

**REPORT OF THE  
DEPARTMENT OF HEALTH PROFESSIONALS  
BOARD OF NURSING**

**Report on the Practice Locations  
and Schedules of Drugs Authorized  
for Nurse Practitioners with  
Prescriptive Authority**

**TO THE GOVERNOR AND  
THE GENERAL ASSEMBLY OF VIRGINIA**



**HOUSE DOCUMENT NO. 23**

**COMMONWEALTH OF VIRGINIA  
RICHMOND  
2004**



# COMMONWEALTH of VIRGINIA

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October 5, 2004

TO: The Honorable Mark R. Warner  
Governor of the Commonwealth of Virginia

The Members of the General Assembly of Virginia

It is our privilege to present this report which constitutes the response of the Board of Nursing to the request contained in House Joint Resolution 205 of the 2004 Session of the General Assembly.

The report provides information on the practice locations and schedules of drugs authorized for nurse practitioners with prescriptive authority. As requested by the resolution, the Board of Nursing has collected the information shown in the attached spread sheets and provided an executive summary. The Board has also revised the practice agreement signed by a nurse practitioner and a supervising physician to collect and store that information in a database for future access. The final report is available to the public on the website for the Department of Health Professions at <http://www.dhp.virginia.gov>.

The Board acknowledges the work of the staff of the Department who conducted the research and prepared the final report.

Handwritten signature of Robert A. Nebiker in black ink.

Robert A. Nebiker  
Director  
Department of Health Professions

Handwritten signature of Jay P. Douglas in black ink.

Jay P. Douglas, R.N.  
Executive Director  
Board of Nursing

**RESPONSE OF THE VIRGINIA BOARD OF NURSING  
TO HOUSE JOINT RESOLUTION 205 (2004)**

**PRESCRIPTIVE AUTHORITY OF NURSE PRACTITIONERS**

**Executive Summary**

**Introduction:**

House Joint Resolution 205, adopted by the 2004 General Assembly, requested that the Board of Nursing collect information on nurse practitioner prescriptive authority. Specifically, the Board was asked to collect information regarding the (i) practice locations of nurse practitioners and (ii) number of nurse practitioners with the authority to prescribe each Schedule of controlled substances and devices. An executive summary and the information collected was to be submitted no later than October 1, 2004 to the Joint Commission on Health Care, the Senate Committee on Education and Health, and the House Committee on Health, Welfare and Institutions.

**Background:**

In Virginia, nurse practitioners are jointly licensed by the Boards of Medicine and Nursing in several categories of specialty practice, including nurse anesthetists and nurse midwives. Licensed nurse practitioners, with the exception of nurse anesthetists, are eligible to prescribe controlled substances, if they meet certain educational criteria, have a written practice agreement with a supervising physician for prescriptive authority and have obtained an additional license for prescriptive authority. Since July 1, 2003, nurse practitioners with prescriptive authority have been authorized by law to prescribe Schedules III through VI. Though legally authorized to prescribe scheduled drugs (with the exception of Schedule II), nurse practitioners must have a written agreement with the supervising physician that specifies which schedules they are permitted to prescribe in their particular practices.

In its study of access to primary care in Virginia, the Joint Commission on Health Care found that information was not available on where nurse practitioners are practicing and on what schedules of controlled substances they can prescribe. Therefore, House Joint Resolution 205 was introduced to request the Board to collect such data and report to the 2005 General Assembly.

In order to collect information on practice locations and the schedules of controlled substances nurse practitioners are authorized to prescribe, the Board sent a survey to all nurse practitioners with prescriptive authority. Those who did not respond to the initial request were sent a follow-up survey and letter. In addition, the Virginia Council of Nurse

Practitioners was asked to publicize the survey and urge its members to cooperate in providing information.

### **Results of Survey:**

There are 4,899 persons who hold a Virginia license as a nurse practitioner. Approximately 1,530 of those are certified registered nurse anesthetists (CRNA's), who are not authorized to prescribe. Of the 2,538 who have obtained prescriptive authority, the Board received a 70% response rate with 1,764 surveys returned and entered in a data base.

*Practice locations:* Nurse practitioners were asked to identify their primary practice location by address and zip code. The responses were then grouped by the three-digit prefix of each zip code into 16 regions of the state. Based on the 70% survey response, the Board was able to project the number of nurse practitioners in each of the 16 regions and out-of-state locations to account for the total of 2,538 persons licensed in Virginia and to arrive at a ratio of licensees per population.

By comparing the total population listed for the zip codes in each of the regions with the number of nurse practitioners who identified the primary practice address within those zip codes, we were able to establish an average ratio of nurse practitioners with prescriptive authority to the population. Statewide, the average was one nurse practitioner to 2,789 people. The highest concentration of nurse practitioners was in the Charlottesville area with a ratio of 1:1,232, followed by the Richmond area with a ratio of 1:2,388. Both areas include major medical centers where a large number of nurse practitioners are employed. Other areas of the state with a better than average ratio included Culpeper at 1:2,515 and Bristol at 1:2,495.

Other areas had a higher than average ratio of population to nurse practitioner, but not significantly so. For example, in the Grundy district, the ratio was 1:3,026, compared with the state average of 1:2,789. In Northern Virginia, the ratio was 1:2,930, and in the Norfolk area, the ratio was 1:3,083 – similar to the ratio in Wytheville at 1:3,040. The region with the highest ratio of population to each nurse practitioner was Petersburg with 1:6,008.

*Schedules of controlled substances authorized to prescribe:* On the survey, nurse practitioners were asked to check those schedules of drugs that they were authorized in their practice agreements to prescribe. Of those responding, the largest number indicated authority to prescribe all schedules authorized by the Code of Virginia - Schedules III through VI (844 of the 1,764). Of the remaining number, 350 only prescribe Schedule VI (which includes the majority of prescribed medications – such as antibiotic, anti-inflammatory, and anti-allergy); 242 listed Schedules IV through VI (some noted that they had applied to the Drug Enforcement Administration for approval to also prescribe Schedule III); 168 listed Schedules V and VI. There were 23 persons who commented that they had current prescriptive authority but are not currently working, and 53 who did not fall into any of the categories listed. Among that final group, there were some who are working but not currently prescribing, others who listed only one schedule (other than

Schedule VI), others who listed a combination of schedules differently from the manner in which the information was sorted, and some who failed to complete that portion of the survey.

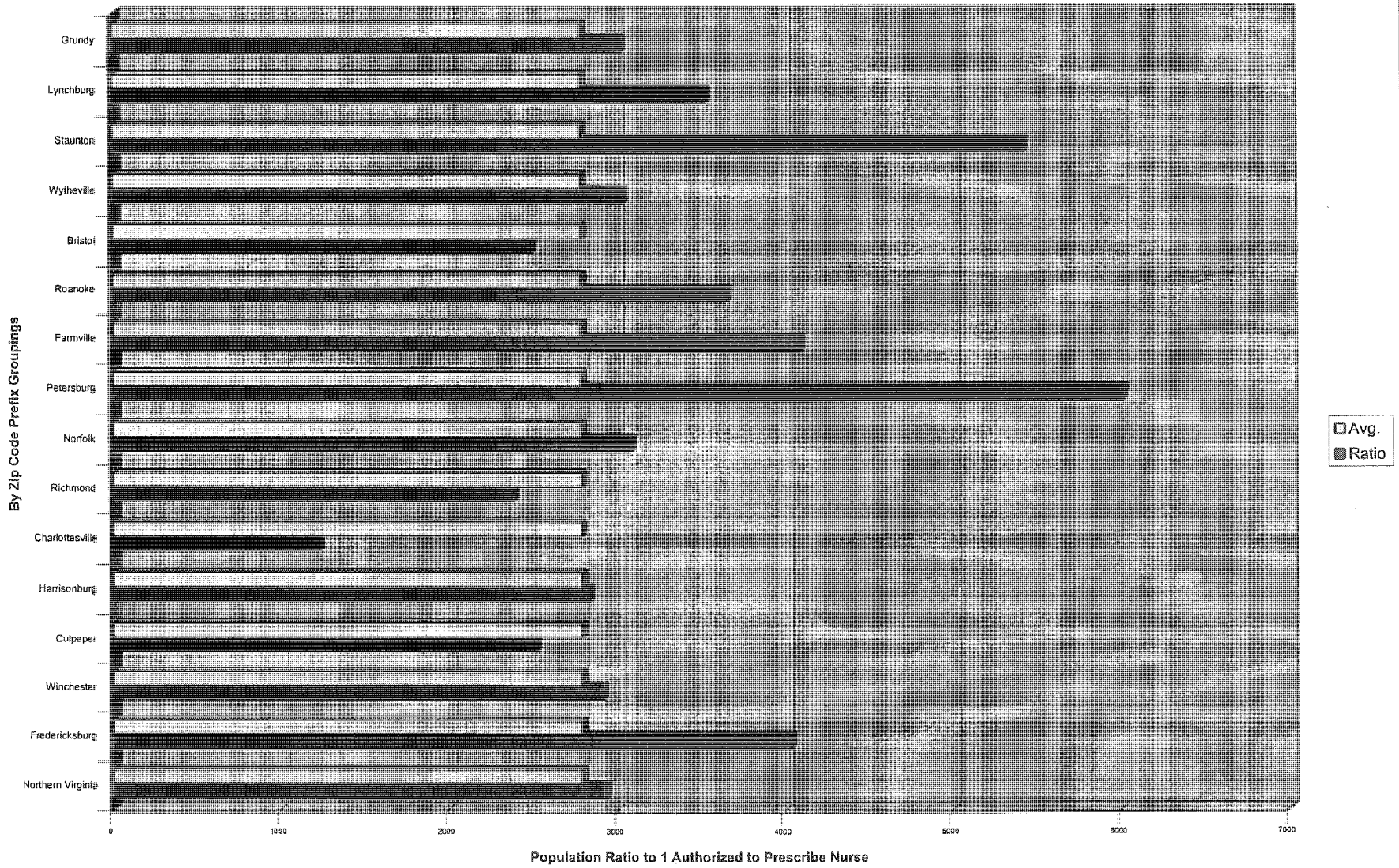
Continuation of data collection: Since the collection of data on practice locations and schedules of controlled substances for the purpose of responding to HJR 205, the Board of Nursing has revised the practice agreement to request that information of all applicants for initial authorization and resubmission of agreements following a change in employment or in physician supervision. Data collected on practice locations and schedules of controlled substances authorized to prescribe will be maintained in an electronic format and will be accessible for on-going review.

Attached are the chart of data collected pursuant to HJR 205 and a graph of the distribution of nurse practitioners with prescriptive authority in Virginia.

House Joint Resolution No. 205 Zip Code Area - Prescriptive Authority	Practice Address Zip Code Prefix	9/8/2004 Surveys Received	%	1. Sch. III-VI	2. Sch. IV-VI	3. Sch. V-VI	4. Sch. VI	5. Other	Not Currently Practicing	PA Proj. Dist.	Virginia 2000 Census Population	Estm. Ratio
Northern Virginia & Surrounding Area	201, 220, 221, 222, 223	435	25%	233	60	41	71	26	4	635	1,860,722	1:2,930
Fredericksburg & Surrounding Area	224, 225	46	3%	23	6	3	11	1	2	76	306,458	1:4,032
Winchester & Surrounding Area	226	34	2%	19	3	6	4	0	2	51	148,633	1:2,914
Culpeper & Surrounding Area	227	16	1%	10	0	1	4	1	0	25	62,867	1:2,515
Harrisonburg & Surrounding Area	228	40	2%	24	7	3	5	1	0	51	144,494	1:2,833
Charlottesville & Surrounding Area	229	123	7%	58	19	16	26	3	1	178	219,335	1:1,232
Richmond & Surrounding Area	230, 231, 232	280	16%	108	47	31	87	2	5	406	969,638	1:2,388
Norfolk & Surrounding Area	233, 234, 235, 236, 237	334	19%	172	39	34	75	9	5	482	1,485,971	1:3,083
Petersburg & Surrounding Area	238	41	2%	20	7	5	8	0	1	51	306,417	1:6,008
Farmville & Surrounding Area	239	22	1%	8	0	3	8	2	1	25	102,341	1:4,094
Roanoke & Surrounding Area	240, 241	109	6%	52	24	8	20	3	2	152	555,248	1:3,653
Bristol & Surrounding Area	242	50	3%	27	7	3	11	2	0	76	189,585	1:2,495
Wytheville & Surrounding Area	243	34	2%	17	6	4	7	0	0	51	155,059	1:3,040
Staunton & Surrounding Area	244	20	1%	12	4	0	4	0	0	25	135,593	1:5,424
Lynchburg & Surrounding Area	245	72	4%	47	9	8	6	2	0	102	360,240	1:3,532
Grundy & Surrounding Area	246	24	1%	14	4	2	3	1	0	25	75,657	1:3,026
Out of State Practice Zip Code		84	5%	N/A	N/A	N/A	N/A	N/A	N/A	127	N/A	N/A
<b>Total Survey Responses</b>		<b>1,764</b>	<b>100%</b>	<b>844</b>	<b>242</b>	<b>168</b>	<b>350</b>	<b>53</b>	<b>23</b>	<b>2,538</b>	<b>7,078,258</b>	<b>1:2,789</b>
Authorized to Prescribe License Count:	(2,538) 70% Survey Response Rate		Average ratio of Authorized to Prescribe to Population = 1:2,789							2,538		

Prepared by Virginia Department of Health Professions in compliance with House Joint Resolution No. 205 requiring Board of Nursing to collect information regarding the practice location of nurse practitioners with the authority to prescribe.

### Nursing Survey 2004 Authorized to Prescribe



2004 SESSION

HOUSE SUBSTITUTE

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HOUSE JOINT RESOLUTION NO. 205  
FLOOR AMENDMENT IN THE NATURE OF A SUBSTITUTE  
(Proposed by Delegate Bryant  
on February 17, 2004)  
(Patron Prior to Substitute—Delegate Bryant)

Requesting the Board of Nursing to collect information on nurse practitioner prescriptive authority.  
Report.

WHEREAS, licensed nurse practitioners, pursuant to § 54.1-2957.01 of the Code of Virginia, other than certified registered nurse anesthetists, have the authority to prescribe controlled substances and devices as set forth in Chapter 34 (§ 54.1-3400 et seq.) of Title 54.1; and

WHEREAS, House Bill 818 (2000) granted nurse practitioners greater authority to prescribe controlled substances and devices according to the following schedule: (i) Schedules V and VI controlled substances on and after July 1, 2000; (ii) Schedules IV through VI on and after January 1, 2002; and (iii) Schedules III through VI controlled substances on and after July 1, 2003; and

WHEREAS, with the aging of the population in Virginia and the United States, the demand for health care providers is increasing; and

WHEREAS, it has been found that there are Virginia communities that do not have adequate access to primary care; and

WHEREAS, some research has concluded that providing appropriate access to primary care will require the increased use of physician extenders, including nurse practitioners; and

WHEREAS, the Joint Commission on Health Care, in its 2003 report titled "Nurse Practitioner Prescriptive Authority," found that the Board of Nursing does not collect information on the practice locations of nurse practitioners and that the collection of only the home address does not allow for the evaluation of where nurse practitioners are practicing; and

WHEREAS, having information regarding the practice location of nurse practitioners would allow a comparison to primary health professional shortage areas or medically underserved areas; and

WHEREAS, information concerning written practice agreements between nurse practitioners and physicians is not automated, making the Board of Nursing unable to provide information regarding the number of nurse practitioners authorized to prescribe at the various Schedule levels; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Board of Nursing be requested to collect information on nurse practitioner prescriptive authority. The Board shall collect information regarding the (i) practice locations of nurse practitioners and (ii) number of nurse practitioners with the authority to prescribe each Schedule of controlled substances and devices.

All agencies of the Commonwealth shall provide assistance to the Board of Nursing in collecting the information, upon request.

The Board of Nursing shall submit to the Joint Commission on Health Care, the Senate Committee on Education and Health, and the House Committee on Health, Welfare and Institutions an executive summary and the information collected on nurse practitioner prescriptive authority by no later than October 1, 2004.

The Board of Nursing shall submit to the Division of Legislative Automated Systems an executive summary and the information collected on nurse practitioner prescriptive authority no later than the first day of the 2005 Regular Session of the General Assembly. The executive summary shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.

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2004 SESSION

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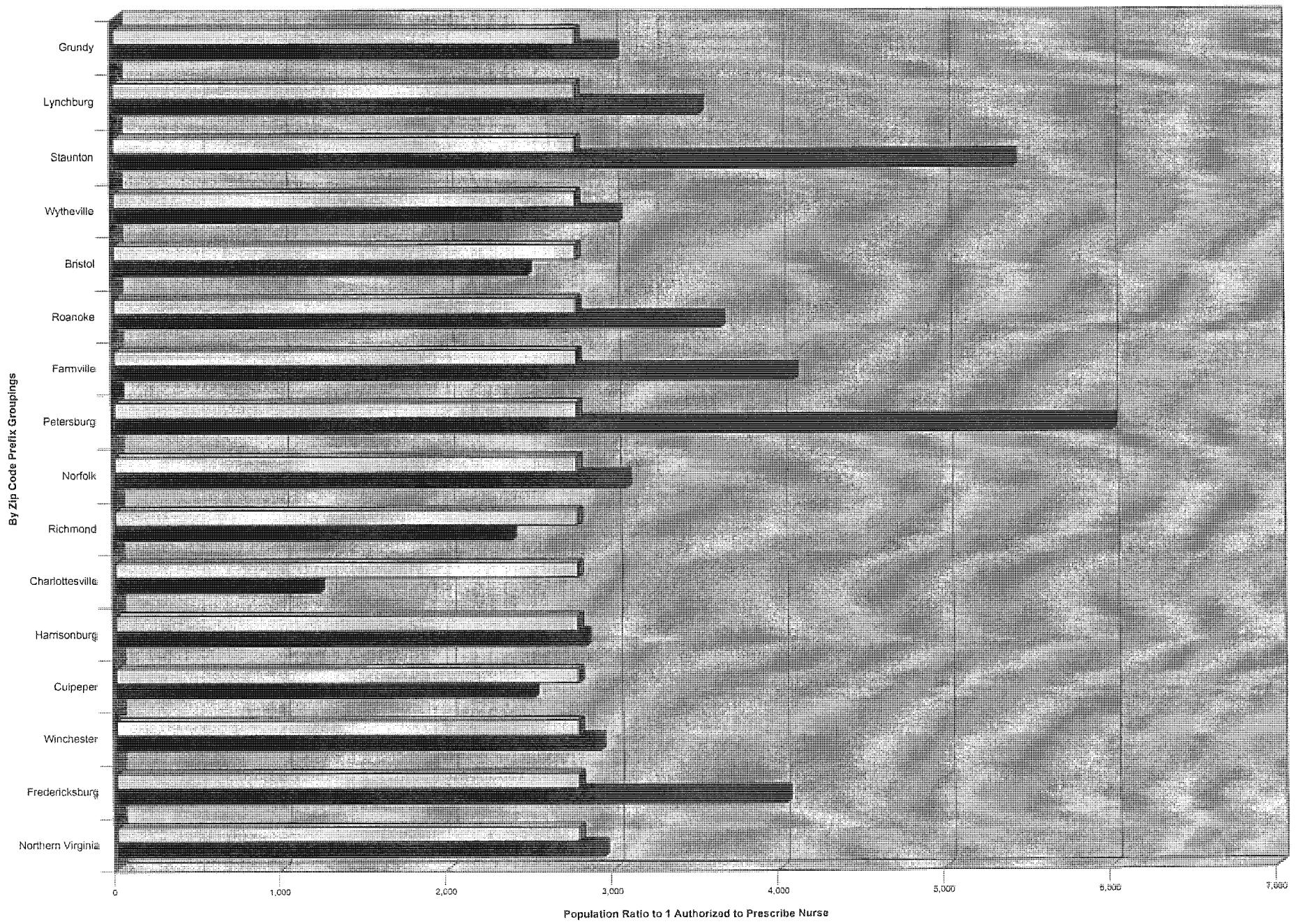
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□ Avg.  
■ Ratio