

Public Health Committee Public Hearing – Governor’s Bill No. 36
AAC The Governor’s Recommendations to Improve Access To Health Care

Kathy Groff, APRN Testimony In Support of No. 36
February 25, 2014

Senator Gerratana, Representative Johnson and Members of the Public Health Committee:

I am writing for the fifth year in a row to ask for your support in allowing advanced practice registered nurses to practice without a written collaborative agreement with a physician. I am confident that this is the year APRNs will be successful because your committee is now very familiar with the role of APRNs and with their safety record.

To attend to the demands of the added volume of patients seeking health care under the Affordable Care Act, there is a great need today for health care providers who can work at the highest level of their scope of practice without unnecessary restrictions. The nurse practitioner role emerged in the 1960s at another time when there was a potential shortage of health-care practitioners. APRNs started out treating people living in under-served areas, rural towns and inner-cities, where there was limited access to health care, and have since expanded into other primary- and specialty-care opportunities with equal success.

I know that, by removing the requirement for a collaborative agreement, patients will benefit. Not only will they continue to have the competent care they have come to expect from APRNs, they will also have continuity of care because their APRN will be able to continue to practice even if that APRN loses a collaborating physician through that doctor’s change of job, move out of state, or death.

During most my 16 years as an APRN, I have practiced in offices where there has been no or limited physician presence. My nurse practitioner training taught me to work within my scope of practice, to consult when necessary, and to accept ultimate responsibility for my diagnoses and treatments, regardless of whether I consult with other health care providers. I also know from personal experience what a wedge that mandated piece of paper can create. I worked for several months as RN, without the ability to prescribe medications, instead of as an APRN, because I had no collaborating physician. A physician colleague, unfamiliar with the nurse practitioner role, would not sign my collaborative agreement when she replaced another physician.

So, please, let’s do what makes sense and move forward to pass Governor’s Bill #36 to ensure that Connecticut patients get the care they need.

Thank you very much.

Sincerely,

S. Kathleen Groff APRN
Family Nurse Practitioner