



Background:

AB 890 authorizes two newly created types of nurse practitioners (NPs) who would be allowed to perform certain functions without standardized procedures.

The law specifies the education, training, testing, regulatory and governance requirements for these new NPs, including the circumstances in which an NP must consult with or refer patients to a physician. Key provisions of AB 890 are ambiguous, and will require clarification and guidance from regulators.

Though the law will be enacted in the fall of 2020, full implementation and training of these new categories of nurse practitioners will not happen until the required regulations and guidance are approved by state regulators.

Implementation of the law now moves to the Board of Registered Nursing, which will be responsible for establishing guidelines for these new categories of nurse practitioners. The Medical Board of California may also have a role to play in the bill's implementation. The California Medical Association (CMA) will be closely involved in the implementation of AB 890, monitoring and advocating during the regulatory process at the Board of Registered Nursing and at the Medical Board of California, as necessary.

AB 890 Does Not End Physician Supervision

The bill does not prohibit the supervision of NPs – including the two new categories created under AB 890 – or otherwise seek to regulate or modify the operative law regarding the governance of nurse practitioners who do not receive additional training. Current arrangements regarding the practice and supervision of NPs are not regulated or changed by AB 890.

AB 890 Requires Consultation and/or Referral

AB 890 requires “Section 103” NPs to refer cases beyond their training and education to a physician. It also requires “Section 104” NPs, who are practicing in facilities that may not have a physician on site, to consult with and refer patients to a physician in specified circumstances.

AB 890 Explicitly Protects the “Corporate Bar”

AB 890 specifies that the corporate bar applies to Section 103 and Section 104 NPs. That means entities including hospitals may not hire, employ or otherwise control the Section 103 and Section 104 NPs unless one of the existing exceptions to the corporate bar applies.

Additional Guidance Is Needed from State Regulators

AB 890 does not prohibit physician supervision of nurse practitioners, and implies a continuing role for physicians in the care of patients who are treated by Section 103 or 104 nurse practitioners. Additional guidance from the Board of Registered Nursing and the California Medical Board is necessary to determine what degree of physician involvement is required.

Guidance from the Medical Board of California as to how it views the role of physicians under the AB 890 NP structure is necessary to better understand physicians' liability risks created by AB 890.

CMA Will Continue to Advocate to Regulators for the Right of All All Patients to Be Treated by a Physician

We have a lot of work to do to ensure AB 890 is implemented in a way that protects patients. The law is clear that AB 890 does not prohibit physician supervision or modify existing arrangements with medical systems or physicians and nurse practitioners, and applies the prohibition on the corporate practice of medicine to these new categories of nurse practitioner. CMA will continue to advocate for the highest quality health care for all Californians and ensure that medical decisions are made by highly trained medical professionals, and not by those who are more concerned with the bottom line than with patient well-being.