

# Beginning Employment: A Guide for the New Nurse Practitioner

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## ABSTRACT

You have successfully passed your national certification boards and are ready to seek employment. Just as the process from graduation to employment was a sequence of events, so is the process of beginning employment. This phase requires information on employment contracting, reimbursement, and coding, as well as insurance and hospital credentialing. The transition into this next phase of your career will depend on you and your future employer's experience with hiring a nurse practitioner. Even if the employer has experience, you will want to oversee that all of the pieces necessary for your success are put into place.

**Keywords:** beginning employment, billing and coding, insurance and hospital credentialing, reimbursement

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Beginning employment is a process that requires structure and organization. It starts when you have accepted a position with a physician, nurse practitioner (NP), or health care organization. It requires that the job description is in alignment with the scope of practice. In states where applicable, a review of the mandated documents describing the parameters of the NP role and those required for prescriptive authority will also need to be reviewed.

## THE EMPLOYMENT EXPERIENCE

This experience will vary depending on the employer's experience with NPs. If the employer has prior experience with NPs, your employment experience may be easier. The employment experience will also depend on the practice manager's experience with an advanced practice nurse. If there is no prior experience, you will need to take the lead role in ensuring that all the necessary documents are completed. There are many advantages to being the first NP in a practice. You can assume a leadership role and define the role as you feel best fits the practice. If you are joining another NP in the practice, you will still want to verify that all of your necessary paperwork is completed correctly.

## Employment Contract

It is recommended to have an employment contract. The employment contract provides more details of the position, specifics regarding benefits, and details of the employment arrangement. The terms of the contract should be agreeable to both parties. Consideration should also be given to having an attorney draft and/or review before signing. Examples of contracts for NPs are available at <http://j.mooreern.tripod.com/sample-contract-for-negotiation.html> or <http://www.medscape.com/viewarticle/731359>.

## Salary Negotiation

If the employer has not previously had an NP in the practice, they may look to you for salary recommendations. You can determine initial projections of revenue generation by determining the number of patients (new and existing) that you might see in a single day, averaging the evaluation and management (E/M) codes (levels 1-4) for the daily average of patients, and multiplying the E/M average by the reimbursement amount.

You can provide your employer with an estimate of the initial numbers of patients you anticipate seeing, a second estimate at 6 months of employment, and a third estimate at 1 year. Salaries may be paid in a variety of ways (Table 1).

**Table 1. Methods of Payment**

**Straight salary:** fixed amount to perform according to the job description.

**Percentage of net receipts:** payment is based on the amount of NP bills minus accounts receivable minus the NP's portion of practice expenses (which may include expense of physician consultation).

**Base salary plus percentage:** base salary is guaranteed. Additional salary may be earned if income is generated over this set amount.

**Hourly rate:** payment is made only for the hours worked.

*Data from Buppert.<sup>1</sup>*

When negotiating a salary, remember there are practice expenses, which may range from 20%–50%, associated with your employment that will need to be adjusted from the revenue that you generate. Practice expenses include but are not limited to such items as malpractice insurance, support staff for the NP, and benefits negotiated in your contract (eg, vacation, continuing education, health insurance, and office supplies).<sup>1</sup>

References are available for determining salary ranges. The 2012 National Survey of NPs and physician assistants<sup>2</sup> and Salary.com<sup>3</sup> are good resources.

### Malpractice Insurance

Malpractice insurance may be offered as part of your employment arrangement. If you are considering moonlighting or working a part-time position, you will want to purchase your own malpractice coverage. Claims made versus occurrence insurance will be your choices for malpractice insurance. The standard coverage is \$1 million per event and \$3 million maximum; specialty practices or high-risk practices may require a higher coverage limit. Occurrence covers any incident that occurred when the NP was insured. In the claims made policy, the NP is covered only when the insurance policy is active. Hospital credentialing usually requires a minimum of \$1/\$3 million coverage.

### Hospital Credentialing

Your new role may require that you obtain hospital credentialing. The privileging process can take 6 weeks to 3 months. Depending on the organization, the application process may be initiated while you are

awaiting your certification results and finalized when you have your official notification of licensure from the Board of Nursing. Most credentialing applications require a substantial amount of information that, if organized in advance, will expedite your completion of the application process (Table 2). A period of focused professional practice evaluation is implemented for all individuals initially requesting privileges.<sup>4</sup> Reviewing the hospital bylaws for NPs is recommended.

### REIMBURSEMENT

In order to be paid for your services, there are several applications that will need to be completed. Frequently these applications are completed by the practice manager. Most of the applications are available online.

### National Provider Identifier

This application (<http://www.nppes.cms.hhs.gov/>) should be completed first because the other applications often require the National Provider Identifier number. Your number will be different than the group number that your practice uses. The Health Insurance Portability and Accountability Act of 1996 mandated a standard of unique identifiers for health care providers and health plans. The purpose

**Table 2. Hospital Credentialing**

State license number
Educational background
Certificate to prescribe/furnishing number if applicable
Employment background: be able to explain employment gaps
Medicare, Medicaid, Council for Affordable Quality Health Care, NPI numbers
Procedure logs
Professional references, usually 3
Practice information: phone and fax numbers, address, contact person
Standard care agreement
Continuing education hour log
Background check
Fingerprinting
National Practitioners Database inquiry

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