



KERN HEALTH SYSTEMS POLICY AND PROCEDURES			
Policy Title	Non-Physician Medical Practitioners - Supervision by Physicians	Policy #	23.06-P
Policy Owner	Quality Performance/Contracting	Original Effective Date	08/1997
Revision Effective Date	10/1/2024	Approval Date	10/29/2024
Line of Business	<input checked="" type="checkbox"/> Medi-Cal <input type="checkbox"/> Medicare <input type="checkbox"/> Corporate		

I. PURPOSE

Physician offices will have standardized procedures that clearly define the scope of services and supervision of all non-physician medical providers (NPMP) in accordance with applicable California Code of Regulations, Business and Professions Code (BPC) and/or California Licensing Agency.

II. POLICY

Kern Health Systems (KHS) will encourage the use of non-physician medical practitioners (NPMP), also referred to as mid-level providers, with the intent of increasing member access to medical care and thereby improving patient outcome. All NPMPs must have an established supervisory relationship with a contracted physician provider, when required, and the supervising requirements must follow the standards and guidelines set forth in the applicable California Code of Regulations, Business and Professions Code (BPC), and/or California Licensing Agencies as follows:

- A. Certified Nurse Midwife (CNM): Physician supervision is not required for any CNM practicing pursuant to Business and Professions Code, Section 2746.5.
- B. Licensed Midwives (LM): LMs can bill for services pursuant to their scope of practice as licensed practitioners with established protocols, procedures and treatments authorized pursuant to Business and Professions Code 2505-2521.
- C. Nurse Practitioner (NP): Physician Supervision is required for services rendered pursuant to Business and Professions Code, (BPC) Section 2725, 2836.1(e) (furnishing numbers).
- D. Physician Assistant (PA) - Business and Professions Code, Sections 3502, 3502.1, 3516 and 3516.5, Welfare and Institutions Code (W&I Code), Section 14132.966 and California Code of Regulations, Title 16, Section 1399.540.

III. DEFINITIONS

TERMS	DEFINITIONS
Non-Physician Medical Practitioner	A healthcare practitioner, other than a physician, licensed by the state in which they practice to assist or act in the place of a physician, who may bill directly under applicable state law. For the purposes of this policy, an Advanced Practice Health Care Provider includes, without limitation, Physician Assistants (PA), Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS).
Supervising Health Care Provider Professional	Professional A physician or Advanced Practice Health Care Provider, who has their own NPI number, when responsible for supervising services rendered by an Advanced Practice Health Care or Nonphysician Provider.
Delegation of Services Agreement	The writing which delegates the medical services shall be known as a delegation of services agreement. A delegation of services agreement shall be signed and dated by the physician assistant and each supervising physician. A delegation of services agreement may be signed by more than one supervising physician only if the same medical services have been delegated by each supervising physician. A physician assistant may provide medical services pursuant to more than one delegation of services agreement.

IV. PROCEDURES

A. TYPES OF NON-PHYSICIAN MEDICAL PRACTITIONERS (NPMP)

The terms non-physician medical practitioner and mid-level practitioner refers to the following categories of licensed medical providers:

1. Nurse Practitioners licensed by the Board of Registered Nursing (BRN)
2. Certified Nurse Midwife licensed by BRN
3. Licensed Midwives licensed by the Medical Board of California
4. Physician Assistant licensed by the Physician Assistant Board of California.

B. SCOPE OF NON-PHYSICIAN MEDICAL PRACTITIONERS

KHS Plan members either select or are randomly assigned to a contracted primary care provider (PCP). The PCP may choose to arrange with a NPMP to provide primary care to assigned members but must provide active supervision of the care delivered. A Supervising Physician does not need to be present, and at a minimum, be available by telephone or other electronic communication; however, if the NPMP is performing a complete procedure that requires informed consent, the Supervising Physician must be immediately available to deal with any emergency complication that may occur. The NPMP shall consult with a physician regarding any task, procedure or diagnostic problem which the NPMP determines exceeds their level of competence or shall refer such cases to a

physician.

A current specialty provider may employ a NPMP and may permit this provider to participate in the care delivered to members in accordance with the Standardized Procedure Guidelines, Delegation of Medical Services Agreement, and KHS. NPMPs will be credentialed in the specific specialty in which they will be working. The credentialing will be dependent on their training and experience in the field in which the NPMP is requesting to be credentialed. NPMPs practicing in a specialty setting may perform an initial evaluation of the patient as long as there are no significant clinical decisions or recommendations (i.e. surgery, admission, etc.). In cases of emergencies, as defined in California Code Regulations, Title 22, Section 51056 “Emergency Services”, the NPMP, to the extent permitted by the laws relating to license or certificate involved, may render emergency services to a patient pending establishment of contact with the physician. In all cases, the NPMP shall be responsible to maintain reasonable communication with the physician to keep the physician informed, to follow instructions and, in case of doubt, to seek assistance or additional instructions.

C. KHS APPROVAL OF NON PHYSICIAN MEDICAL PRACTITIONERS

1. All NPMPs must meet the credentialing standards set forth in the KHS credentialing policy and procedure, KHS P&P 23.05-P Credentialing Program.
2. Additionally, all NPMPs, with the exception of CNMs, and their supervising physician must submit to KHS for review. as part of their credentialing packet, the following:
 - a. Supervising Physician Agreement at initial, and when there are any changes in their supervising physician (See Attachment A). The supervising physician may submit the existing delegation of service agreement on file in lieu of submitting the KHS Supervising Physician Agreement.
 - b. NPMP Training is variable. There are differences between Nurse Practitioners and Physician Assistants. KHS recognizes some NPMPs will receive formal “specialty” training in areas such as OB/GYN, Women’s Health, Pediatrics, Surgery, Orthopedics, Oncology, etc. KHS requires six (6) months formal training in an official training program or one (1) year of full-time work experience in the designated sub-specialty field being requested.

3. Physician Supervisor to Non-Physician Medical Practitioner Ratios

- a. The supervising physician holds ultimate responsibility for the practice of each supervised non-physician medical practitioner. The number of non-physician medical practitioners who may be supervised by a single primary care physician is limited to the full-time equivalent of one of the following:
 - 4 Nurse Practitioners
 - Four (4) Physician Assistants
- c. A Physician supervisor may not supervise more than four (4) non-physician medical practitioners in any combination.

The number of non-physician medical practitioners who may be supervised by a single sub-specialty care physician is limited, pursuant to BPC, Section 2836.1(e), and BPC Section 3502.5, and permitted to supervise:

- a. Four (4) Physician Assistants
- b. There is no limit to Nurse Practitioners (NP) unless the NP has a Furnishing License, the maximum supervision by a physician is 4-Nurse Practitioners with a Furnishing License.
- c. A total of eight (8) equaling 4-NPs with furnishing licenses and 4-PAs at one time.
- d. Certified Nurse Midwives and Licensed Midwives – Physician Supervision is not required.

On a quarterly basis the Plan will utilize network and enrollee data to review non-physician medical practitioners' caseloads and physician supervisor to non-physician medical practitioner ratios to ensure they do not exceed standards outlined in this policy.

4. Physician – Practitioner Interface

It is the responsibility of the supervising physician. to comply with all applicable state and federal laws, regulations, standards that govern supervision of any and all activities related to non-physician medical practitioners; attest to having provided the legally required collaboration, consultation, and supervision consistent their physician licensure; and agree to be available to the non-physician medical practitioner in person, or through electronic means to provide supervision to the extent required by California professional licensing laws, necessary instruction in patient management, consultation and referral to appropriate care/services by specialist physicians or other licensed health care professionals, as may be required. The practice agreement document must be kept on file at the physician's or medical group's office, and readily available for review by the Department of Health Care Services (DHCS), upon request.

D. NOTIFICATION OF CHANGES/ADDITIONS IN MID-LEVEL STAFF

KHS requires physicians or groups to report and submit required information to KHS on all non-physician practitioners as part of the initial or on-going credentialing process. It is the responsibility of the contracting physician or medical group to notify KHS of changes or additions to their non-physician medical practitioners.

E. IDENTIFICATION OF NONPHYSICIAN MEDICAL PRACTITIONERS

A health care practitioner shall disclose his or her name and practitioner's license status, as granted by the State of California, on a nametag with at least 18-point type. A health care practitioner in a practice or office, whose license is prominently displayed may opt not to wear a nametag and must ensure each patient is initially informed that he/she may be treated by an NPMP.

F. NON-COMPLIANCE WITH STANDARDS AND REGULATIONS

KHS contracting physicians, who are identified as non-compliant with KHS standards or state guidelines, receive notification from the KHS Chief Medical Officer regarding clinical issues or from KHS Provider Relations regarding NPMP practitioner ratios or caseloads. Non-compliant physicians are subject to KHS Policy and Procedure #23.15 - Provider Disciplinary Action.

V. ATTACHMENTS

Attachment A:	Supervising Physician Agreement
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VI. REFERENCES

Reference Type	Specific Reference
Regulatory	Business and Professions Code (BPC), Sections 2505-2521, 2725, 2746.5, 2386.1 (e), 3502, 3502.1-5, 3516 and 3516.5, and Welfare and Institutions Code (W&I Code), Section 14132.966. California Code of Regulations, Title 16, Section 1399.540.
DHCS Contract (Specify Section)	DHCS Contract Section 5.2.4 Network Ratios (C)
Regulatory	DHCS Provider Manual Non-Physicians Medical Practitioners (NMP) March 2024 California Code Regulation Title 22, Section 51241 Physician Relationship to Nonphysician Medical Practitioners

VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Revised	10-2024	Policy revised to bring language current with regulatory requirements CCR, B&PC, CA Licensing Agencies. Renumbered from 4.04-P to 23.06-P.	Y.H. QP/Contracting
Revised	3-2018	Policy revised to bring language current with DHCS Contract requirements.	PNM
Revised	10-2017	Revised policy to be in compliance with CCR Title 22 51240 NP/CNM, Title 16, 1399 for PAs. Remove requirements for Supervising Physician 30-mile radius, Mid-levels in a hospital setting, Updated site review criteria referencing policy 2.22 and QI's current process. Annual receipt of provider information letter and only require at initial, recredentialing or when changes are made. Remove	PNM

		requirement of monitoring physician interface and replace with supervising physician attestation on the revised Attachment A-Provider Information Letter.	
Revised	12-2016	Reviewed by Provider Relations Manager. Removed section 3.2 as no longer applicable.	PNM
Revised	12-2010	Added language to allow mid-levels perform initial consults in a specialty setting.	PNM
Revised	03-2011	Mid-Levels will be credentialed in the specialty they will be working and dependent on their training and experience in that field. Specific language added for orthopedics.	PNM
Revised	11-2009	Revisions provided by Director of Claims and Provider Relations.	PNM/Claims
Revised	09-2005	Revised per DHS Comment 7/12/05 for Workplan Item 6c.	Claims
Revised	08-2002	Revised per DHS Comment (04/05/02).	PNM
Revised	2002	Revised per Medical Director request and DHS comment (10/31/01).	PNM
Revised	02-2001	Changes made as a result of DHS/DMHC Medical Review Audit (YE 08/31/00).	PNM
Revised	10-2000	Routine review.	PNM

VIII. APPROVALS

Committees Board (if applicable)	Date Reviewed	Date Approved
Physician Advisory Committee (PAC)		10/2/2024
Board of Directors (BOD)		10/17/2024

Regulatory Agencies (if applicable)	Date Reviewed	Date Approved
Choose an item.		

Chief Executive Leadership Approval *		
Title	Signature	Date Approved
Chief Executive Officer		
Chief Medical Officer		
Chief Operating Officer		
Choose an item.		
*Signatures are kept on file for reference but will not be on the published copy		



Policy and Procedure Review

KHS Policy & Procedure: 23.06-P Non-Physician Medical Practitioner

Last approved version: 4/2018

Reason for revision: Policy was revised to bring language current with regulatory requirements CCR, Business and Professions Code, CA Licensing Agencies.

Director Approval		
Title	Signature	Date Approved
Jake Hall Senior Director of Quality Performance & Contracting		

Date posted to public drive: _____

Date posted to website (“P” policies only): _____

SUPERVISING PHYSICIAN AGREEMENT (NON-PHYSICIAN MEDICAL PRACTITIONERS)

Complete and return to: Kern Health Systems
Attention: Credentialing
2900 Buck Owens Blvd
Bakersfield, CA 93308

Supervising Physician Information

Name: _____ Group Name: _____

State License No.: _____ NPI: _____

Type of Practice: _____ Provider Specialty: _____

Address: _____ City: _____ Zip: _____

Non-Physician Medical Practitioner Information *Form required for each separate Tax ID location.

Name: _____ License No.: _____ ☐ NP ☐ PA ☐ CNM

Address: _____ City: _____ Zip: _____

Primary Type of Service: ☐ Family/General Practice ☐ OB/GYN ☐ Internal Medicine ☐ Pediatrics

☐ Other: _____

Max. Hours worked per week: _____ / Physician Supervised Hours per week: _____

☐ Physician Assistant: I attest that my office/clinic is in possession of "Practice Agreements" for medical services and applicable supervisory guidelines, as required by Section 1399.540 and Section 1399.545(e), Title 16, California Code of Regulations, including new regulations approved under California Senate Bill 697, and are readily available for review upon request.

☐ Nurse Practitioners/CNM: I attest that my office/clinic is in possession of standardized procedures, as required by the Business & Professions Code, Nurse Practice Act (NPA) Section 2725 and further clarified in the California Code of Regulations, CCR 1480, and are readily available for review upon request.

I agree to comply with all applicable state and federal laws, regulations, standards that govern supervision of any and all activities related to non-physician medical practitioners. I further attest to have provided the legally required collaboration, consultation, and supervision consistent with my licensure; and agree to be available to the non-physician medical practitioner in person, or through electronic means to provide supervision to the extent required by California professional licensing laws, necessary instruction in patient management, consultation and referral to appropriate care/services by specialist physicians or other licensed health care professionals, as may be required. Any changes to the information given above must be reported to the Provider Relations Representative within 30 days of the effective date of the change.

Signature of Supervising Physician _____

Date _____