

**New Online Process for Updating TN BME
Committee on Physician Assistants'
Attachment 4 & 5 – Authorization for Prescribing for PAs**

As of May 2017, the "Authorization for Prescribing for Physician Assistants" for documenting prescribing formulary and physician supervision is now named the "PA Supervising Physician Form".

ATTACHMENT 4

Applicant's Name _____



STATE OF TENNESSEE
DEPARTMENT OF HEALTH
HEALTH RELATED BOARDS
665 MAINSTREAM DRIVE
NASHVILLE, TENNESSEE 37243

COMMITTEE ON PHYSICIAN ASSISTANTS
(800) 778-4123, ext. 24384 or (615) 532-3202, ext. 24384

SUPERVISING PHYSICIANS
This section must be completed by the supervising physician(s).
(This page may be duplicated if necessary)

List all practice settings:

1) **Setting:**

Supervising Physician Signature _____

Printed Name _____

Address _____

Tennessee Medical License Number _____

2) **Setting:**

Supervising Physician Signature _____

Printed Name _____

Address _____

Tennessee Medical License Number _____

3) **Setting:**

Supervising Physician Signature _____

Printed Name _____

Address _____

Tennessee Medical License Number _____

4) **Setting:**

Supervising Physician Signature _____

Printed Name _____

Address _____

Tennessee Medical License Number _____

ATTACHMENT 5

TENNESSEE BOARD OF MEDICAL EXAMINERS'
COMMITTEE ON PHYSICIAN ASSISTANTS

AUTHORIZATION FOR PRESCRIBING FOR PHYSICIAN ASSISTANTS

Supervising Physician

Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Field of Practice _____

Medical License Number _____

Physician Assistant

Field of Practice _____

Address _____

**No Longer Accepted – Board of Medical Examiners
will send back to you if submitted after May 1st**

- | | |
|---|--|
| <input type="checkbox"/> Analgesics | <input type="checkbox"/> Enzymes |
| <input type="checkbox"/> Anesthetics | <input type="checkbox"/> Expectorants and Cough Preparations |
| <input type="checkbox"/> Antihistamines | <input type="checkbox"/> Eye, Ear, Nose, and Throat Preparations |
| <input type="checkbox"/> Anti-infective Agents | <input type="checkbox"/> Gastrointestinal Drugs |
| <input type="checkbox"/> Anti-inflammatory Agents | <input type="checkbox"/> Hormones and Synthetic Substitutes |
| <input type="checkbox"/> Anti-neoplastic Agents | <input type="checkbox"/> Hyperglycemic Agents |
| <input type="checkbox"/> Antispasmodics and Anticholinergics | <input type="checkbox"/> Migraine Preparations |
| <input type="checkbox"/> Antivirals | <input type="checkbox"/> Muscle Relaxant Preparations |
| <input type="checkbox"/> Arthritis Medications | <input type="checkbox"/> Narcotic Antagonists |
| <input type="checkbox"/> Autonomic Drugs | <input type="checkbox"/> Oxytocics |
| <input type="checkbox"/> Blood Derivatives | <input type="checkbox"/> Psychotropics |
| <input type="checkbox"/> Blood Formation and Coagulation | <input type="checkbox"/> Serum, Toxoids, and Vaccine |
| <input type="checkbox"/> Birth Control Drugs and Devices | <input type="checkbox"/> Skin and Mucous Membrane Preparations |
| <input type="checkbox"/> Bronchodilators/Anti-asthma Drugs | <input type="checkbox"/> Smoking Cessation Aids |
| <input type="checkbox"/> Cardiovascular Drugs | <input type="checkbox"/> Smooth Muscle Relaxants |
| <input type="checkbox"/> Central Nervous System Drugs | <input type="checkbox"/> Spasmolytic Agents |
| <input type="checkbox"/> Contraceptives | <input type="checkbox"/> Sympathomimetics and Combination |
| <input type="checkbox"/> Diabetic Agents | <input type="checkbox"/> Vitamins |
| <input type="checkbox"/> Diagnostic Agents | <input type="checkbox"/> Unclassified Therapeutic |
| <input type="checkbox"/> Decongestants | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Electrolytic, Caloric, and Water Balance | |

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1. New Physician Assistants (PAs) applying for a TN license and currently licensed PAs updating their formulary or supervising physician information will now be required to use the online system.

In preparation to update your information, have access to:

- o a desktop computer or laptop (do not use phones or tablets)
- o the email to which you have requested all correspondence be sent
- o your DEA number
- o physician’s license number, if adding a collaborating/supervising physician

To begin, go to the TN Department of Health website: <https://tn.gov/health/topic/PA-board>

2. Click on “Applications” (red arrow).



3. After clicking on “Applications”, the page containing Committee applications will appear. Scroll down to and click on the link titled “PA Supervising Physician Form” (yellow arrow).

Physician Assistants

Committee on Physician Assistants

Applications

► *Applying for initial licensure from your professional licensing board has become a bit easier each year, the Department of Health has been working on an online application process that will allow professionals to apply online for an initial license and complete (and update as necessary) the profile mandatory for certain professions. The process is user friendly and convenient and you can pay for your initial application utilizing a credit card, debit card or e-check. You will also be required to complete many of the documents required to complete your initial application! Please go to the links below to begin the online process.*

- [Notice of intent to Terminate Supervision](#)
- [Declaration of Citizenship \(PH-4183\)](#)
- [PA Supervising Physician Form](#) ←
- [Duplicate or Replacement License Form \(PH-4057\)](#)

4. This will open the Licensure and Regulatory System sign-in page.

TN Department of Health

Licensure and Regulatory System

Contact Us

Returning User
* * are required.

*User ID:

*Password:

[Forgot password?](#) [Forgot user ID?](#)

New User
[Begin Here For Sign-up](#)

! You must create an online account even if you already use e-Services. Your online account is separate from your e-Services account.

Sign-up and manage your licenses

Welcome to LARS the Tennessee Department of Health online Licensure and Regulatory System. If you are a new user please sign up using the link to the left. If you are an existing user, sign in using your credentials.

⚠ Microsoft EDGE browser is currently not supported.

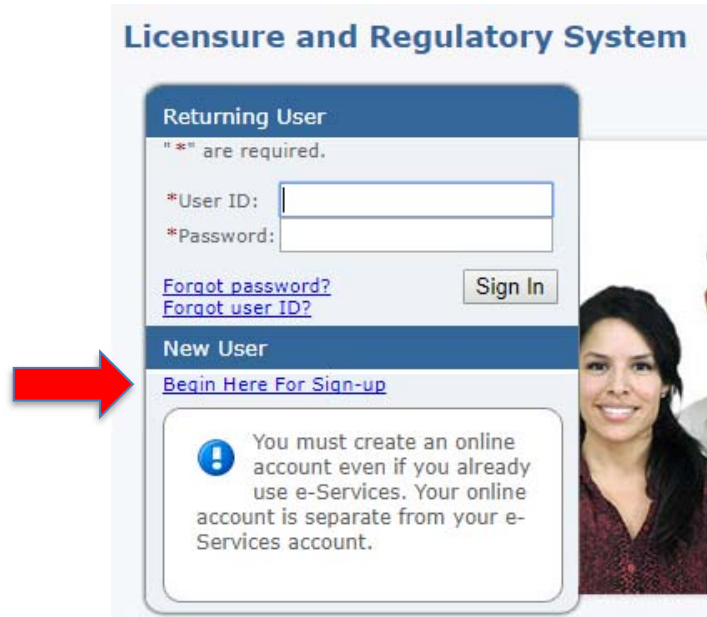
⚠ **Attention:** The email domains below may not be supported by LARS. Please add LARS@tn.gov to your Address Book, Contacts and/or SafeSendersList before signing up to avoid any communication delays.

- @outlook.com
- @hotmail.com
- @live.com

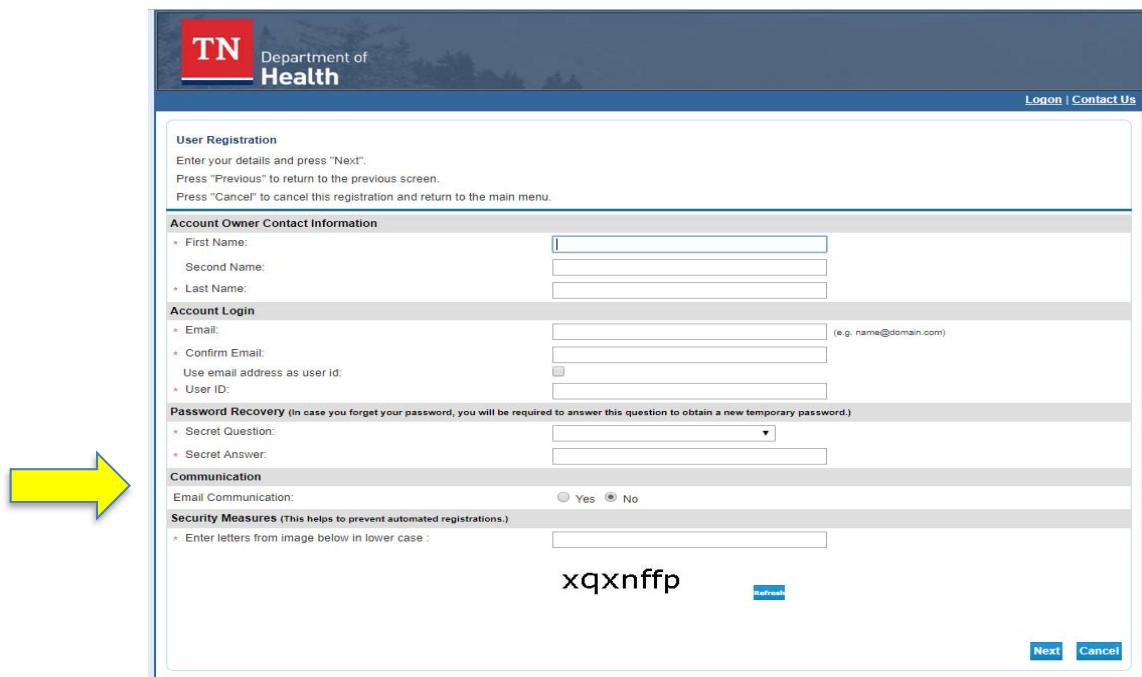
Use of this system constitutes consent to monitoring, interception, recording, reading, copying or capturing by authorized personnel of all activities. There is no right to privacy in this system. Unauthorized use of this system is prohibited and subject to criminal and civil penalties.

- 5. Go to the “New User” box and click “Begin Here for Sign-up” (red arrow) to create an online account with a User ID and password.

For ALL USERS: Even if you have previously used the Board’s online services before, you must create a new account in this new system.



- 6. Provide all requested information to begin new account registration. **Indicate the email to which you want all board communications send.** Under “Communication” (yellow arrow), we suggest selecting “Yes” to E-mail Communication to assure timely receipt of notices/information from TN Department of Health.



Press "Next" to preview and save your registration information

Preview Registration
Press "Save" to save the registration.
Press "Edit" to modify your registration details.
Press "Cancel" to cancel this registration and return to the main menu.

First Name:
Second Name:
Last Name:
Email:
Userid:
Secret Question:
Secret Answer:
Email Communication:

Save Edit Cancel

7. After you register and create a new account, a temporary password will be emailed to you from LARS@tn.gov.

**** Only a desktop computer or laptop (not phones or tablets) should be used to access this email address and activate links contained within its contents.**

* Please check spam or junk folders if you do not receive the email within a few minutes.

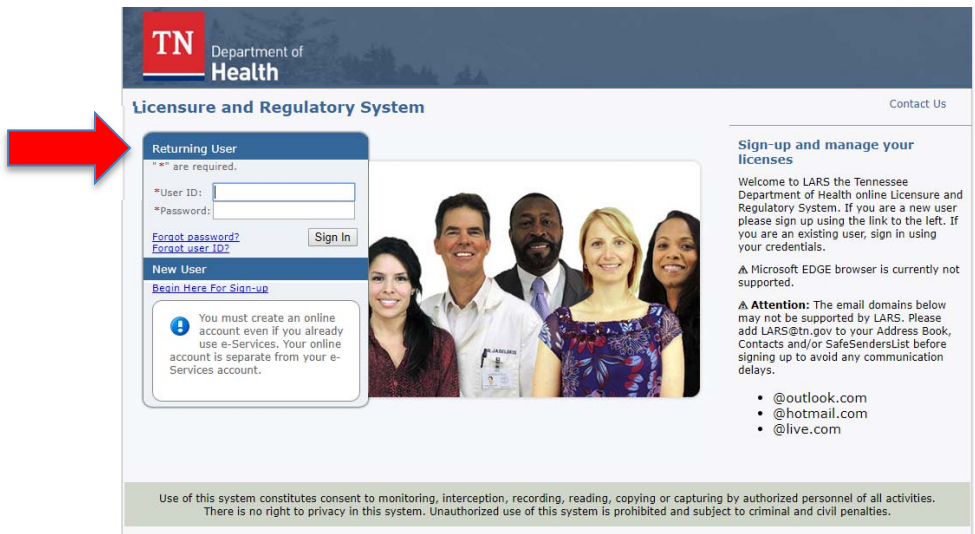
TN Department of Health

Logon | Contact Us

User Registration - Temporary Password Issued
A temporary password has been issued and sent to you via e-mail with the instructions on how to proceed. Read this e-mail and follow the instructions.

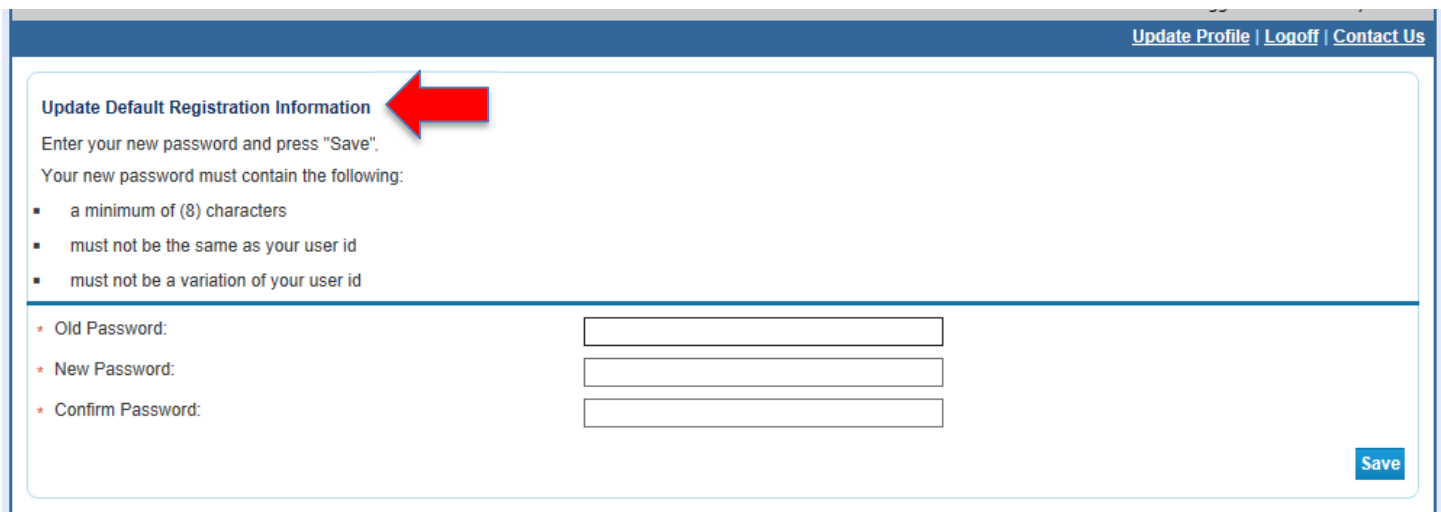
Return

- 8. The LARS email will contain a temporary password with a link.
 - a. Copy or note the temporary password so you may paste or provide when requested.
 - b. Click on the link that will redirect you back to the Licensure and Regulatory System.
 - c. As a Returning User (red arrow), provide your user ID (email previously identified) and the temporary password. Click “Sign In”.



- 9. The Default Registration page shown below (red arrow) will now appear.

The temporary password you were provided will be the “Old Password”. Create a new password for your account.



- 10. After you registered and created your new system account, you will be asked to link your profile to existing licenses.

Initial Onboarding - Linking to Existing Licenses

Please click on the ["Contact Us"](#) link to contact the applicable agency to complete your onboarding process
Please provide your Individual Licensee Information to support linking your online account to existing license records
Press "Next" to submit

Individual Licensee Information

- Last Name:
- SSN: Full digits of SSN
- SSN (confirm): Full digits of SSN
- Date Of Birth: (mm/dd/yyyy)

Security Measures (This helps to prevent automated registrations.)

- Type the characters from the picture below (without spaces):

fnbqrs [Refresh](#)

If you are unable to read the above image please refresh it for another word.

Follow the instructions provided to match/link your license(s).

Initial Onboarding - Matching License Results

Please click on the ["Contact Us"](#) link to contact the applicable agency to complete your onboarding process
Please review the resulting records below
Please select one of the radio button options below and click on "Next" to complete your registration

Name	Indv/Org Number	License Type	License Status	License Number
			Licensed Licensed	

Select one of the following:

- I confirm the above license(s) is/are associated with me
- The above license(s) is/are not associated with me

[Next](#)

11. Once you've matched your license, the "Quick Start Menu" will appear (yellow arrow).

Quick Start Menu License Information [Show Details](#)

To start choose an option and you will return to this Quick Start menu after you have finished.

Manage your license information

Physician Assistant #3005 [Select](#)

Start a New Application or Take an Exam

What are you applying for?

[Select](#)

Additional Activities

[Add Licenses To Registration](#) [Select](#)

[View Supervisory Requests](#) [Select](#)

12. The "Quick Start Menu" will allow you to review and update your information.

To review your information and/or update your collaborating/supervising physicians, go to:

- a. "Manage your license information"
- b. Click on "Select Application" (red arrow) to prompt a dropdown menu
- c. Within the dropdown menu, select "PA Supervisory Request"
- d. Click the blue "Select" button (purple arrow)

Quick Start Menu License Information [Show Details](#)

To start choose an option and you will return to this Quick Start menu after you have finished.

Manage your license information

Physician Assistant #3005 [Select](#)

Start a New Application or Take an Exam

What are you applying for?

[Select](#)

Additional Activities

[Add Licenses To Registration](#) [Select](#)

[View Supervisory Requests](#) [Select](#)

If there is an existing request already open, which has not been completed (red arrow), you will have the option (yellow arrow) to proceed with the incomplete request or to start a new application. ***If you choose to start a new application, your existing incomplete request will be cancelled.***

Start a New Application or Take an Exam

What are you applying for?

<Select Board>

<Select Application>

Committee on Physician Assistants - PA Supervisory Request	Status: Open	Det
Committee on Physician Assistants - PA Supervisory Request	Status: Denied	Det
Committee on Physician Assistants - PA Supervisory Request	Status: Open	Det

Additional Activities

Add Licenses To Registration

Manage Supervisory Requests

Health

Quick Start Menu

To start choose an option and you will return to this Quick Start menu after you have finished.

License Information

License Number:

License Type:

There is an existing incomplete - PA Supervisory Request

What do you want to do?

- Start a new application (Please note, proceeding with a new application will cancel an incomplete application) [Select]
- Resume working on an existing incomplete application [Select]

Close

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13. Subsequent screens in the “PA Supervisory Request” section, will enable you to review and update information.

Beginning with the first page, “Introduction” (yellow arrow), click “Next” in the lower right corner (red arrow) to *sequentially* review and edit information, as needed.

Update Profile | Logoff | Contact Us

PA Supervisory Request - Introduction

In the following screens, you will be guided through the process of revising your supervisory relationship(s).

First, you will be asked to confirm your personal details.

Next, you will be asked to review and confirm your contact information. You must have a practice address on file in order to make revisions to your existing supervisory relationship(s). You may--and should--enter as many practice addresses as are applicable to your practice.

Finally, you will have the option to add a new supervisor and modify/delete existing supervisory relationships. You are required by law to notify your licensing board of changes to your supervisory relationship(s) within thirty (30) days of any such change. You must also make these changes to your practitioner profile and, if you are registered in the Controlled Substance Monitoring Database (CSMD), to your CSMD profile.

Unfortunately, you cannot enter multiple supervising physicians in a single application. Once you have entered and submitted a supervisory request, you will be required to begin a new application by selecting "PA Supervisory Request" from the drop-down menu under the "Manage your license information" heading.

Press "Next" to continue.

Press "Cancel" to cancel this application and return to the main menu.

Next Cancel

Although tabs located in the left margin (blue arrow) may also be used to navigate page content, it is suggested, for an initial information review, pages be reviewed in the order listed.

Subsequent returns to the system to update information may be facilitated by use of left margin navigation tabs.

Introduction

Name and Personal/Organization Details

Contact Information

Related Licenses Listing

Supervisor Selection

Practice Address

Legend Drug Selection

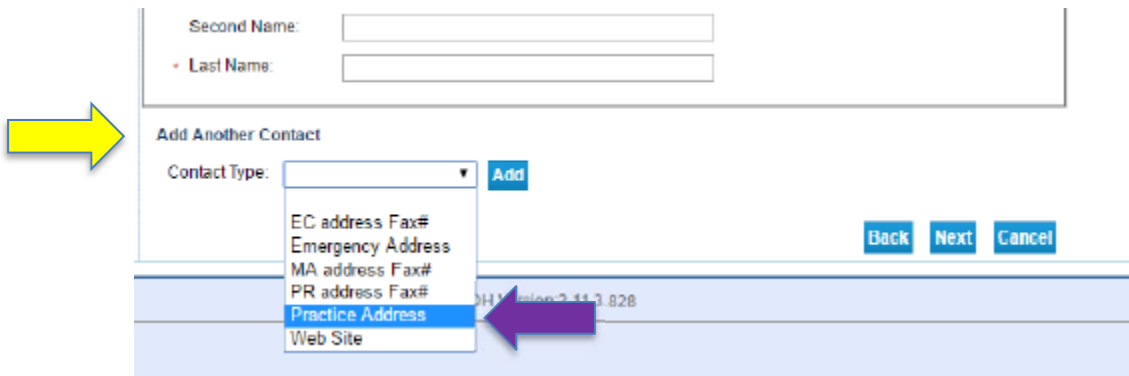
Personal Information

Summary (pre-fees)

SPECIAL NOTE: From the “PA Supervisory Request – Contact Information” screen, you will have the option to enter all your address records. In order to proceed you **MUST** have the following records on file:

- Mailing address
- Practice address

If you have more than one practice addresses, you may list other addresses. At the bottom of the Contact Information page, under “Add Another Contact” (yellow arrow), select “Practice Address” (purple arrow) as shown below. Emergency, practice fax and mailing fax address are optional.

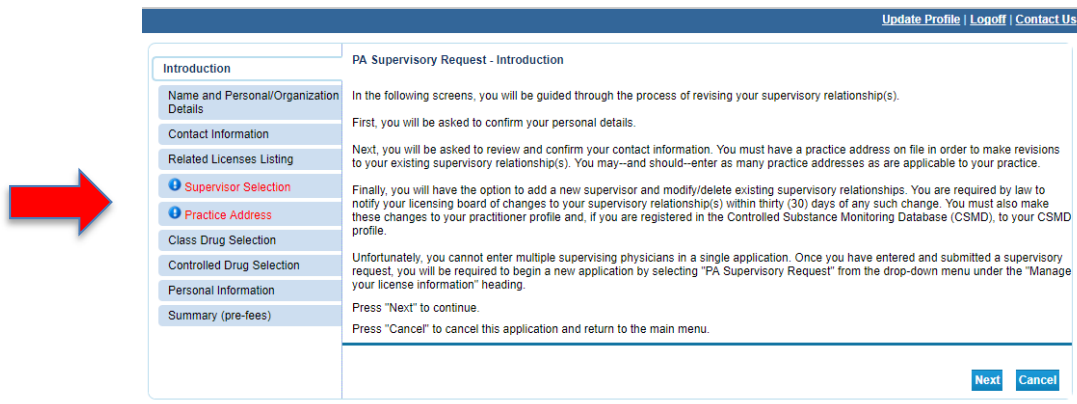


14. Updating Supervising Physician information.

NOTE: The “Supervisor Selection” tab (red arrow) will allow the following functions:

- VERIFY a physician
- DELETE a physician
- ADD a physician.

*You may only add **ONE** physician in the existing form. If you need to add more than one physician, you will need to complete and exit the existing form, and start a new “PA Supervisory Request”.



- a. **VERIFY** a current supervising physician. From the “PA Supervisory Request – Related Licenses Listing” existing physician supervisors on file for you will be listed.

The screenshot shows a web interface for a 'PA Supervisory Request - Related Licenses Listing'. On the left is a navigation menu with options: Introduction, Name and Personal/Organization Details, Contact Information, Related Licenses Listing (selected), Supervisor Selection, Practice Address (with an information icon), Class Drug Selection, Controlled Drug Selection, Personal Information, and Summary (pre-fees). The main content area has a title 'PA Supervisory Request - Related Licenses Listing' and instructions: 'To add a new supervisor, select "Add" from the options at the bottom of this screen.', 'To modify an existing supervisory relationship, select "Next" from the options at the bottom of this screen.', and 'To delete an existing supervisory relationship, select the "Delete Relation" option to the right of the supervisor you wish to delete.' Below this is a section titled 'Related Licenses' with the following details: 'Relation Name: Supervisor of Physician Assistant (Required: N)', 'Your Role: Physician Assistant', and 'Other Party Role: Supervisor'. A blue box highlights the supervisor's name, 'Medical Doctor - 48588', with the text 'Licensed - 2019-04-30' below it. A 'Delete Relation' link is to the right. At the bottom right are buttons for 'Previous', 'Next', 'Add', and 'Cancel'.

Click the radio button to confirm an existing supervisory relationship.

The screenshot shows a web interface for a 'PA Supervisory Request - Supervisor Selection'. The navigation menu on the left is similar to the previous screenshot, but 'Supervisor Selection' is now selected. The main content area has a title 'PA Supervisory Request - Supervisor Selection' and instructions: 'Please identify from the list below, the supervisory relationship you would like to modify, then select "Next".' Below this is a section titled 'Supervisor.' with a radio button selected next to a blue box containing the name 'Medical Doctor - 48588' and the text 'Licensed - 2019-04-30' below it. At the bottom right are buttons for 'Previous', 'Next', and 'Cancel'. The footer of the page reads '© 2017 TDH Version 2.11.3.845'.

b. ADD a supervising physician

From the “PA Supervisory Request – Related Licenses Listing” screen, scroll to the bottom and select “Add” (yellow arrow).

You may only add **ONE** physician in the existing form. If you need to add more than one physician, you will need to complete and exit the existing form, and start a new “PA Supervisory Request” form.

From the “PA Supervisory Request – Related Party - Add” screen below, select “Supervisor of Physician Assistant” (yellow arrow) from the “Type of Relationship”. Next, under “License Type”, specify whether the supervising physician is an MD or DO (red arrow).

You will also need your supervising physician’s license number in order to add them (blue arrow). **Only enter the numbers (NO LETTERS)**. See below instructions to obtain a physician’s licensure number online.

To obtain a physician’s Tennessee medical licensure number online

Go to TN Department of Health’s License Verification: <https://apps.health.tn.gov/Licensure/>
 At a minimum, provide first/last name and provided numeric/letter code. Click “Submit”.

License Verification

The Tennessee Health Related Board's website verification system is the official licensure verification site of the Health Related Boards. The site contains data obtained from primary (original) sources and is updated daily. If written verification of licensure is needed, please contact the respective board for applicable fees/procedures.

For Licensure Verification, enter information in one or more of the following fields. Disciplinary/Practitioner Profile and/or Abuse Data will be presented with licensure verification results, when applicable. If you encounter problems with the verification system, please contact the appropriate board.

Tennessee Board of Nursing has designated NURCS as a primary source equivalent. For additional information regarding nursing licensure status in other states, go to <http://www.nursing.com/>

While searching for information on a particular health care professional, consumers should be aware that there are several features available to determine their research: [Licensure Verification](#), [Abuse Registry](#), [Licensure Change History](#), and [Recently Suspended Licenses \(By Failure to Pay Child Support\)](#). Links to various internet sites are available from the Department of Health Website [Home page](#) and from the [Health Related Boards Website](#).

Data Last Updated: 8/29/2017

Search Licensure

Name

First

Middle


Last

Address

City State Zip

Professional Information

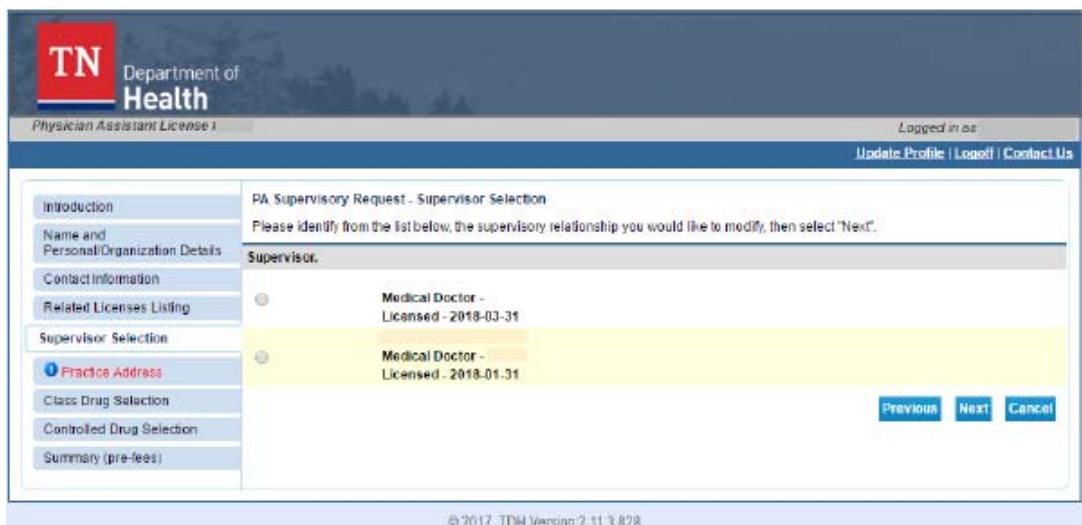
Profession License



* The code you typed does not match the code in the image.

Once all required information has been submitted and you have selected “Next”, your supervisor will be added to your supervisory list. Select “Next” again to proceed to the “PA Supervisory Request – Supervisor Selection” screen shown below. Select the most recently added supervisor and click “Next”.

The next page will include a list of all practice addresses on file for you. Select the address where the newly added physician will be providing supervisory services. Click “Next”.



TN Department of Health

Physician Assistant License 1 | Logged in as | Update Profile | Logout | Contact Us

PA Supervisory Request - Supervisor Selection

Please identify from the list below, the supervisory relationship you would like to modify, then select "Next".


Supervisor.

- Medical Doctor - Licensed - 2018-03-31
- Medical Doctor - Licensed - 2018-01-31**

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15. Update your Class Drug Selection (red arrow).

- a. Using the dropdown menu (yellow arrow), diligently review and select each class of drug your supervising physician has agreed you may prescribe under his/her delegation. At this time, you are required to make a selection and click "Add" for each class of drug. Enhancements are pending so you may make multiple selections from a dropdown menu. When all classes of drugs have been added, select "Next" to continue.

PA Supervisory Request - Class Drug Selection 

From the "Class of Drug" drop-down menu, please select the class of drugs your supervising physician has agreed you may prescribe under his/her delegation. To enter more than one class, select "add" after each selection. When you have selected all applicable classes of drugs, select "Next" to proceed to the "Controlled Drug Selection".

Class of Drug	Comment	Action
Analgesics		Delete

* Class of Drug: 
 Comment:

[Add](#) [Add All](#)


[Previous](#) [Next](#) [Cancel](#)

- b. A listing of your selections (purple arrow) will be immediately available for your review.

PA Supervisory Request - Class Drug Selection

From the "Class of Drug" drop-down menu, please select the class of drugs your supervising physician has agreed you may prescribe under his/her delegation. To enter more than one class, select "add" after each selection. When you have selected all applicable classes of drugs, select "Next" to proceed to the "Controlled Drug Selection".

Class of Drug	Comment	Action
Analgesics		Delete
Anti-infective Agents		Delete
Anti-inflammatory Agents		Delete
Antispasmodics and Anticholinergics		Delete
Antivirals		Delete
Arthritis Medications		Delete
Autonomic Drugs		Delete
Blood Derivatives		Delete
Blood Formation and Coagulation		Delete



16. Update your Controlled Drug Selection (yellow arrow).

- a. Using the dropdown menu (blue arrow), diligently review and select each type and schedule of controlled drugs your supervising physician has agreed you may prescribe under his/her delegation. Click "Add" after each type and schedule is completed

- b. A comprehensive listing of selected type and schedule of controlled drugs (red arrow) will be available for your review and/or editing.

Drug Type	Comment	Schedule	Action
Barbiturates		II,III,IV,V	Delete
Benzodiazepines		II,III,IV,V	Delete
Depressants		II,III,IV,V	Delete
Narcotics		II,III,IV,V	Delete
Stimulants		II,III,IV,V	Delete

- c. Provide your DEA certificate number

- 17. Finally, a summary of your application will be provided for your review and edits. When review is complete, click "Submit".

- 18. When you have completed and submitted all updates, you will be asked complete an Electronic attestation statement. Click "Submit".

- 19. Following attestation, you will be provided with an option to view and print your Application Summary in pdf format.

Example of pdf Application Summary

20. Additionally, you will also immediately receive an email, to the e-mail address on file, from LARS@tn.gov containing the same Application Summary in pdf format.



**** If you do not receive a copy within a few minutes, please check your spam or junk folders. Also consider confirming that the correct email address was provided without typographical errors.**

Your supervising physician will also receive an email to confirm the collaborative agreement.

PLEASE NOTE: Your supervisory relationship will not be validated unless and until your supervising physician validates the relationship. A notice of your pending request will be sent to you and your supervisor at 15, 30 and 45 days after the initial request. Requests not validated within 60 days will expire.

21. **Submit a copy of your completed “PA Supervising Physician Form” (pdf) with your initial credentialing packet or “One Packet” to Provider Support Services (providersupportservices@vanderbilt.edu).**

If you ever make changes to your formulary or supervising physician(s), please submit an updated copy of your completed document to Provider Support Services.

If you have any questions or concerns, please reach out to your Advanced Practice leader or email the Office of Advanced Practice at www.vanderbiltoap.com for assistance.