

Preparation for Practice Primer

A Step-by-Step Guide for Credentialing Washington State ARNPs
Jeanne Boudrieau, MSN, ARNP, FNP, CCRN
November 15, 2009

ARNP licensure and prescriptive authority is granted by the Washington State Nursing Care Quality Assurance Commission. Follow the four steps outlined below to secure and maintain licensure and prescriptive authority in Washington State. Contact information for the Commission is included below.

The ability to prescribe medicines for patients is an integral part of ARNP practice. The steps outlined below will lead to acquiring the credentials necessary to meet both Washington State and federal requirements to achieve licensure including prescriptive authority. The Washington Administrative Code (WAC) web sites addressing the requirements for prescriptive authority are referenced.

ARNPs United of Washington State (AUWS) plays a pivotal role in supporting and lobbying for independent practice. AUWS has collaborated with a coalition of nursing organizations to pass legislation that has resulted in fully autonomous practice in Washington State including prescriptive authority for legend and controlled substances. The coalition membership includes AUWS, the Washington State Nurses Association, Association for Advanced Practice Psychiatric Nurses, the Washington chapter of the American College of Nurse-Midwives and the Washington Association of Nurse Anesthetists. Thank you to the coalition members for their diligence in achieving fully autonomous practice.

Step 1: Obtain and Maintain Active RN Licensure

License must be renewed annually on or before your birthday. Continuing Education *is not* required to maintain RN licensure. Washington State ARNPs must maintain an active RN and ARNP license.

See the Washington State Department of Health website (www.doh.wa.gov) for obtaining/renewing an RN license and select "Licensing/Certification".

Step 2: Obtain and Maintain Active ARNP Licensure and Prescriptive Authority

The application for licensure must be made within one year of graduation for new graduates. Applicants from other states or jurisdictions must meet specific criteria as well. National certification from a commission approved certifying body is required at the time of application and must be continuously maintained for an ARNP license to be valid (see C below). An ARNP license must be renewed every two years on or before your birthday.

Prescriptive authority is granted, separately from ARNP licensure, to people who are licensed as ARNPs and meet specified requirements. Prescriptive authority includes legend and scheduled drugs. To prescribe scheduled drugs the ARNP must also register with the Drug Enforcement Administration (see DEA section, Step 3).

An overview of the requirements for ARNP licensure beginning with Scope of Practice can be found at the following web site starting with WAC (WA Administrative Code) section:
<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-300>

Specific requirements for the ARNP application for new graduates are at the following web site:
<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-340>

Eligibility for prescriptive authority requires thirty (30) hours in pharmacotherapeutics. The Commission considers all new graduates of advanced practice nursing programs to be eligible for

prescriptive authority even if the course was taken more than 2 years before graduation. If a graduate does not apply for a license with prescriptive authority within 2 years of graduation then another 30 hours of pharmacology will be required. An overview of the requirements for prescriptive authority can be found at:

<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-410>

A. Continuing Education *is* required for renewal of your ARNP license

From the website cited below: “Advanced Registered Nurse Practitioners are required to complete thirty (30) hours every two years in their area of specialty. See WAC 246-840-360. An additional fifteen (15) hours in pharmacotherapeutics related to licensee’s scope of practice is required if you have prescriptive authority. See [WAC 246-840-450](#)”.

<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-451>

The continuing education must be obtained within the renewal period in each area of certification. ARNPs who have certification in more than one related area of practice may count the CE hours for more than one certification. A signed declaration on commission forms must be submitted with the renewal application.

B. Attestation of Advanced Nursing Practice Requirement

250 hours of independent clinical practice in the ARNP role within the last two years is required for re-licensure. Clinical practice includes the formulation, implementation and evaluation of plans of care for patients for whom ARNPs are responsible. Clinical practice includes teaching advanced nursing practice if the faculty member is providing patient care or serving as a preceptor. This does not include faculty evaluation of students in the clinical area if the faculty is not providing the patient care. Follow the link below to view the full text and download the Attestation Form.

CE and Practice Attestation Form:

<http://www.doh.wa.gov/hsqa/Professions/Nursing/documents/arnpattest.pdf>

C. National Certification Requirement

National certification from a commission approved accredited certifying body in the area of licensure is required to obtain and maintain licensure in Washington State. Should the certification lapse, licensure is considered lapsed. You *must* meet the practice and continuing education requirements of your national certifying body *as well as* those for state licensure.

Certification and Certification Program Requirements:

<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-304>

Special Note to Washington State CNMs

The American Midwifery Certification Board (formerly the ACNM Certification Council) states:

“If you were certified before January 1, 1996 your certificate has no expiration date and is valid for life. However, if you were certified after January 1, 1996 your certificate is valid for eight years. At the end of the eight-year cycle, you must have complied with the American Midwifery Certification Board’s Certificate Maintenance Program (CMP) to have your certificate renewed for the next eight years.”

See www.amcbmidwife.org for more information.

Nursing Commission Customer Service

Contact information for customer service for the Washington State Department of Health HPQA (Health Professions Quality Assurance) Office is below.

Walk in Counter Hours of Operation: 8:00 am - 4:30 pm Monday - Friday, excluding state holidays.

Physical Location:
 310 Israel Rd
 Tumwater WA 98501

Email: hpqa.csc@doh.wa.gov
Phone: 360.236.4700
Fax: 360.236.4818

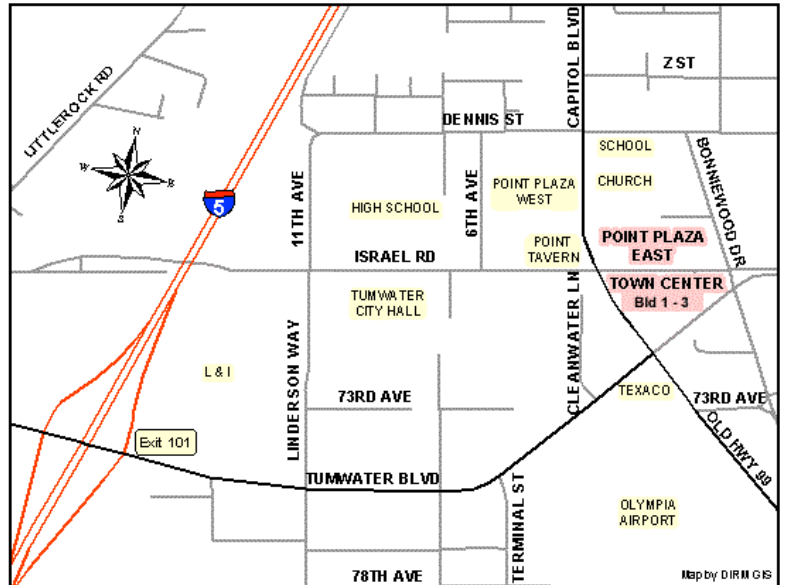
For Correspondence With Fees	For Correspondence Without Fees
Health Professions Quality Assurance Customer Service Center PO Box 1099 Olympia WA 98507-1099	Health Professions Quality Assurance Customer Service Center PO Box 47865 Olympia WA 98504

If you are traveling **South** on I-5 (from Seattle or Tacoma):

1. Take I-5 South to Exit 101 (Note: not Highway 101 - Ocean Beaches)
2. Turn **left** at the stop light onto Tumwater Boulevard
3. Go to the second traffic light and turn **left** onto Capital Boulevard
4. Move to right lane, turn **right** on Israel Road
5. After the US Postal Office, Point Plaza will be on your **left**.

If you are traveling **North** on I-5 (from Portland or Centralia):

1. Take I-5 North to Exit 101. (Stay in right hand lane)
2. Turn **right** at the stop sign onto Tumwater Boulevard
3. Go to the second traffic light and turn **left** onto Capital Boulevard
4. Move to right lane, turn **right** on Israel Road
5. After the US Postal Office, Point Plaza will be on your **left**.



Step 3: Obtain a Drug Enforcement Administration (DEA) Registration

Registration with the DEA is required to prescribe scheduled drugs and is administered by the US Department of Justice. The current fee (as of 11/1/09) is \$551 for the 3 year registration period. Initial registration can be made online or by mail but a paper application can only be obtained by writing to:

Drug Enforcement Administration
 Attn: ODR
 PO Box 2639
 Springfield, VA 22152-2639

DEA Homepage:

<http://www.deadiversion.usdoj.gov/>

Application and renewal forms for DEA registration are available at:

http://www.deadiversion.usdoj.gov/drugreg/reg_apps/onlineforms_new.htm

The fee schedule is available at:

http://www.deadiversion.usdoj.gov/pubs/pressrel/fees_083006.htm

DEA Local Contact information:

Seattle Field Division
400 2nd Avenue West
Seattle, WA 98119

Diversion Number: 206.553.5990
Diversion Fax: 206.553.7757
Diversion Program Manager Fax: 206.553.1576

Registration Numbers Customer Service (Divisions within the Seattle Office)

Serving Alaska & Washington: 888.219.1418 (Edie Chelius)
Serving Idaho & Oregon: 888.219.4261

Step 4: Obtain a “NPI” Number: National Provider Identifier Number

This is a unique number assigned by the Federal Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), National Plan and Provider Enumeration System (NPES). This number does not replace DEA registration and is essential for billing purposes.

http://www.cms.hhs.gov/NationalProvIdentStand/01_Overview.asp#TopOfPage

Acquiring a NPI number is free, with application available on-line. Should you not receive your NPI number within 15 days, be sure to check your SPAM folder. Contact phone number for the NPI “Enumerator” is at 800.465.3203.

Frequently Asked Questions (FAQs)

1. Refills of Controlled Substances according to WA State Law (RCW):

From the website cited below “(d) Except when dispensed directly by a practitioner authorized to prescribe or administer a controlled substance, other than a pharmacy, to an ultimate user, a substance included in Schedule III or IV, which is a prescription drug as determined under RCW [69.04.560](#), may not be dispensed without a written or oral prescription of a practitioner. Any oral prescription must be promptly reduced to writing. The prescription shall not be filled or refilled more than six months after the date thereof or be refilled more than five times, unless renewed by the practitioner. A substance included in Schedule II may not be dispensed without the written prescription of a practitioner.

See full RCW at: <http://apps.leg.wa.gov:80/RCW/default.aspx?cite=69.50.308>

2. Issuance of Multiple Prescriptions / Refills of Schedule II Controlled Substances (Federal Law):

A practitioner may provide individual patients with multiple prescriptions for the same schedule II controlled substance to be filled sequentially. The combined effect of these multiple prescriptions is to allow the patient to receive, over time, up to a 90-day supply of that controlled substance. Federal regulations have always required that all prescriptions for controlled substances “be dated as of, and signed on, the day when issued.” **21 CFR 1306.05(a)**. Prescriptions should note the date on which it is to be filled, e.g. ‘Do not fill until...’ This rule does not require individual practitioners to issue multiple prescriptions or to see their patients only once every 90 days. This rule became effective on December 19, 2007.

Section 1306.05: http://www.deadiversion.usdoj.gov/21cfr/cfr/1306/1306_05.htm

3. Washington State ARNP Scope of Practice:

- a. See RCWs of Nursing Practice Activities per WA State Law RCW 18.79.250:
<http://apps.leg.wa.gov/RCW/default.aspx?cite=18.79.250>
- b. Nurse Practice Act per WA State DOH can be found at:
<http://apps.leg.wa.gov/RCW/default.aspx?cite=18.79>

4. Planning for Renewals and Licensure, Develop a Tracking System:

I recommend setting up an electronic or tickler file to ensure maintenance of certification, licensure, and CE in addition to planning for the fees required. Negotiate the fees and time for these practice essentials into your provider contracts whenever possible. In the event you pay the costs yourself, be sure to track and deduct them on your Federal Income Taxes. There are a few different ways to accomplish this, either as an employee, an independent contractor or as a business owner. To learn more about this topic seek professional accounting and/or tax advice.

5. Keep your file current at your place of practice:

Forward copies of licenses, malpractice insurance certificate and certification renewals to your business office manager. In the event of an inspection, you will want to have current documents readily available.

6. Malpractice and Liability Insurance:

It is your responsibility to ensure your coverage. Should your employer pay your premiums, be sure to obtain a copy of the face sheet. Ensure the coverage dates are current and the coverage acceptable and consistent with your requirements. Some ARNPs prefer to carry their own policies in addition to an employer paid policy. Seek legal counsel if you have questions. Become fluent in protecting your assets. Helpful resources are the books by Carolyn Buppert, NP, JD and www.nso.com (Nursing Service Organization, an ARNP underwriter).

7. Consider Certifications: American Heart Association, BLS, PALS, ACLS, etc:

Consider acquiring certification if your practice may require you to function as a team leader or member in an emergency situation where medicines/oxygen may need to be administered (“prescribed”). Safeguard your practice and patients. Interact with EMS and Emergency Service personnel with confidence. Certifications can be perceived as safeguarding public trust, can improve outcomes and can increase your value to your patients and your organization.

8. The Decision to Prescribe...

The choice to prescribe legend and controlled substances and/or accept or create a position where prescribing scheduled medicines may be an integral part of the patient’s treatment plan is an important personal and professional decision. Education, training, practice patterns, provider experience(s), and practice setting are some of the influences that shape our choices. Louise Kaplan, PhD, ARNP and Marie-Annette Brown, PhD, ARNP in 2007 published the results of a study entitled “The Transition of Nurse Practitioners to Changes in Prescriptive Authority” in the [Journal of Nursing Scholarship, Second quarter volume 39; issue 2, pages 184-190](#). Be sure to read the full text to gain a richer understanding of the issues surrounding this complex and important decision.

This Preparation for Practice Primer is intended to assist you in developing and maintaining a thorough and practical understanding of Washington State ARNP prescriptive authority and the credentialing process. Look to ARNPs United of Washington State (AUWS) for further assistance with questions or concerns.

Membership in AUWS supports efforts that broaden and maintain ARNP scope of practice thus improving access to care for patients. Receive the monthly *ARNP Care* newsletter to stay informed of legislative and other activities pertinent to ARNP practice. AUWS contact information can be found on the header of this document, via the website at www.auws.org , or by email at au@auws.org.

Special Thanks to ARNPs United Board of Directors Members: Louise Kaplan, PhD, ARNP; Kristi Farrell, ARNP, FNP; Bob Smithing, MSN, ARNP; Ann Darlington, CNM, ARNP and Tracy Kiele, Assistant to the Board for their contributions, careful editing and suggestions.

