

PUBLIC HEALTH COMMITTEE

MARCH 20, 2013

RAISED BILL No. 6391 AAC THE PRACTICE OF ADVANCED PRACTICE REGISTERED NURSES.

Testimony of Amy Romano, Connecticut Affiliate of the American College of Nurse-Midwives
IN SUPPORT OF RAISED BILL No. 6391

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

Although governed in Connecticut by separate statute, nurse-midwives and nurse-practitioners are sister professions, with training and experience at the same level. The midwives in the state stand together with the nurse-practitioners to support the access to health care that Raised Bill No. 6391 protects. The Institute of Medicine has been unequivocal in its recommendation that all health care providers be licensed to practice to the full scope of their training as a way of ensuring that our citizens have the health care that they need. Any legislative requirement for a signed agreement with a physician merely creates bureaucratic barriers to health care, rather than producing higher quality of care.

All practitioners are morally and ethically bound to understand their scope of practice and collaborate accordingly with other practitioners. As an example, a general practice physician treats patients for routine complaints and regular check ups, but if a patient needs cancer care, that GP will refer them to an oncologist. If a patient has significant nutritional concerns, that GP might refer them to a nutritionist. If a patient has psychiatric issues, a psychiatrist will get involved. The general practice physician has signed agreements with none of these care providers, but the GP knows when to refer because the care of that patient is now outside of her scope of practice. Nurse practitioners function in the same way.

The available evidence demonstrates that the patient of a nurse-practitioner will have the same health outcomes and treatment course as the patient of a physician, and will be more satisfied with their care. We have direct experience here in Connecticut of nurse-practitioners in private practice and in mixed practice settings, with outcomes that are congruent with the national data. There is no demonstrable evidence that the requirement for a collaborative agreement will improve upon that 14 years of experience, but will continue to be a barrier to would be independent practitioners, thus restricting access to health care. As the pool of general practice physicians dwindles and as the Affordable Care Act increases the pool of the insured, we need to do all we can to ensure we have adequate providers for our population.

Please follow the recommendations of the Institute of Medicine and approve Raised Bill No. 6391. Thank you.

Sincerely,

Amy M. Romano, MSN, CNM,
President
The Connecticut Affiliate of the American College of Nurse Midwives

