AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 219
(I-22)

Introduced by: Mississippi

Subject: Hold Accountable the Regulatory Bodies, Hospital Systems, Staffing Organizations, Medical Staff Groups, and Individual Physicians Supporting Systems of Care Promoting Direct Supervision of Emergency Departments by Nurse Practitioners

Referred to: Reference Committee B

Whereas, “Direct supervision of emergency services” refers to an individual actively practicing clinical medicine in the emergency department and overseeing all medical decisions in the emergency department at the point of care; and

Whereas, Direct supervision of emergency care is distinct from medical direction; and

Whereas, Only 10% of nurse practitioners nationwide are trained in emergency care; and

Whereas, Nursing and medical leaders strongly recommend that, because of variations in training, licensure, and certification, nurse practitioners should not work alone in emergency departments; and

Whereas, CMS provides clear regulations on the direct supervision of emergency care in hospitals; and

Whereas, In the conditions of participation, CMS requires that for a hospital to provide emergency care, all emergency departments must have direct supervision by a qualified member of medical staff present in the hospital at all hours emergency services are provided; and

Whereas, “Direct supervision for emergency services” is defined as being physically in the hospital and not telemedicine; and

Whereas, The word “must” indicates without exception; and

Whereas, The words “qualified member” are clearly proscribed by the American College of Emergency Physicians (ACEP) and American Association of Emergency Medicine (AAEM); and

Whereas, While the words “medical staff,” according to CMS, may include physicians, nurse practitioners, and physicians assistants, there is a clear requirement for additional specialized training; and

Whereas, It is the responsibility of the national organizations of emergency medicine physicians ACEP and AAEM to set standards for the practice of emergency medicine; and
Whereas, ACEP and AAEM determine standards for the practice of emergency medicine and explicitly set the standard that nurse practitioners are unqualified to directly supervise medical care (i.e. work alone) in emergency departments\textsuperscript{2,3}; and

Whereas, When a nurse practitioner directly supervises the emergency department (i.e. works alone), the are in violation of CMS regulations; and

Whereas, The risk of nurse practitioners directly supervising emergency care in emergency departments puts patients at risk of misdiagnosis, incorrect treatment, delay in care, or inadequate in care when time sensitive diseases present\textsuperscript{2,4}; and

Whereas, A waiver for telemedicine can mitigate staffing shortages, but it remains a temporary solution and does not change the CMS regulation or standards defined by AAEM or ACEP\textsuperscript{5}; therefore be it

RESOLVED, That, in accordance with Centers for Medicare & Medical Services regulations and standards of practice for emergency medicine as defined by ACEP and AAEM, our American Medical Association hold accountable the regulatory bodies, hospital systems, staffing organizations, medical staff groups, and individual physicians supporting systems of care that promote direct supervision of emergency departments by nurse practitioners. (New HOD Policy)

Fiscal Note: Not yet determined

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References