

FPA FAQs

*****If you are an applicant from another state, please contact the APRN Department through the Nurse Portal Message Center PRIOR TO submitting an application for full independent practice to determine eligibility.*****

1. Who is serving on the committee that will be reviewing applications?
 - a. The Full Independent Practice Credentialing Committee (FIPCC) is comprised of 4 APRNs and 4 physicians. The list of members can be found on the [FIPCC website](#).
2. Do I need to request my national certification be sent to ASBN when I apply for full practice authority?
 - a. No, it is not required to submit for full practice authority application. ASBN has your national certification on file. You are required to maintain current national certification on file with ASBN in order to keep your license active.
3. Do all my collaborating physicians need to sign an hours affidavit?
 - a. No. Act 412 requires a minimum of 6,240 hours of practice under a collaborative practice agreement. If one of your collaborating physicians can attest to the total number of hours, that is all that is required. You may submit more than one affidavit, if needed.
4. Why do we need our collaborating physician to verify the hours of practice?
 - a. Act 412 requires that the hours of practice must be under a collaborative practice agreement. The FIPCC felt having the collaborating physician sign the hours affidavit was the best way to verify the number of hours.
5. Does ASBN staff review the applications before taking them to the committee?
 - a. Yes, ASBN staff will review each application for all the required documents. You will receive a message through the Nurse Portal once your application is complete and will be sent to the committee for review. If you have not received a message that your application is complete, review the requirements and make sure you have submitted all documents.
6. Who can write the letters of recommendation?
 - a. The FIPCC did not specify who the letters of recommendation should come from. Best option would be from your collaborating physician, other physicians you work with, or APRN colleagues. However, anyone can write the letter of recommendation. See tips for letters of recommendation below.
7. Why do we need to submit letters of recommendation?
 - a. The FIPCC wanted to see letters of recommendation from all applicants for full independent practice.
8. Why do we need to submit evidence of 5 pharmacology hours when we do them for renewals?
 - a. APRNs do not submit evidence of completing the 5 pharmacology hours unless selected for random audit. The FIPCC wanted evidence of meeting the continuing education requirement included in the application packet.
9. Will we be able to prescribe hydrocodone and other schedule 3-5 drugs independently or is a collaborative practice agreement still required for controlled drugs?
 - a. A CNP who has been granted full independent practice will be able to hold prescriptive authority without having a collaborative practice agreement in place. They will be able to

prescribe medications in schedules 2-5 and legend drugs. Their prescribing practice must still follow all ASBN Chapter 4 *Rules*.

10. What is the remedy if a former collaborating physician will not sign the hours affidavit?
 - a. The ASBN Chapter 11 *Rules* addresses this scenario. Chapter 11, Section III, A, 5, b, i-ii reads:
 - b. Other evidence of meeting the qualifications for full independent practice and an affidavit signed by the nurse practitioner, in the event a collaborating physician has died, become disabled, retired, relocated to another state, or any other circumstance that inhibits the ability of the nurse practitioner from obtaining an affidavit.
 - i. Other evidence may include employment records, military service, Medicare or Medicaid reimbursement records, or other similar records that verify clinical practice in the population foci for which the nurse practitioner is licensed and certified.
 - ii. The burden shall be on the nurse practitioner to provide sufficient evidence to support the nurse practitioner's inability to obtain an affidavit from a collaborating physician.
11. Why weren't all types of APRNs included in Act 412?
 - a. The legislature only included certified nurse practitioners in the legislation. There is current legislation pending (SB79) to add the clinical nurse specialist (CNS) to Act 412.
12. I am not currently working in a patient care setting so I do not have active prescriptive authority. I have had prescriptive authority in the past. Am I eligible to apply?
 - a. Yes, if you have met the minimum hours requirement and can submit all the required documents, you may apply for full practice authority.
13. I have practiced as an FNP for 9 years. I graduate in May with an additional population area as a psychiatric-mental health NP. Can I apply for independent practice as a PMHNP?
 - a. You must have worked the required number of hours under a collaborative practice agreement in each population foci. You could be approved for full practice authority as an FNP but would need a collaborative practice agreement to work as a PMHNP.
14. How does full practice expand my scope of practice?
 - a. Being granted full practice authority does not expand or change and APRN's scope of practice. All APRNs must practice within their scope and population foci as defined by the graduate education and national certification.
15. I am coming to Arkansas from a full practice authority state. Can I apply for full practice authority in Arkansas?
 - a. Unfortunately, the way Act 412 is written the number of hours must have been under a collaborative practice agreement. There is current legislation pending (SB79) that will make it allow more options for verifying the hours of practice.
16. How often will the committee meet?
 - a. By statute, the FIPCC must meet at least quarterly. With the abundance of applications we have received so far, we will attempt to hold meetings more frequently depending on the availability of the committee members.

**If you have a question that is not addressed in these FAQs, please send a message to APRN: Practice through the Nurse Portal Message Center.

Tips for Letters of Recommendation

What is a letter of recommendation?

A letter of recommendation is a pre-arranged document written by a reliable person who you have worked with and can attest to your knowledge, abilities, expertise, and/or experience. A good recommendation should be honest, accurate, and complete. The author should be familiar with the applicant's practice as an APRN in order to make a recommendation for full independent practice authority.

Points to remember:

The general format of a letter of recommendation is a 1-2 page letter:

1. On company letterhead, if available
2. Title & address of where the letter is being submitted
3. Addressed to the Full Independent Practice Credentialing Committee
4. Include the name of the applicant
5. Some info about how the author knows the applicant
6. Type of relationship with the applicant (supervisor, co-workers, etc)
7. Any specific accomplishments, practices, behaviors related to full independent practice
8. A conclusive statement about recommendation for full independent practice authority
9. Letters should be dated and signed by the author (no typed in signatures)