

CCA State-by-State Guide to Laws Regarding Nurse Practitioner Prescriptive Authority and Physician Practice						
State	Practice Agreement Required	Physician Proximity Requirement	Physician Meeting Requirement	On-Site/In-person Physician Oversight Required	Quantitative Requirements for Physician Chart Review	Maximum number of NPs with whom a physician may collaborate/supervise.
Alabama	Yes	No	Yes - "the collaborating physician shall visit each approved collaborative practice site not less than quarterly"	Yes - the collaborating physician must be present at the NP's practice site for at least 10% of the NP hours	Yes - 10% of all charts, all adverse outcomes	3 FTE NPs, unless CRNP is employee of Dept. of Public Health or BCN/BME grant exemption
Alaska	No	N/A	N/A	N/A	N/A	N/A
Arizona	No	N/A	N/A	N/A	N/A	N/A
Arkansas	Yes	No	No	No	No	None stated
California	Yes	No	No	No	No	4 prescribing NPs
Colorado	No	N/A	N/A	N/A	N/A	N/A
Connecticut	Yes ¹	No	No	No	No	None stated
Delaware	Yes ²	No	No	No	No	None stated
District of Columbia	No	N/A	N/A	N/A	N/A	N/A
Florida	Yes	Yes - NP's practice site must be within 25 miles of the physician's primary office, or located in a county which is contiguous to the county of the physician's primary office, so long as the distance does not exceed 75 miles	No	No	No	A physician may supervise up to 4 offices, so long as the physician is providing primary health services.
Georgia	Yes	No	No	No	Yes - the collaborating physician must review: (1) 10% of all charts annually, (2) all charts involving prescriptions for controlled substances within 3 months, and (3) all charts associated with adverse outcomes	4, unless (1) In a hospital licensed under Title 31; (2) In any college or university as defined in Code Section 20-8-1; (3) In the Department of Community Health Public Health; (4) In any county board of health; (5) In any free health clinic; (6) In a birthing center; (7) In any entity
Hawaii	No	N/A	N/A	N/A	N/A	N/A
Idaho	No	N/A	N/A	N/A	N/A	N/A
Illinois	Yes	No	Yes - at least once a month	No	Yes - the collaborating physician must periodically review medication orders of controlled substances	None stated
Indiana	Yes	No	No	No	Yes - the collaborating physician must review a random selection of at least 5% of charts and medication orders	None stated
Iowa	No	N/A	N/A	N/A	N/A	N/A
Kansas	Yes	No	No	No	No	None stated
Kentucky	Yes	No	No	No	No	None stated
Louisiana	Yes	No	No	No	No	None stated
Maine	No	N/A	N/A	N/A	N/A	N/A
Maryland	Yes	No	No	No	No	None stated
Massachusetts	Yes	No	No	No	Yes - review of NP general prescriptive practice at least once every three months, and initial prescriptions of schedule II controlled substances must be reviewed within 96 hours	None stated
Michigan	Yes	No	No	No	No	None stated
Minnesota	Yes ³	No	No	No	No	None stated
Mississippi	Yes	No	Yes - meet in person at least once every 3 months	No	Yes - a representative sample of either 10% or 20 charts, whichever is less, every month	None stated
Missouri	Yes	Yes - a limit of 30 or 50 miles from the collaborating physician, depending on the population to whom the NP is providing health care	No	Yes - NP must initially practice for at least one month at same location of collaborating MD	Yes - 10% of all charts; 20% of charts with controlled substance Rx, which may be included in the overall 10%. Documentation submitted to MD at least once/14 days either in person or electronically	3 FTE NPs
Montana	No	N/A	N/A	N/A	N/A	N/A
Nebraska	Yes ⁴	No	No	No	No	None stated
Nevada	No	N/A	N/A	N/A	N/A	N/A
New Hampshire	No	N/A	N/A	N/A	N/A	N/A
New Jersey	Yes	No	No	No	Yes - periodic review (percentage left to MD & NP discretion)	None stated
New Mexico	No	N/A	N/A	N/A	N/A	N/A
New York	Yes ⁵	No	No	No	Yes - at least once every 3 months (percentage left to MD & NP discretion)	4 NPs who are not located in the same office as the physician
North Carolina	Yes	No	Yes - one meeting per month for the first 6 months of the collaborative relationship, then once every 6 months after that	No	No	None stated
North Dakota	Yes	No	Yes - at least once every two months	No	No	None stated
Ohio	Yes	No	Yes - annual review by the supervising physician following a random chart review	No	Yes - annual random chart review by the supervising physician	3 prescribing NPs
Oklahoma	Yes	No	No	No	Yes - collaborating physician must "regularly and routinely review the prescriptive practices and patterns of the advanced practice nurse with prescriptive authority"	2 FTE NPs, up to a maximum of 4 individual NPs
Oregon	No	N/A	N/A	N/A	N/A	N/A
Pennsylvania	Yes	No	Yes - a physician available to a NP on a "regularly scheduled basis"	No	Yes - a physician available on a "regularly scheduled basis" for chart review	None stated
Rhode Island	No	N/A	N/A	N/A	N/A	N/A
South Carolina	Yes	Yes - when the NP is practicing more than 45 miles away from the physician, the board of nursing will review the application to determine if adequate supervision exists	No	No	No	Any more than 3 NPs per physician will trigger a review by the board of nursing to determine if adequate supervision exists
South Dakota	Yes	No	Yes - at least twice a month, one of which must be in person	Yes - physician must be on-site at separate practice locations at least once every 90 days	No	4 FTE NPs
Tennessee	Yes	No	Yes - physician must "visit any remote site" once every 30 days	Yes - physician must "visit any remote site" once every 30 days	Yes - physician must review 20% of all charts every 30 days	None stated
Texas	Yes	No	Yes - physician and NP must meet in person at least monthly for the first 3 years, then quarterly after first 3 years (monthly meetings must still occur via telecommunication) (reduction may occur after 1 year if the NP has practiced with prescriptive authority in 5 out of the past 7 years)	No	Yes - there must be a chart review method specified in the practice agreement between the physician and the NP, but there are no legal requirements concerning the amount or frequency of charts reviewed	7 FTE NPs
Utah	Yes	No	No	No	No	None stated
Vermont	No	N/A	N/A	N/A	N/A	N/A
Virginia	Yes	No	No	No	Yes - periodic chart review, but there are no legal requirements concerning the amount or frequency of charts reviewed	6 NPs
Washington	No	N/A	N/A	N/A	N/A	N/A
West Virginia	Yes	No	Yes - the collaborative agreement must include a "periodic and joint evaluation of prescriptive practice"	No	Yes - the collaborative agreement must include a "periodic and joint evaluation of prescriptive practice"	None stated
Wisconsin	Yes	No	No	No	No	None stated
Wyoming	No	N/A	N/A	N/A	N/A	N/A

1: After completion of three years of collaborative practice, an NP may obtain independent prescriptive authority and practice without a formal collaborative agreement with a physician.
 2: DE grants NPs nominal independent practice and prescriptive authority, but still requires them to obtain a minimal collaborative agreement, which is simply a document that outlines the process for consultation and referral with other health care providers.
 3: Effective January 1, 2015, no physician involvement required.
 4: NP may seek waiver if practice is in georaphic area with a health care services shortage.
 5: Effective January 1, 2015, New York will no longer require a written physician practice agreement for NPs who have practiced for more than 3600 hours, but will still require collaboration with a physician.