



PUBLIC HEALTH COMMITTEE
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Testimony IN SUPPORT of Raised Bill 36 AAC THE GOVERNOR'S RECOMMENDATIONS
TO IMPROVE ACCESS TO HEALTH CARE

Lynn Price, JD, MSN, MPH
February 28, 2014

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

Thank you for the opportunity to present testimony in support of this bill. I am Lynn Price, a family nurse practitioner, Chair of the Graduate Nursing Program at Quinnipiac University, and a member of the Connecticut APRN Society.

Some points to consider from all the testimony presented today:

1. Connecticut has an increased number of patients needing primary care and mental health services, especially among the most vulnerable of our residents.
2. Connecticut has a decreased number of physicians providing primary care and mental health services.
3. Connecticut has a well-qualified group of APRNs who can provide such services, including to the most vulnerable of our residents.
4. Current law in Connecticut, derived 15 years ago, presents untenable and unnecessary barriers to APRNs wishing to provide such needed patient services.
5. APRN practice is safe, effective, well-liked by patients, and extremely well-researched. Attached is a list of the 27 studies substantiating this (in the order in which they appear in the CTAPRNS Request submitted to DPH in August, 2013). Safe practice is well-established. Some highlights of recent research include:
 - a. States granting full practice authority to APRNs experience the greatest growth of nurse practitioners providing primary care, and thus growth in the numbers of patients receiving primary care.
 - b. APRNs practicing in "full scope" states are less likely to relocate out of the state.
 - c. Twenty jurisdictions have granted full scope of practice to APRNs, and in all of them, APRNs practice collaboratively with physicians and all other members of the health care team.
 - d. Prominent national groups have issued positive recommendations based on the evidence, including the Institute of Medicine and the National Governors' Association.

Thank you,

Lynn Price, JD, MSN, MPH

Attachment:

List of Research Studies on Nurse Practitioner Practice, Outcomes and Patient Satisfaction, from 1974 through 2013

1. Kuo et al.: States with the least restrictive regulations experienced the largest increase in patients seen by nurse practitioners. (2013)
2. Sekscenski et al.: State practice environments and the supply of physician assistants, nurse practitioners, and certified nurse-midwives (1994)
3. U.S. Department of Health and Human Services: A comparison of changes in the professional practice of nurse practitioners, physician assistants, and certified nurse midwives (2004)
4. Kalist et al.: The effect of state laws on the supply of advanced practice nurses (2004)
5. Perry et al.: State-granted practice authority: Do nurse practitioners vote with their feet? (October, 2012)
6. Newhouse et al.: Advanced practice nurse outcomes 1990-2008: A systematic review (2011)
7. Spitzer et al.: The Burlington randomized trial of nurse practitioners (1974)
8. Office of Technology Assessment: Nurse Practitioners, Physician Assistants, and Certified Nurse-Midwives: A Policy Analysis (1986)
9. Munding et al.: Primary care outcomes in patients treated by nurse practitioners or physicians: a randomized trial (2000)
10. Lenz, et al. Primary care outcomes in patients treated by nurse practitioners or physicians: two-year follow-up (2004)
11. Horrocks, et al. Systematic review of whether nurse practitioners working in primary care can provide equivalent care to doctors (2002)
12. Laurent et al.: Substitution of doctors by nurses in primary care: A Cochrane Review (2004)
13. Dierick-van Daele et al.: Nurse practitioners substituting for general practitioners: randomized controlled trial (2009)
14. Morgan et al.: Characteristics of primary care office visits to nurse practitioners, physician assistants and physicians in United States Veterans Health Administration facilities, 2005-2010: a retrospective cross-sectional analysis (2012)
15. Pearson: Annual Pearson Report NPDB & HIPDB State Ratios (2012)

16. Newhouse et al.: Policy implications for optimizing advanced practice registered nurse use nationally (2012)
17. Dill et al.: Survey shows consumers open to greater role for physician assistants and nurse practitioners (2013)
18. Kovner et al.: *Nurse Managed Health Centers*. Robert Wood Johnson Foundation Research Brief (2010)
19. American Academy of Nurse Practitioners: Nurse Practitioner Cost-Effectiveness (2010)
20. Paez et al.: Cost-effectiveness of nurse practitioner management of hypercholesterolemia following coronary revascularization (2006)
21. Coddington et al.: Cost of health care and quality of care at nurse-managed clinics (2008)
22. Eibner et al. at RAND: Controlling health care spending in Massachusetts: an analysis of options (2009)
23. Traczynski et al.: Nurse practitioner independence, health care utilization, and health outcomes (2013)
24. Carruth et al.: The financial and cost accounting implications of the increased role of advanced nurse practitioners in U.S. healthcare (2011)
25. *Governor's Hospital Strategic Task Force, Findings and Recommendations* (2008)
26. Holm et al. *Connecticut Health Care Workforce Assessment* (2008)
27. Pittman et al.: Physician wages in states with expanded APRN scope of practice (2012)