Mississippi: the rules for aesthetic practice

What Mississippi's laws and boards say about who may do aesthetic treatments, who must supervise them, and who can own the practice.

Nurse practitioners: Reduced Practice

Nurse practitioners

Reduced (AANP). NPs must practice within a board-approved collaborative relationship with a Mississippi-licensed physician or dentist (Miss. Code Ann. §73-15-20); the Board of Nursing alone regulates NP licensure. A 2026 bill to end this after 3,600 hours (HB 40) died in committee. Controlled-substance limits weren't confirmed in November 2026; check with the Board of Nursing.

Medical director or supervising physician

Every procedure must be listed in the collaborative agreement uploaded to the Board of Nursing portal, and the collaborating physician must also perform it in their own practice and verify the APRN's competency (5 supervised procedures per skill). The physician reviews 10% or 20 charts a month, whichever is less, and meets the APRN face to face (in person or by video) every quarter. Practicing more than 75 miles from the physician needs medical board approval of the protocol before seeing patients (30 Miss. Admin. Code Pt. 2630, R. 1.4 and 1.8).

Delegating to RNs, estheticians and staff

APRNs may not delegate the listed aesthetic procedures to nurses or estheticians. Lasers, IPL and similar devices are the practice of medicine: only physicians, or people they directly supervise with a physician on the premises, may use them (30 Miss. Admin. Code Pt. 2635, R. 3.1).

Aesthetics

Board of Nursing guidance (revised July 2026) lists aesthetic procedures such as Botox, fillers, PRP, radiofrequency microneedling, sclerotherapy, microdermabrasion, dermaplaning and laser hair removal for family, adult and acute care NPs; neonatal, psychiatric and pediatric NPs can't provide aesthetic services. A private, infection-controlled space is required, "botox and bubblies" events are not allowed, and devices must be FDA approved or cleared and listed in the agreement. APRNs may not prescribe or dispense peptides that aren't FDA approved for human use.

Who can own the practice

The Board of Medical Licensure's corporate practice policy (Policy 3.02, revised December 2025) says the Board doesn't concern itself with the form of a physician's business arrangement, as long as the physician alone decides the method and manner of treatment and the billing and fees for medical services, with no referral inducements or kickbacks. The Board of Nursing doesn't license or regulate APRN-owned businesses, including medical spas. Confirm the entity type with a Mississippi healthcare attorney.

The biggest risk in Mississippi. Delegating injections or other listed aesthetic procedures to RNs or estheticians, running lasers or IPL without a physician on the premises, and doing procedures the collaborating physician doesn't perform.

Check it with your boards: Mississippi Board of Nursing - msbn.ms.gov and Mississippi State Board of Medical Licensure - msbml.ms.gov. Checked November 3, 2026. Rules change, so read the current rule on the board's own site before you act.

Ask S.A.G.E. next. S.A.G.E., our AI practice advisor, answers from this same Mississippi reference, free in your TMAA account, which you can set up at go.medicalaestheticsassociation.com/start-here. Try:

1. I'm an RN in Mississippi. What has to be in place before I offer injectables?
2. What must my medical director agreement cover in Mississippi?
3. What can an esthetician do in Mississippi, and what needs an order?

S.A.G.E. is not legal advice. For a binding answer, talk to a healthcare attorney in your state.