COMPARISON OF APRN REGULATION IN MINNESOTA, IOWA, AND WISCONSIN

M. Chesney, PhD, RN, CNP

October 12, 2010

Criteria	Minnesota	Iowa	Wisconsin
Definition of APRNs Listed in Statute	Yes – CNM, CNP, CNS, CRNA	Yes – CNM, CNP, CNS, CRNA	Yes - CNM, CNP, CNS, CRNA (*Only listed in APRN-prescriber language)
APRN Prescriptive Practice	Must maintain written Rx agreement (signed yearly) with collaborating physician (list of requirements for agreement called the Memorandum of Understanding is determined by MNA and MMA agreement) Although MN BoN is ultimately responsible for regulating APRN practice, the MMA has regulatory input as to components of APRN prescriptive requirements.	Independent prescribing practice: Regulated solely by the IA BoN	May apply for APRN Prescriber Certification (based on CE pharmacology requirements & one-time passage of Jurisprudence Exam). APRN prescribers must have a collaborative relationship with a physician. APRN-prescriber and physician must document the relationship (unclear as to documentation specifics). Regulated solely by WI BoN.
APRN Practice (e.g. diagnosing, treating, referring, etc.)	Must practice within health care system that provides for consultation, collaborative management, and referral as indicated by the health status of the patient	Licensed independent practitioner (LIP) status; APRN uses "collaboration as needed".	Statute does not provide information regarding need for collaboration if APRN is not an APRN-prescriber.
Definition of collaboration or collaborative management	"Collaborative management" is a mutually agreed-upon plan between an advanced practice registered nurse and one or more physicians or surgeons licensed under chapter 147 that designates the scope of collaboration necessary to manage the care of patients.	"Collaboration" is the process whereby an ARNP and physician jointly manage the care of a client.	"Collaboration" means a process which involves 2 or more health care professionals working together, in each other's presence when necessary, each contributing one's respective area of expertise to provide more comprehensive care than one alone can offer.

Summary: Of the three states, Iowa has the least restrictive requirements for APRNs. In Iowa, APRNs are licensed independent practitioners. Wisconsin's requirements are not explicit as to practice of non-prescribing APRNs. APRN ability to prescribe in Wisconsin is not linked to annual physician supervisory oversight but there is a requirement for documentation of a collaborative relationship with at least one physician. Minnesota requires both a collaborative arrangement for APRN practice and yearly physician oversight of prescriptive practice.