Each state has a different process. Please check the section titled "Licensure Information" to find the steps required by each state.

If you are wanting the collab team to assist in submissions to state portals and any additional items needed to get a collab set up, please make sure you fill out the [third party authorization form](#) .

After we receive approval to assist with actions regarding practice authority, we will have you fill out a Google spreadsheet that tracks all of your portal logins so that the collab team can easily access your portals as needed. An example of the spreadsheet looks like this: [NP Portal Login Spreadsheet](#)

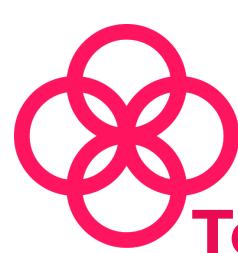
Termination of Collaboration

A collaboration agreement is usually terminated due to the nurse practitioner or the physician leaving OpenLoop. Only one party needs to sign the termination letter for it to become valid: the physician or the NP. **OpenLoop is not responsible for terminating the agreements in the respective boards.**

Some boards only allow the NP to terminate inside the portal, while others



only allow the physician to terminate. Here is a link to the termination cheat sheet that shows who is responsible for terminating the agreement within the portal: [Termination Cheat Sheet](#)



Tool Box

OpenLoop Email

OpenLoop's IT team will set up an OpenLoop email for you upon onboarding. **ALL** collaboration agreements will be sent via Docusign to your OpenLoop email. Please make sure you are checking your OpenLoop email daily for pending collaboration agreements.

Slack

All communication for collaboration agreements will be sent via Slack. The IT team will also make sure you get access to Slack. Please update your Slack profile with your **full name and title**. Slack threads will be started between you, the collaborating physician, and the collab team after the collaboration agreement between you two has been sent. This is an opportunity to ask any questions regarding this specific collab, meet who you are collaborating with, and find step-by-step instructions on how to set up your collab agreement. **It is very important that you check Slack daily.**

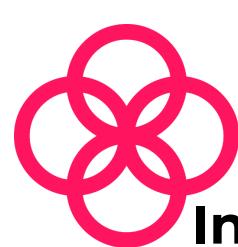
Platforms

Notion Page

[Notion Page](#)

Please utilize this Notion link to access a handful of resources. Here you will find information on protocols, E-trainings for platforms like Healthie, and a breakdown of each active client and what they do. If for some reason you do not have access to Notion, contact Jennifer Harrison or our IT department so they can grant access.

For additional information regarding QA, chart reviews, sample audit questions, and more, please check out this Notion board that contains in-depth resources. [Provider Quality Assurance and Collaboration Agreement Resources](#)



Incident Management

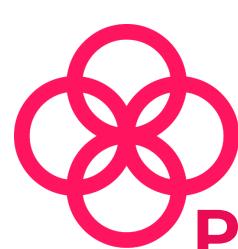
For information regarding incident management and the incident management form, please click this link to scroll through a more in-depth powerpoint.

[Incident Management](#)

Docusign

Please note that **ALL** collaboration agreements will come from Docusign. This will need to be sent to your OpenLoop email for quality assurance purposes. Upon receiving the Docusign, you will be provided the contract from a collab team member who has already filled out the license and board certification information for both the collaborating physician and the NP. The Docusign will prompt you to enter your personal address as well as a signature and date. Once the document is fully signed by **BOTH** parties, Docusign will automatically send you a copy for your records. Please download a copy and keep in your records for tracking purposes. OpenLoop will also maintain a copy of this in our internal systems. It is important to note two things:

- Not all collabs will be live once signed. Some states have additional requirements needed **AFTER** signing the document in order to get it approved by the board. Please refer to "Board Specific Processes" to better understand what else is needed for each state. **Collabs will not be eligible for pay until it is board approved or until we have met the requirements needed by the state** (only a few states only require the document to be signed and internally stored).
- If only one party has signed and the other has not, this document will not be effective. Both the NP and the collaborating physician need to sign the collaboration agreement before this document is finalized. You WILL receive the completed document every single time. If the completed document has not come through, then the other party has not signed yet.



Point of Contacts

Recruitment

- Maximillian Ralston
- Emily Johnson

Credentialing

- Yvonne Mora

Licensing

- Ben Brogger
- Jonathan Werthmuller
- Rachel Cabrera
- Anasofia Nunez Sanchez

Quality Assurance

- Jennifer Harrison

Collab Team

- Arianna Sorrentino
- Rachel Cabrera
- Nikka Untalasco

Collab Reimbursement

- Campbell McKinney
- Mandee Fischer
- Ben Brogger