From: Chris Clarke
To: Chris Clarke

Subject: [External] THA's Nurse Practice Act Clarification Enacted as Public Chapter 12

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TO:

Chief Executive Officers
Chief Operating Officers
Chief Nursing Officers
Government Affairs Contacts
Chief Legal Officers/General Counsel

FROM:

Chris Clarke, Senior Vice President, Clinical Services

THA'S NURSE PRACTICE ACT CLARIFICATION ENACTED AS PUBLIC CHAPTER 12

Last week, Governor Bill Lee signed THA's legislation to clarify a portion of Tennessee's Nurse Practice Act related to assessments by registered nurses (RN) to determine if an emergency medical condition is present.— SB317 by Sen. Shane Reeves (R-Murfreesboro) / HB199 by Rep. Kevin Vaughan (R-Collierville).

The legislation now has been enacted as Public Chapter 12.

The bill was amended to address minor concerns from the Tennessee Department of Health (TDH) and other stakeholders, while preserving the intent of the original bill.

This legislation was necessary to allow in statute that patient assessments performed by a qualified registered nurse (RN) to determine if an emergency medical condition exists are not prohibited as a medical diagnosis.

THA and some member hospitals and health systems made a trip to Washington, D.C., to meet with CMS officials in 2018 to address the increase in EMTALA citations and seek solutions to the interpretation by CMS Region IV office that the Tennessee Nurse Practice Act restricted RNs from performing such assessments.

Such clarification is consistent with longstanding practice in hospitals between nurses and physicians and does not impact or relate to other scope of practice discussions within the medical community.

THA will share the public chapter with CMS and TDH to address their previously stated concerns.

THA plans additional education for members to ensure appropriate implementation of the new law in the coming weeks. Hospitals should carefully review their current policies and protocols to ensure compliance with the federal requirements under EMTALA and with the revisions to the Tennessee Nurse Practice Act.

Specifically, hospitals should ensure "qualified registered nurses" have explicit training and competency documented to perform this function, work under an approved protocol with a collaborative working relationship with a physician and are individually named and approved by the hospital's governing body. The protocols must include concurrence by a physician in determining if an emergency medical condition exists and documentation of that concurrence and decision in the patient's record.

For additional information or questions, contact me at 615-401-7437, cclarke@tha.com.

