

March 18, 2013

Connecticut Legislature
Public Health Committee
Hartford, CT 06134

Re: SUPPORT for House Bill 6391 as introduced

Dear Senator Gerratana, Representative Johnson, and members of the Committee:

On behalf of the American Association of Nurse Practitioners (AANP), our Connecticut members, and the patients we serve, AANP welcomes the opportunity to comment in support of Connecticut's HB 6391. This bill will improve access and streamline care delivery. There is no downside to the passage of this legislation.

It would be unthinkable to limit a patient's care to the best of what healthcare had to offer two and three decades ago. However, that is exactly what we are doing when we keep outdated state practice laws in place. AANP encourages the Connecticut legislature to move forward and provide patients with full and direct access to twenty-first century care by supporting House Bill 6391.

There is compelling support for this legislation. Adopting the recommendation to retire the outdated collaborative agreement in order for a nurse practitioner to prescribe medications will streamline care, enhance the state's healthcare workforce, and improve access while maintaining the safety and quality of care nurse practitioners have provided for nearly five decades.

- **One-third of the nation already has similar practice laws and more than a dozen states are looking at similar legislation this year.** Sixteen states and the District of Columbia already provide patients with full and direct access to nurse practitioners services without additional regulatory links to outside health disciplines. Many of these states have had this regulatory model in place for twenty years; and no state has ever returned to a more restrictive regulatory model after adopting similar language to HB 6391. There is no evidence that in any of the direct access states that safety, quality, or patient satisfaction decreased following modernization of laws.^{1,2}
- **Nurse Practitioners are cost effective.** Multiple studies have reported on the cost effectiveness of nurse practitioner practice.
 1. A study published by the *Journal of the American Medical Association* compared the care and the resource utilization of nurse practitioners and physicians for the care of 1316 randomly assigned patients. "No differences were identified in health status, physiologic measures, satisfaction, or use of specialist, emergency room, or inpatient visits."^{3,4}
 2. Other studies have found fiscal benefits to nurse practitioner care and significant savings for state budgets in states that use nurse practitioners to their fullest potential. In 2010 the Florida legislature published a report by the Office of Program Policy Analysis and Government Accountability with the "estimates of potential cost-savings from expanding ARNP and PA scope of practice range from \$7 million to \$44 million annually for Medicaid, \$744,000 to \$2.2 million for state employee health insurance, and \$339 million across Florida's health care system."⁵

- **National healthcare and policy leaders recommend that states adopt regulatory frameworks similar to HB 6391 for improved patient choice, cost containment, and improved access.**
 1. The Federal Trade Commission reports that retiring the regulation for a collaborative agreement has “the potential to benefit consumers by expanding choices for patients, containing costs, and improving access.”⁶
 2. The Bipartisan Policy Center commented that “Physician oversight of work that can be performed autonomously by other professionals can lead to unnecessary repetition of orders, office visits and services, thus increasing total costs without any additional benefit to patients.”⁷
 3. A recent National Governors Association report recommends that “In light of the research evidence, states might consider changing scope of practice restrictions and assuring adequate reimbursement for their services as a way of encouraging and incentivizing greater NP involvement in the provision of primary health care.”⁸
 4. HB 6391 is in step with the recommendations of the Institute of Medicine, National Institute on Health Care Reform, the National Council of State Boards of Nursing, the Josiah Masey Foundation, AARP and others to provide patients with full and direct access to nurse practitioner services.

The American Association of Nurse Practitioners appreciates the opportunity to provide testimony on behalf of our members. If there are any questions regarding the AANPs comments, please contact our state health policy office at (514) 732-2320. AANP and our Connecticut membership thank you for vote in support of HB 6391.

Sincerely,



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President, American Association of Nurse Practitioners

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1. Institute of Medicine, *The Future of Nursing: Leading Change, Advancing Health* (Washington, DC: The National Academies Press, 2011).
 2. AANP State Government Affairs Office. Retrieved March 18, 2013.
 3. Munding, M.O., Kane, R.L., Lenz, E.R., Totten, A.M., Tsai, W.Y., Cleary, P.D., et al. (2002). Primary care outcomes in patients treated by nurse practitioners of physicians: A randomized trial. *Journal of the American Medical Association*, 283(1), 59-68.
 4. Lenz, E.R., Munding, M.O., Kane, R.L., Hopkins, S.C., & Lin, S.X. (2012). Primary care outcomes treated by nurse practitioners or physicians: Two-year follow-up. *Medical Care Research and Review* (61)3, 332-351.
 5. Office of Program Policy Analysis and Government Accountability: *Expanding Scope of Practice for Advanced Registered Nurse Practitioners, Physician Assistants, Optometrists, and Dental Hygienists*. The Florida Legislature, Tallahassee, Florida. December 30, 2010.
 6. Federal Trade Commission Staff Letter to Subcommittee A of the Joint Committee on Health Of the State of West Virginia Legislature, *The Review of West Virginia Laws Governing the Scope of Practice for Advanced Practice*, September 2012. Available from: http://www.ftc.gov/opp/advocacy_date.shtm.
 7. Bipartisan Policy Center. *What Is Driving U.S. Health Care Spending? America’s Unsustainable Health Care Cost Growth*. Bipartisan Policy Center, September 2012. Available from: <http://bipartisanpolicy.org/library/staff-paper/what-driving-us-health-care-spending>.
 8. National Governor’s Association. *Role of Nurse Practitioners in Meeting Increasing Demand for Primary Care* National Governor’s Association, December 2013. Available from: http://www.nga.org/cms/home/news-room/news-releases/page_2012/col2-content/nurse-practitioners-have-potenti.html