

Consensus Model for APRN Regulation

Frequently Asked Questions



1. Why was the Consensus Model for APRN Regulation developed?

The *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education* (APRN Consensus Model) is a uniform model of regulation for the future of advanced practice nursing that is designed to align the interrelationships among licensure, accreditation, certification, and education (LACE). The American Nurses Credentialing Center (ANCC) anticipates that the consistency—and clarity—that result from the new regulatory model will benefit individual nurses and enhance patient care.

2. What are the benefits of the Consensus Model to APRNs?

The uniformity we anticipate the APRN Consensus Model will produce is expected to enable APRNs to practice to the full extent of their education and licensure. In addition, the more uniform system will provide new opportunities for nurses through the possibility of ease of mobility across state lines.

3. Who developed the APRN Consensus Model?

The APRN Consensus Model is the product of a collaborative effort among more than 40 nursing organizations, including ANCC, that have an interest in making APRN practice more uniform. A complete list of all the organizations that took part is found on pages 30–40 of the APRN Consensus Model document, which can be found on the ANCC Web site at www.nursecredentialing.org/Certification/APRNCorner.aspx.

4. What role did ANCC play in developing the APRN Consensus Model?

ANCC is an active participant in the development and launch of the APRN Consensus Model. Our organization is leading the way to ensure that this transformative model will enhance the certification process. APRNs, educators, and collaborative organizations should turn to ANCC for updates regarding the APRN Consensus Model's effects on certification.

5. How is the role of an APRN defined under the APRN Consensus Model?

The APRN Consensus Model document provides a detailed definition of an APRN on pages 6–9. There are four APRN roles defined in the document:

- Certified registered nurse anesthetist (CRNA)
- Certified nurse-midwife (CNM)
- Clinical nurse specialist (CNS)
- Certified nurse practitioner (CNP)

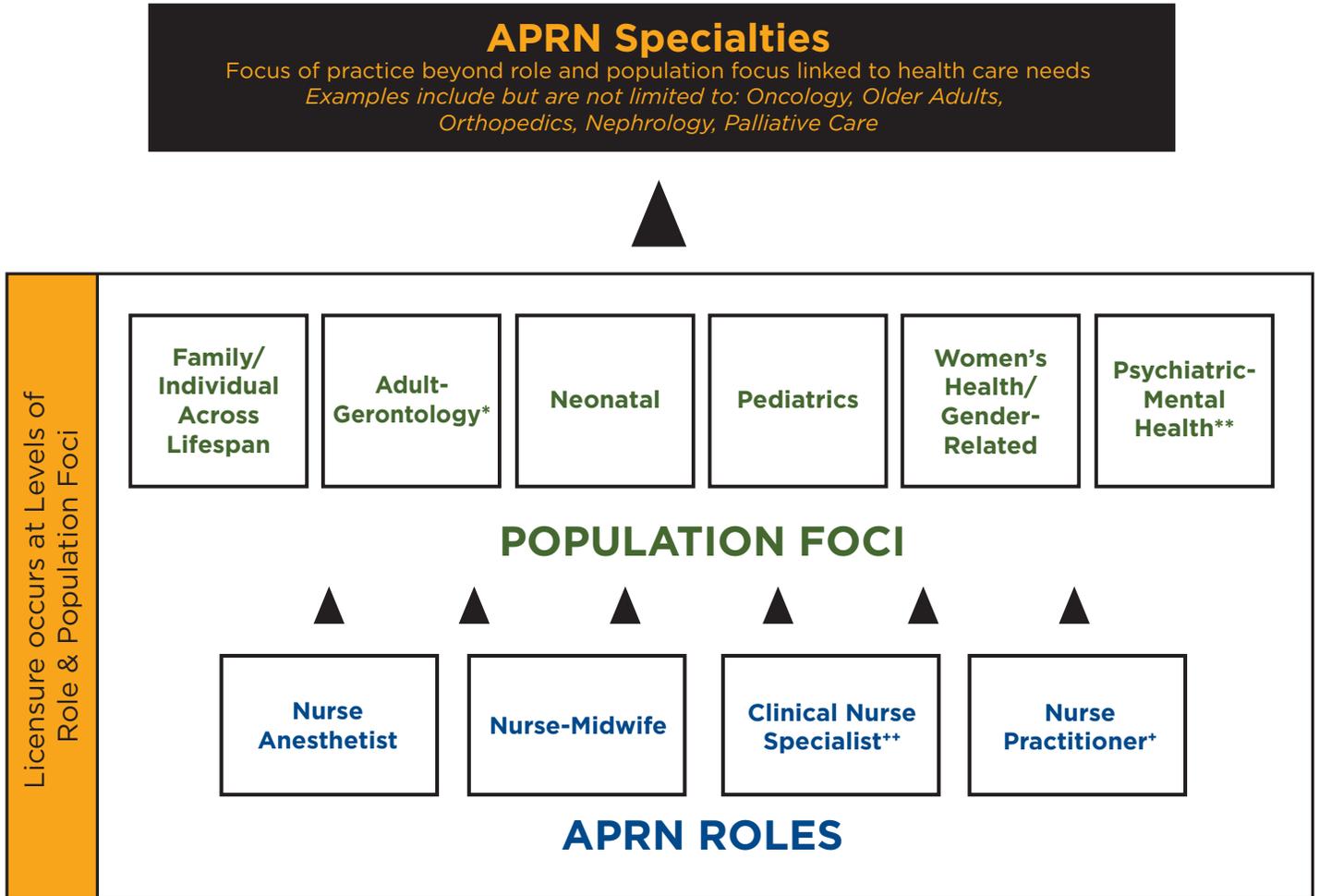
6. How will this change affect me?

The APRN Consensus Model is designed to elevate the role of APRNs and increase job satisfaction through opportunities to practice more independently.

As implementation of the APRN Consensus Model progresses, ANCC has initiated plans to change specific certification programs to more closely reflect the roles and populations required by the model regulations. Keeping your certification current through renewal will allow you to have the most flexibility as this process unfolds. If your certification lapses, you may not be able to renew your existing certification or your license to practice. Look to ANCC as your source for the information you need to successfully transition to the APRN Consensus Model.

It also is important to note that regulatory changes may affect the certification requirements in your state. ANCC advises that you track state-specific changes through the National Council of State Boards of Nursing at www.ncsbn.org/aprn.htm and the American Nurses Association (ANA) at <http://www.nursingworld.org/EspeciallyForYou/AdvancedPracticeNurses/Consensus-Model-Toolkit>.

CONSENSUS MODEL FOR APRN REGULATORY MODEL: Licensure, Accreditation, Certification & Education (LACE)



+The certified nurse practitioner (CNP) is prepared with the acute care CNP competencies and/or the primary care CNP competencies. At this point in time the acute care and primary care CNP delineation applies only to the pediatric and adult-gerontology CNP population foci. Scope of practice of the primary care or acute care CNP is not setting specific but is based on patient care needs. Programs may prepare individuals across both the primary care and acute care CNP competencies. If programs prepare graduates across both sets of roles, the graduate must be prepared with the consensus-based competencies for both roles and must successfully obtain certification in both the acute and the primary care CNP roles. CNP certification in the acute care or primary care roles must match the educational preparation for CNPs in these roles.

Under this APRN Regulatory Model, there are four roles: certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), clinical nurse specialist (CNS), and certified nurse practitioner (CNP). These four roles are given the title of advanced practice registered nurse (APRN). APRNs are educated in one of the four roles and in at least one of six population foci: family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related or psych/mental health. Individuals will be licensed as independent practitioners for practice at the level of one of the four APRN roles within at least one of the six identified population foci. Education, certification, and licensure of an individual must be congruent in terms of role and population foci. APRNs may specialize but they can not be licensed solely within a specialty area. Specialties can provide depth in one's practice within the established population foci.

* The population focus, adult-gerontology, encompasses the young adult to the older adult, including the frail elderly. APRNs educated and certified in the adult-gerontology population are educated and certified across both areas of practice and will be titled Adult-Gerontology

7. What is the timeline for implementation of the APRN Consensus Model?

The necessary coordination among licensure, accreditation, certification, and education bodies required by the APRN Consensus Model called for an incremental implementation process. Although the model was completed in 2008, its effects on certification are just beginning to take shape. The target date for full implementation of the uniform APRN regulations across the four essential elements for licensure, accreditation, certification, and education is 2015.

8. As an APRN, what can I do to prepare for this change?

Keeping your certification current through timely renewals—and staying abreast of the information and updates provided by ANCC and other key groups—will be crucial as the APRN Consensus Model is implemented.

There are three key recommendations you should keep in mind throughout the implementation process:

- The first is to **stay in touch** with the ANA and your specialty nursing organization to learn the latest developments in the transition to the APRN Consensus Model. Use ANCC's Web site at www.nursecredentialing.org/Certification/APRNCorner.aspx as your resource for questions regarding the APRN Consensus Model's effects on certification. Additional information regarding implementation of all the components of the APRN Consensus Model can be found at www.aprnlace.org.
- **Keep your certification current** for the most flexibility as this transition unfolds. After 2015, if your certification lapses, you may not be able to renew your existing certification or your license to practice. The Certification page of the ANCC Web site at <http://www.nursecredentialing.org/Certification.aspx> includes links to specialty area pages that will provide updates for your individual certification needs.
- Lastly, regulatory changes, including those to the nurse practice acts, may affect the certification and licensure requirements in your state. **Track state-specific updates** through the National Council of State Boards of Nursing at www.ncsbn.org/aprn.htm and the American Nurses Association (ANA) at <http://www.nursingworld.org/EspeciallyForYou/AdvancedPracticeNurses/Consensus-Model-Toolkit>.

9. Will ANCC certification programs change during this transition process?

(Updated 7-2012)

As implementation of the APRN Consensus Model progresses, ANCC has initiated plans to retire specific certification exams. ANCC is developing or updating certifications to more closely reflect the roles and populations required in the model. An overview of the changes can be found in the chart below. These FAQs provide additional details on the changes. If you have questions related to your individual concerns, please contact ANCC at 1.800.924.4194 or APRNInfo@ana.org.

10. What will the new certifications be and when will they launch?

(Updated 7-2012)

The official names and credentials of ANCC's new certifications will be:

- Adult-Gerontology Acute Care Nurse Practitioner with the credential of AGACNP-BC (Expected launch of January 2013)
- Adult-Gerontology Primary Care Nurse Practitioner with the credential of AGPCNP-BC (Expected launch of January 2013)
- Adult-Gerontology Clinical Nurse Specialist with the credential of AGCNS-BC (Expected launch of April 2014)

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UPCOMING CHANGES TO ANCC CERTIFICATIONS

	Current Certification Name	Current Credential	New or Updated Certification Name	New or Updated Credential	Notes	Date New Certification Launches	Last Date to Accept Application
NURSE PRACTITIONER	Acute Care Nurse Practitioner	ACNP-BC			Certification examination is scheduled for retirement		12/31/14
			Adult—Gerontology Acute Care Nurse Practitioner	AGACNP-BC		1/31/13	
			Adult—Gerontology Primary Care Nurse Practitioner	AGPCNP-BC		1/31/13	
	Adult Nurse Practitioner	ANP-BC			Certification examination is scheduled for retirement		12/31/14
	Adult Psychiatric–Mental Health Nurse Practitioner	PMHNP-BC			Certification examination is scheduled for retirement		12/31/14
	Family Nurse Practitioner	FNP-BC			No title or credential changes	8/6/13	
	Family Psychiatric–Mental Health Nurse Practitioner	PMHNP-BC	Psychiatric–Mental Health Nurse Practitioner	No change PMHNP-BC	Removed term “Family” from the certification name. In the PMH community “family” does not mean across the lifespan.	8/6/13	
	Gerontological Nurse Practitioner	GNP-BC			Certification examination is scheduled for retirement		12/31/14
	Pediatric Nurse Practitioner	PNP-BC	Pediatric Primary Care Nurse Practitioner	PPCNP-BC	The certification name and credential changes clarify that the ANCC PNP certification is primary care focused.	8/6/13	
	School Nurse Practitioner	SNP-BC			Certification was retired in 1999.		
CLINICAL NURSE SPECIALIST			Adult—Gerontology Clinical Nurse Specialist	AGCNS-BC	The certification will include content from wellness through acute care.	4/30/14	
	Adult Health Clinical Nurse Specialist	ACNS-BC			Certification examination is scheduled for retirement		12/31/14
	Adult Psychiatric–Mental Health Clinical Nurse Specialist	PMHCNS-BC			Certification examination is scheduled for retirement		12/31/14
	Child Adolescent Psychiatric–Mental Health Clinical Nurse Specialist	PMHCNS-BC			Certification examination is scheduled for retirement		12/31/14
	Gerontological Clinical Nurse Specialist	GCNS-BC			Certification examination is scheduled for retirement		12/31/13
	Home Health Clinical Nurse Specialist	HHCNS-BC			Certification was retired in 2005		
	Pediatric Clinical Nurse Specialist	PCNS-BC			The certification will be updated to include content from wellness through acute care.	4/30/14	
	Public/Community Health Clinical Nurse Specialist	PCHCNS-BC			No title or credential changes.		12/31/13

Name changes for existing certifications

In addition to the new certifications listed above, ANCC will be changing the names and/or credentials of some existing certifications.

- The Family Psychiatric Mental Health Nurse Practitioner certification will change its name to Psychiatric Mental Health Nurse Practitioner when the certification is updated in 2013, according to its regular schedule. “Across the lifespan” is a descriptor that will be used to describe the population, but it will not be included in the formal name of the certification. Family Psychiatric Mental Health NPs will not see a change to their existing credential; only the certification name is changing. The credential will remain as PMHNP-BC.
- The Pediatric Nurse Practitioner certification will change its name to Pediatric Primary Care Nurse Practitioner when the certification is updated in 2013, according to its regular schedule. The Pediatric Nurse Practitioner certification currently tests primary care competencies, and the new name reflects this. The credential will change to PPCNP-BC. Currently certified Pediatric NPs will automatically receive the new Pediatric Primary Care Nurse Practitioner credential without testing. A new certificate will be sent after the new certification launches.

11. Which certification exams will be retired and when?

(Updated 7-2012)

ANCC has decided to continue to administer the current NP and CNS certification examinations alongside the new NP and CNS certifications for a select window of time. The overlap will provide an opportunity for students to complete their current NP or CNS education programs and then be able to test for the most appropriate certification.

For currently certified nurses, we want to make sure you know that you will still be able to use your existing ANCC credential. The credential will not be retired (only the exam) and can be maintained through timely renewal using professional development activities and clinical practice hours. ANCC will accept applications using renewal eligibility option B or D—renewals using professional development activities plus testing—until December 31, 2014. At that time, renewal eligibility option A will allow for renewals using professional development activities and clinical practice hours only for the certifications listed below:

- Acute Care Nurse Practitioner
- Adult Health Clinical Nurse Specialist
- Adult Nurse Practitioner
- Adult Psychiatric & Mental Health Clinical Nurse Specialist
- Adult Psychiatric & Mental Health Nurse Practitioner
- Child/Adolescent Psychiatric & Mental Health Clinical Nurse Specialist
- Gerontological Nurse Practitioner
- *Gerontological Clinical Nurse Specialist only: Please note that applications using renewal eligibility option B or D—renewals using professional development activities plus testing—will be accepted until December 31, 2013. At that time, renewal eligibility option A will allow for renewals using professional development activities and clinical practice hours only.*

12. Why has ANCC decided to retire these certification exams?

Several NP and CNS certification exams will be retired because they will not meet the APRN Consensus Model requirements for role and/or population foci. As an active participant in the development of the model, ANCC will not offer certifications that fail to meet the requirements of the new regulatory model. We are in the process of developing certification examinations that are aligned with the requirements of the APRN Consensus Model’s uniform regulations.

13. What does it mean when a certification exam is retired?

Retirement of a certification exam means that the test will no longer be available and new ANCC board certification and credentials will no longer be awarded. APRNs whose ANCC board certification is active and in good standing may continue to renew their certification using professional development activities and clinical practice hours to maintain their certified status, as long as their certification does not lapse.

14. What will happen to my existing credential?

You may continue to use your existing ANCC credential. The credential will not be retired (only the exam) and can be maintained through timely certification renewal using professional development activities and clinical practice hours. Keeping your certification current will be crucial as the APRN Consensus Model is implemented. Even though your certification exam is retired, your credential will not be affected.

If your certification lapses, you will need to reactivate by meeting the requirements on the renewal application at the time of your renewal to maintain your credential. If your certification lapses and you cannot meet the reactivation requirements, you may not be able to renew your existing certification or your license to practice.

15. How does the renewal/reactivation process work for a certification with a retired exam?

ANCC allows currently certified nurses to maintain their credentials on certifications with retired exams through timely renewals. Renewal requirements for certifications with retired exams must be met using professional development activities and clinical practice hours only. The option to renew with professional development activities and testing will not be available.

16. What would happen if I let my certification lapse and the exam is retired?

If your certification lapses and you meet the requirements, you may reactivate your certification using professional development activities and clinical practice hours for up to two years after your expiration date. The option to reactivate your certification with professional development activities and testing will not be available for certification with retired exams. The reactivation process and procedure is detailed in ANCC's renewal application.

If your certification lapses and you do not meet the requirements for reactivation, you will not be able to renew your existing certification. This means that you may not meet state licensing, institutional credentialing, or third-party reimbursement requirements. Keeping your certification current through renewal will allow you to have the most flexibility as this process unfolds.

17. Will my certification and credentials be automatically updated to the new certification under development for my specialty? (Updated 7-2012)

The APRN Consensus Model has combined the Adult and Gerontology populations and, therefore, ANCC will also combine these populations in its new certifications. As a result, nurses who are currently dually certified by ANCC in the following areas will not need to sit for the new exam. Once the new certifications become available, the new credentials will be granted at the time of your next certification renewal (for whichever of your certifications comes up first for renewal). Your second certification will then expire on its regular schedule.

- Nurse Practitioners dually certified with both ANCC Adult NP and Gerontological NP credentials will automatically receive the new Adult-Gerontology Primary Care NP credential of AGPCNP-BC.
- Nurse Practitioners dually certified with both ANCC Acute Care NP and Gerontological NP credentials will automatically receive the new Adult-Gerontology Acute Care NP credential of AGACNP-BC.
- Clinical Nurse Specialists dually certified with both ANCC Adult Health CNS and Gerontological CNS credentials will automatically receive the new Adult-Gerontology CNS credential of AGCNS-BC.

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Nurses who do not meet the criteria above and wish to apply for the new certifications will need to meet the eligibility requirements for those certifications, including having completed a graduate educational program in the role and population that correspond directly to the certification they wish to pursue.

18. Do I need to get the new credential?

If you are currently licensed to practice in your state, there is no regulatory need to change your existing credential, as long as you intend to continue practicing in your state. Your state board of nursing or your employer will inform you of any changes.

If you wish to become licensed to practice in another state, you should check the applicable licensure requirements in that state. Even after ANCC's transition to the APRN Consensus Model is complete, certification and licensure requirements may vary from state to state. You may track state-specific updates through the National Council of State Boards of Nursing at www.ncsbn.org/aprn.htm and the American Nurses Association (ANA) at <http://www.nursingworld.org/EspeciallyForYou/AdvancedPracticeNurses/Consensus-Model-Toolkit>.

19. If I want the new credential, how do I get it?

All nurses who want to get a new credential need to apply for the certification using the current eligibility criteria for that certification, including having completed a separate educational program that corresponds directly to each certification for which they wish to apply.

We are happy to review your application if you think you will meet current eligibility for a different certification. Your application must provide evidence of the following:

- Transcripts showing completion of the graduate program (master's, postgraduate, or doctorate) that corresponds to the credential you are seeking. Work experience is not accepted in lieu of education.
- Completing a minimum of 500 faculty-supervised clinical hours in the role and population foci in which you are seeking certification.
- Meeting any and all other eligibility requirements in effect when you apply.

If you are considering a postgraduate program, then your school of nursing will conduct a gap analysis to determine the courses and clinical hours required to award you the postgraduate certificate.

20. Can I use work experience to become eligible for the new certification?

Work experience cannot be used for eligibility. Candidates must meet all the eligibility requirements to sit for a certification exam. This includes completing a graduate educational program with at least 500 hours of faculty-supervised clinical experience in each role and population focus for which you want to become certified.

21. I need to go back to school for postgraduate work. How do I make sure that I am eligible for certification?

- A. Ask your school of nursing to conduct a gap analysis of the coursework and clinical hours from your previous graduate program. The results of this gap analysis will tell you what is needed to complete the school's postgraduate program that corresponds directly to the desired certification. Work experience cannot be used for eligibility in place of faculty-supervised clinical hours.
- B. Complete the coursework and faculty-supervised clinical hours.
- C. Submit all graduate transcripts and the gap analysis conducted by the school granting your postgraduate degree with your certification application to ANCC.

22. What are the educational requirements of the new APRN Consensus Model?

For APRNs, the new regulations will require graduation from educational programs that

- Are graduate level;
- Are accredited by a nationally-recognized nursing accrediting agency;
- Prepare the graduate in one of the four APRN roles recognized by the model;
- Prepare the graduate in at least one of the six populations recognized by the model;
- Include three separate and broad-based graduate-level courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology (these are often referred to as the “3Ps”); and
- Include a minimum of 500 faculty-supervised clinical hours in the role and population.

23. Can I use population-specific coursework to show the 3Ps?

Only if the school can provide evidence that the content of the course is broad-based and meets the requirements of the APRN Consensus Model. You will be asked to submit additional documentation, including a syllabus for the course.

24. How will new APRN educational programs be sure that their graduates are prepared to meet the eligibility criteria for APRN certification and licensure?

As part of the APRN Consensus Model, the school accreditors will launch a preapproval process for new educational programs. This process will help ensure that new graduates are educationally prepared to meet eligibility requirements for certification and licensure. Existing program faculty should keep students informed of certification and licensure requirements.

ANCC has produced an APRN Faculty Tool Kit as a guide for educators. It can be found online at www.nursecredentialing.org/Certification/APRNCorner/APRNFacultyToolkit.aspx.

Additionally, in fall 2012, ANCC will launch a program to provide schools of nursing with an official confirmation of their nurse practitioner and/or clinical nurse specialist programs’ congruence with educational eligibility criteria for national certification from ANCC. This program will also provide streamlined communication between schools of nursing and ANCC regarding changes that may influence the ANCC certification applications of future graduates. For more information, please contact APRNFaculty@ana.org.

25. Will the DNP be an eligibility requirement for advanced practice exams?

(Updated 7-2012)

ANCC currently requires candidates to complete graduate work, which may include a master’s, postgraduate certificate, or doctorate. While certification eligibility can change, ANCC has no plans to require a DNP at this time.

26. Does my state require certification for NPs or CNSs?

Please contact the National Council of State Boards of Nursing at www.ncsbn.org/aprn.htm and the American Nurses Association (ANA) at <http://www.nursingworld.org/EspeciallyForYou/AdvancedPracticeNurses/Consensus-Model-Toolkit> to determine licensure requirements.