

**NON-CONTROLLED MEDICATION PRESCRIBING AUTHORITY FOR ADVANCED
PRACTICE REGISTERED NURSES**

1. SUMMARY OF MAJOR CHANGES: This directive:

a. Paragraph 2: Adds Executive Director, Office of Nursing Services/Deputy Chief Nursing Officer (CNO) and Department of Veterans Affairs (VA) medical facility Chief of Staff and Associate Director for Patient Care Services/Chief Nurse Executive along with corresponding responsibilities.

b. Paragraph 2: Updates oversight responsibilities for the Under Secretary for Health; Chief Operating Officer; Assistant Under Secretary for Health for Patient Care Services/CNO; Veterans Integrated Services Network Director; and VA medical facility Director.

c. Paragraphs 3-5: Adds Oversight and Accountability, Training, and Records Management paragraphs.

2. RELATED ISSUES: VHA Directive 1350, Advanced Practice Registered Nurse Full Practice Authority, dated September 13, 2017.

3. POLICY OWNER: The Office of Nursing Services (12NUR) is responsible for the content of this directive. Questions may be directed to 202-461-6700 or vhaonsinfo@va.gov.

4. LOCAL DOCUMENT REQUIREMENTS: There are no local document requirements in this directive.

5. RESCISSIONS: VHA Directive 1074, Establishing Medication Prescribing Authority for Advanced Practice Registered Nurses, dated April 4, 2018, is rescinded.

6. RECERTIFICATION: This Veterans Health Administration (VHA) directive is scheduled for recertification on or before the last working day of April 2030. This directive will continue to serve as VHA policy until it is recertified or rescinded.

7. IMPLEMENTATION SCHEDULE: This directive is effective upon publication.

April 17, 2025

VHA DIRECTIVE 1074

**BY DIRECTION OF THE OFFICE OF THE
UNDER SECRETARY FOR HEALTH:**

/s/ M. Christopher Saslo
DNS, ARNP-BC, FAANP
Assistant Under Secretary for Health
for Patient Care Services/CNO

NOTE: *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

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NON-CONTROLLED MEDICATION PRESCRIBING AUTHORITY FOR ADVANCED PRACTICE REGISTERED NURSES

1. POLICY

It is Veterans Health Administration (VHA) policy that Advanced Practice Registered Nurses (APRNs) may only be granted the ability to prescribe if they are credentialed by the Department of Veterans Affairs (VA). **NOTE:** *This VHA directive applies to APRNs prescribing non-controlled substances who have not been granted full practice authority under 38 C.F.R. § 17.415. For additional information on policy and responsibilities related to permitting full practice authority of the two roles of APRN, Certified Nurse Practitioners (CNP), and Clinical Nurse Specialists (CNS), when they have a VA appointment and are acting within the scope of their VA employment see 38 C.F.R. § 17.415 and VHA Directive 1350, Advanced Practice Registered Nurse Full Practice Authority, dated September 13, 2017. This directive does not apply to Nurse Practitioner Health Professions Trainees (HPTs). For more information regarding NP HPTs, see [Office of Academic Affiliations Nursing Education SharePoint](#). **AUTHORITY:** 38 U.S.C. § 7301(b) and 38 C.F.R. § 17.415.*

2. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for:

(1) Ensuring overall VHA compliance with this directive.

(2) Ensuring VHA exercises its authority in defining inpatient and outpatient medication prescribing for APRNs, consistent with the Supremacy Clause; the Food, Drug, and Cosmetic Act; and Food and Drug Administration guidance on prescribing medication.

b. **Chief Operating Officer.** The Chief Operating Officer is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISN).

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Overseeing VISNs to ensure the effectiveness of and compliance with this directive.

c. **Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer.** The Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer (CNO) is responsible for:

(1) Supporting the Office of Nursing Services (ONS) with implementation and oversight of this directive.

(2) Supporting the development of mitigation or corrective actions to address noncompliance with this directive.

(3) Providing national VHA leadership, guidance, and strategic direction on all issues related to APRN prescribing authority.

d. **Executive Director, Office of Nursing Services/Deputy Chief Nursing Officer.**

The Executive Director, ONS/Deputy CNO is responsible for providing oversight to ensure that the policy standards specified by this directive are being implemented as intended and ensuring corrective action is taken when noncompliance is identified.

e. **Veterans Integrated Service Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing the Assistant Under Secretary for Health for Patient Care Services/CNO and the Chief Operating Officer when barriers to compliance are identified.

(2) Overseeing corrective actions to address noncompliance at the VISN and VA medical facilities within the VISN.

f. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with this directive and taking corrective action if noncompliance is identified.

(2) Ensuring that each APRN is credentialed utilizing VetPro in compliance with VHA Directive 1100.20(2), Credentialing of Health Care Providers, dated September 15, 2021.

(3) Ensuring that the VA medical facility complies with the prescribing authority of each of its APRNs.

g. **VA Medical Facility Chief of Staff.** The VA medical facility Chief of Staff (CoS) is responsible for:

(1) Collaborating with the VA medical facility Associate Director for Patient Care Services (ADPCS)/Chief Nurse Executive to verify credentialing of each APRN.

(2) Ensuring that APRNs at the VA medical facility prescribe non-controlled substances.

h. **VA Medical Facility Associate Director for Patient Care Services/Chief Nurse Executive.** The VA medical facility ADPCS/Chief Nurse Executive is responsible for collaborating with the VA medical facility CoS to verify credentialing of each APRN.

i. **VA Medical Facility Advanced Practice Registered Nurse.** The VA medical facility APRN is responsible for prescribing medications only if the requirements of this directive are met and the APRN has completed a nationally accredited APRN program.

3. OVERSIGHT AND ACCOUNTABILITY

a. **Internal Controls.** The internal controls in this directive are oversight responsibilities as outlined in paragraph 2 for the Under Secretary for Health; Chief Operating Officer; Assistant Under Secretary for Health for Patient Care Services/CNO; Executive Director, ONS/Deputy CNO; VISN Director; VA medical facility Director, and VA medical facility CoS.

b. **Metrics.** 100% of APRNs are credentialed utilizing VetPro in compliance with VHA Directive 1100.20(2).

4. TRAINING

There are no formal training requirements associated with this directive.

5. DEFINITIONS

a. **Health Professions Trainee.** An HPT is an individual enrolled in a health professions education program. HPT is a general term to describe undergraduate, graduate and post-graduate students, interns, residents, chief residents, fellows, advanced fellows and pre- and post-doctoral fellows. A VA HPT is appointed under 38 U.S.C. § 7405 or 7406 and participates in clinical, research and non-research activities under supervision to satisfy program or degree requirements. Some HPTs may be in non-clinical training fields but train in patient areas or use VA patient records or data in their training.

b. **VetPro.** VetPro is VHA's mandatory credentialing software platform to document the credentialing of VHA health care providers. This system facilitates completion of a uniform, accurate, and complete credentials file.

6. RECORDS MANAGEMENT

All records regardless of format (for example, paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management can be addressed to the appropriate Records Officer.

7. REFERENCES

- a. 38 U.S.C. § 7301(b).
- b. 38 C.F.R. § 17.415.

c. VHA Directive 1100.20(2), Credentialing of Health Care Providers, dated September 15, 2021.

d. VHA Directive 1350, Advanced Practice Registered Nurse Full Practice Authority, dated September 13, 2017.