

CMS Physician/Non-Physician Collaborative Practice Plan Guidelines

The CMS believes that the following guidelines can help to facilitate collaborative practice between physicians and non-physician providers (NPP).

Physicians and NPPs should file collaborative practice plans upon entering into a collaborative practice agreement. These plans should be filed with and approved by the board of medical examiners (BME) and should include:

1. the name of the physician with whom the NPP is collaborating, (the designated physician's scope of practice should include the entire scope of practice of the NPP);
2. protocols describing the recognition, diagnosis and treatment of specified medical conditions;
3. protocols for NPP prescriptive authority should be restricted to the NPP's scope of practice;
4. prescriptive privilege may be extended to include controlled substances;
5. a signed agreement regarding the availability of the collaborating physician or a covering physician who agrees to accept the collaborative practice plan;
6. a quality assurance plan, which shall include components such as:
 - a) routine, periodic chart review and case conferences;
 - b) credentials review which includes educational accomplishments, certifications, additional competence requirements;
 - c) annually updated scope of practice descriptions, which describe the duties of the NPP;
 - d) office based continuous quality improvement program;
 - e) team review of audits by outside (third party) agencies;
 - f) NPP peer review;
 - g) risk management education and protocols;
 - h) patient satisfaction ratings;
7. an emergency treatment plan.
8. physicians shall collaborate with no more than four *off site* NPPs unless it can be proven to the Board of Medical Examiners that quality patient care can be maintained with a different ratio.