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Health Care Models of the Future (Hint: They Include Nurse Practitioners!) and, 5 Tips for Hiring Nurse Practitioners

The main crux of the change that CVS and Aetna's convergence will precipitate is the effort by CVS Health to transform, over the next several years, its traditional pharmacy chain into a "[health care hub](#)," with a primary care provider on site at more of their drugstore locations. These primary care providers will staff CVS's [Minute Clinics](#). The budding market for quick, inexpensive primary health care providers such as Minute Clinics represents the growing demand for more efficient health care, without the weeks of scheduling and hours of waiting a traditional doctor's office requires. So, who will be staffing these increasing health care hubs across the United States? Primary, nurse practitioners.

What Can Nurse Practitioners Do?

Nurse practitioner [training programs](#) first developed in the mid-1960s to address society's demand for primary care services; this new health care provider model conveniently converged with a physician shortage. From 1979 to 2017, the [number of nurse practitioners](#) in the United States increased from 15,000 to more than 234,000.

Nurse practitioners are distinct from physicians in that they complete a master's, rather than attending medical school following a four-year undergraduate degree. While employers and state licensure requirements may vary, most nurse practitioners begin practice immediately following their master's program, and are not required to complete any sort of residency training. Nurse practitioners, similar to physicians, may train in a [specialty](#), and subsequently be licensed by a national board in their specialty, ranging from primary care and women's health to more specialized fields such as neonatal health and oncology.

Nurse practitioners fill an important role in the U.S. health care system: they are able to provide lower health-care costs for both patients and insurers, they fill the gap in a significant primary care shortage, particularly in rural areas, and nurse practitioners are routinely rated well in patient satisfaction surveys, often due to their ability to spend more time with patients than their physician counterparts. However, employing nurse practitioners can present a challenge, as the scope of their practice varies dramatically from state to state. For providers looking to utilize nurse practitioners to better serve their patients and potential patients, like CVS Health, here are a few tips to keep in mind when hiring nurse practitioners.

5 Tips for Hiring Nurse Practitioners

1. Ensure that you know what a nurse practitioner can do in each state. For example, in [Nevada](#), after practicing for two years with a regulated relationship with a physician, a nurse practitioner may obtain full independent practice authority. By contrast, in [Tennessee](#), a nurse practitioner must maintain a relationship with a collaborating physician throughout her entire career. While the scope of practice of a physician is consistent from state to state, the scope of practice as a nurse practitioner varies dramatically as you cross state lines, and can run the gamut from full independent practice to close supervision by a physician.

2. Create clear internal policies for your hospital, business, or clinic that set forth the standards and expectations around prescribing. In my home state of Tennessee, nurse practitioners have often been caught up in the wide net of discipline and, at times, criminal charges related to the overprescribing or misprescribing of controlled substances. Be familiar with each state's policies on prescribing controlled and non-controlled substances, and any additional regulations or laws imposed on nurse practitioners related to prescribing. Do not rely on a nurse practitioner's educational background or clinic experience to lead the way, as each state regulates prescribing—and specifically how nurse practitioners can prescribe—differently.

3. Maintain appropriate oversight of nurse practitioners as required by state law. Many states require some sort of regulated relationship between a nurse practitioner and a physician—often referred to as a supervising physician or a collaborating physician. Some questions you should ask in each state regarding this physician–nurse practitioner relationship:

- 1. Does this physician need to be physically present at the location where the nurse practitioner practices? If so, how often?
- 2. Does the supervising physician need to review a percentage of the nurse practitioners' patient charts?
- 3. Does the name of the supervising physician need to be provided to the state Board of Nursing along with the nurse practitioner's licensure application, and updated routinely?

These are all important questions to which the answers vary from state to state. Be aware of the requirements for nurse practitioners in your footprint states.

4. Hire physicians who will work well with your nurse practitioners. If the nurse practitioners in your state are required to maintain a supervising or collaborating relationship with a physician, retain physicians who will (1) not only fulfill the technical requirements of this role as prescribed by law and regulation, but who will also (2) serve as mentors and resources for nurse practitioners. As many nurse practitioners may enter the field with little prior healthcare experience, their physician counterparts should truly serve as a resource, not just a signature on a required document filed with the state Board of Nursing.

5. Train your nurse practitioners! As part of your onboarding process, make the policies that affect your nurse practitioners above as transparent as possible to your new hires. If a new nurse practitioner went to nursing school in Tennessee and is now practicing in Washington, he or she may not be familiar with the scope of practice, or the physician–nurse

practitioner relationship in their new state. In some states, the duties of the supervising or collaborating physician may be buried in the regulations for the Board of Medical Examiners, so the nurse practitioner may not be aware of all the responsibilities of his or her collaborating physician. Education will empower your nurse practitioners to perform their jobs efficiently and securely, knowing that they are supported by their employers and health care partners from the top down. Additionally, appropriate training on state-level regulations and internal policies will avoid potential licensure discipline of your employees by the State Board of Nursing or Board of Medical Examiners.

Nurse practitioners are a phenomenal resource for providers and patients alike, when used in the appropriate roles, and supported by their employers. CVS Health may be breaking the mold by turning their pharmacy/retail locations into [community-based clinics](#) focused on providing affordable health care, but this new community clinic model will soon be the norm. Now is the time to consider how to best utilize nurse practitioners in your organization for the benefit of those you serve. For questions about nurse practitioner regulations state by state, as well as nurse practitioner prescriptive authority, please feel free to reach out to the [Frost Brown Todd health care industry team](#) via [Alex Fisher](#), at afisher@fbtlaw.com or (615) 251-5594.

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