Pennsylvania patients face major changes and challenges today and in the coming years. Thankfully, nurse practitioners are ready, willing, able – and nationally certified – to expand access to health care across the state.

Elected officials have an opportunity to ensure more people have access to quality care by modernizing state law and allowing these highly trained professionals to serve patients to their fullest potential. **House Bill 765 and Senate Bill 717** will make these important changes a reality. Here’s why it’s so important to support them:

- **Patients come first.** Nurse practitioners provide proven, high-quality care to patients. Over the past 40 years, every major study on NP care – over 100 – have shown that nurse practitioners’ patient health outcomes are as good or better than other providers. That’s because their education guides NPs to take a holistic approach. They look at – and listen to – the entire patient.

- **Pennsylvanians need more primary care.** The shortage of primary care providers already impacts residents – particularly in underserved rural and urban areas. Now, more than 600,000 Pennsylvanians are eligible to gain insurance coverage through Medicaid expansion. Over half of all NPs are educated to provide primary care. We must act quickly to ensure Pennsylvanians can depend on access to quality health care in the years to come.

- **Nurse practitioners serve rural communities.** Current regulations limit access to care for rural Pennsylvanians. Nurse practitioners are twice as likely as physicians to serve rural communities, and NPs in states with full practice authority are more likely to practice in rural areas compared to states – like PA – without it.

- **It saves money.** Outdated regulations put red tape between nurse practitioners and patients. Free market advocates support full practice authority for nurse practitioners because increased competition in health care is good for patients – and consumers. Unlike other proposals to expand access to care, full practice authority won’t cost taxpayers a dime.

- **Experience and experts agree.** 20 states and Washington, DC have already adopted full practice authority. The Institute of Medicine, the AARP, the National Governor’s Association, the Federal Trade Commission, and the National Conference of State Legislatures have all endorsed the policy.

- **Team-based, patient-centered care will remain strong.** Patients are healthiest when they have the ability to access the health care system easily and affordably. Nurse practitioners are trained to work as part of a health care team – it is part of our core philosophy. Just as physicians need no mandate to refer patients to a specialist, NPs work with other health care professionals any time it benefits the health of a patient.

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**What is a nurse practitioner?** Nurse practitioners have advanced education, with master’s degrees or doctorates, and are nationally certified. Among their many services, NPs order, perform and interpret diagnostic tests; diagnose and treat acute and chronic conditions such as diabetes, high blood pressure, infections and injuries; prescribe medications and other treatments; and manage a patient’s care. Over 100 studies have shown that patient health outcomes from NP-led care are the same as, or better than, physician-led care.

**What is full practice authority?** It is a policy that eliminates the mandate that each NP obtain business contracts, called collaborative agreements, with two physicians in order to practice. By removing barriers and lowering costs, full practice authority expands access to high quality, affordable health care. 20 states and Washington, DC currently have full practice authority in place.