

How to cite NDWS data

The following acknowledgement should be included in any publications using these data:

Scope of Practice Regulations Data for Nurse Practitioners and Physician Assistants. National Dementia Workforce Study (NDWS). Produced and distributed by www.ndws.org with funding from the National Institute on Aging of the National Institutes of Health under Award Number U54AG084520.

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This document accompanies a dataset (NP_PA_laws) compiled to document the state laws and regulations governing the practice authority of nurse practitioners (NPs) and physician assistants (PAs) across the United States in 2024. The data was assembled using a systematic legal research process conducted exclusively through **Westlaw**, a comprehensive legal database that provides access to federal and state statutes, administrative codes, case law, and secondary legal materials. For this project, researchers focused specifically on **state statutes** and administrative regulations, as published and maintained within the Westlaw system, to ensure authoritative and up-to-date legal references.

The data collection was performed by three research assistants (RAs), all of whom were law students trained in statutory interpretation and legal research. Each RA was assigned approximately one-third of U.S. jurisdictions (including the District of Columbia) and was responsible for answering a standardized set of legal questions about each state's laws governing NP or PA practice. These questions focused on whether providers in a given state could perform certain tasks, such as prescribing controlled substances, admitting patients to hospitals, or practicing without physician supervision.

Each RA independently conducted legal research for their assigned jurisdictions by reviewing the relevant statutes and regulations using Westlaw's annotated code databases. Once their initial coding was complete, the RA transferred their work to one of the other two RAs for secondary review. The second RA was responsible for re-checking the same legal materials to confirm the accuracy of the original coding or to flag discrepancies. This peer-review process helped ensure greater reliability and consistency in the final dataset.

The resulting dataset includes annual observations from each state (and DC), provider type (NP or PA), and legal rule. Each row in the dataset corresponds to a specific legal rule for a given provider. In total, the dataset contains 765 observations, with each observation documenting the presence or absence of a specific legal authorization.

The data file includes 10 columns with the following information:

- 1. State abbreviation
- 2. State name
- 3. State FIPS code
- 4. Year
- 5. Provider: NP or PA
- 6. Law: A value of 1 indicates that the law clearly permits the provider to perform the activity. A value of 0 indicates that the law clearly prohibits it. A missing value (.) indicates that the coders could not identify clear legal authority either permitting or prohibiting the activity.
- 7. Description: A concise label identifying the subject of the legal rule (e.g., "Controlled Substances," "Medical Staff Membership"), which are expanded below in **Table 1**.
- 8. Question: The question that coders answered based on their review of the law. These questions are phrased in terms of provider authority (e.g., "Can provider prescribe all schedules of controlled substances?").
- 9. Citation: Indicates the specific citation, such as Ala. Code § 34-24-191

10. Year last changed: Indicated the year the citation last changed.

This codebook is designed to provide users with transparency about how each legal rule was defined, operationalized, and coded, and it should be used in conjunction with the dataset to understand the legal scope of practice environment for NPs and PAs over time.

Each individual law can be used on its own to answer specific questions, or laws can be combined to represent particular legal regimes. For researchers interested in "full practice authority" for NPs, as defined by McMichael and Markowitz (2023), the *Practice Authority, Prescriptive Authority, and Controlled Substances Authority* variables should all equal 1. For researchers interested in "remote practice authority" for PAs, as defined by McMichael (2023)¹, the *Remote Authority, Prescriptive Authority, and Controlled Substances Authority* variables should all equal 1. Researchers may also combine other variables to construct alternative legal regimes tailored to their specific research questions and project designs.

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¹ McMichael BJ, Markowitz S. Toward a Uniform Classification of Nurse Practitioner Scope of Practice Laws. *Medical Care Research and Review*. 2022;80(4):444-454. doi:10.1177/10775587221126777¹

Table 1. Data set "Description" variable, the corresponding question, and coding options for each law.

Description	Question	Coding
Death Certificates	Can provider sign death certificates?	1 = Yes 0 = No . = Not enough information
Primary Care Provider	Can provider be legally recognized as PCPs?	1 = Yes 0 = No . = Not enough information
Remote Authority	Can provider practice without physician on site for at least 1 month?	1 = Yes 0 = No . = Not enough information
Controlled Substances	Can provider prescribe all schedules of controlled substances? If no, list what they cannot prescribe in notes.	1 = Yes 0 = No . = Not enough information
Practice Authority	Can provider practice without legally mandated physician oversight or collaboration?	1 = Yes 0 = No . = Not enough information
Medical Staff Membership	Can provider be admitted to the medical staffs of hospitals?	1 = Yes 0 = No . = Not enough information
Prescriptive Authority	Can provider prescribe the same range of medications as physicians generally?	1 = Yes 0 = No . = Not enough information
Physical Therapy	Can provider order physical therapy?	1 = Yes 0 = No . = Not enough information