



WHAT IS AN ADVANCED PRACTICE REGISTERED NURSE (APRN)?

- APRNs are licensed nurses who have a graduate degree and certification that prepares them to perform physical exams, diagnose and treat illnesses, order and interpret tests, give advice on preventive health care, and write prescriptions.
- Newly graduated APRNs are required to have a collaborative agreement with a licensed physician; however, the physician does not need to be present in the facility at the time an APRN renders care. APRNs in Illinois may work without a written collaborative agreement once they have worked 4,000 hours and obtained 250 hours of continuing education/training after certification.
- A collaborating physician may delegate prescriptive authority to an APRN in the written collaborative agreement. This authority may include prescription of, selection of, orders for, administration of, storage of, acceptance of samples of, and dispensing over the counter medications, legend drugs, medical gases, and controlled substances categorized as any Schedule III through V controlled substances. The collaborating physician must have a valid Illinois controlled substances license and federal registration to delegate authority to prescribe delegated controlled substances. Any Schedule II controlled substance prescription must be limited to no more than a 30-day supply, with any continuation authorized only after prior approval of the collaborating physician.
- APRNs may apply for full practice authority once reaching the hours listed above. Full practice authority allows an APRN to prescribe without a written collaborative agreement in all practice settings, prescribe both legend drugs and Schedule II-V controlled substances. Schedule II narcotics and benzodiazepines may only be prescribed in consultation with a physician; the consultation relationship must be reported in the Prescription Monitoring Program. However, effective January 1, 2024, APRNs with full practice authority will be able to prescribe up to a 120-day supply of benzodiazepines without a consultation relationship with a physician; thereafter, continued prescription of benzodiazepines shall require a consultation with a physician.
- There are no stipulations that limit the number of APRNs with whom a physician may collaborate.

WHAT IS A PHYSICIAN ASSISTANT (PA)?

- PAs are medical providers who are certified and licensed to practice medicine with a physician collaboration. PAs perform physical exams, diagnose and treat illnesses, order and interpret tests, give advice on preventive health care, and write prescriptions.
- A written collaborative agreement describes the working relationship of the PA and collaborating physician. Depending on the practice, complexity of the patient population, and experience of each PA, the frequency of consultation may be once monthly or, as appropriate, more often. The physician does not need to be present in the facility at the time a PA renders care.
- A physician assistant may only prescribe or dispense prescriptions or orders for drugs and medical supplies within the scope of practice of the collaborating physician. A collaborating physician may, but is not required to delegate limited prescriptive authority to a physician assistant. This authority may include prescription and dispensing of legend drugs and controlled substances categorized as Schedule II, III, IV, or V controlled substances. Collaborating physician must have a valid license and registration with the DEA.
- One physician is allowed to collaborate with up to seven PAs; however, in Health Professional Shortage Areas (HPSAs) greater than or equal to 12, physicians may collaborate with as many PAs as appropriate.
- A law signed in May 2023, effective January 1, 2024, provides that any PA required to enter into a written collaborative agreement with a collaborating physician is authorized to continue to practice for up to 90 days after the termination of that written collaborative agreement, provided the physician assistant seeks any necessary collaboration and refers patients who require services beyond the training and experience of the PA. It also mandates that PAs who work in a Federally Qualified Health Centers are exempt from specified collaborative ratio restriction requirements. The updated law adds PAs providing services in Federally Qualified Health Centers to provisions that authorize certain PAs to provide services without a written collaborative agreement and to prescribe certain controlled substances.

APRNs and PAs are both a Medicaid and Medicare billable provider type. Once they are added to the Medicaid enrollment system (IMPACT) they submit claims using their own NPI number.

DID YOU KNOW?

"APRN" is the official designation that includes the following specialties: certified nurse practitioner (CNP), certified nurse midwife (CNM), clinical nurse specialist (CNS), and certified nurse anesthetist (CRNAs). While the terms "mid-level provider" and "physician extender" are sometimes used to refer to either APRNs or PAs, such terms do not accurately reflect their scope of practice and expertise and should be avoided when referring to these highly skilled health care providers.