

Bill would expand roles of nurse practitioners

Pottsville Republican Herald

Vicki Terwilliger

4/7/17

<http://republicanherald.com/news/bill-would-expand-roles-of-nurse-practitioners-1.2177592>

Nurse practitioners in Pennsylvania are watching state legislation that may affect the way they perform their profession through more autonomy.

If passed, many argue Senate Bill 25 could mean better health care access and modernize the Professional Nursing Law. It “would remove unnecessary state regulations that prevent advanced practice registered nurses from treating patients to the full extent of their education and training,” Sen. Camera Bartolotta, R-46, who introduced the bill in February, said.

Sen. David G. Argall, R-29, Rush Township, is one of the bill’s 29 co-sponsors.

“We support passage of the legislation and feel it would improve patient care and access to care by increasing the pool of qualified caregivers,” Thomas Whalen, MD, executive vice president and chief medical officer, Lehigh Valley Health Network, said.

Meanwhile, opponents, including The Pennsylvania Medical Society, say increasing clinical authority of certified registered nurse practitioners is not an appropriate solution. Those opposed to SB25 note that CRNP education and training time is not as extensive as that of physicians. A CRNP is a type of APRN.

Shortage

“A study commissioned by the Association of American Medical Colleges released in March shows demand for physicians continues to grow faster than supply and that trend is expected to continue through at least 2030,” Whalen said. “LVHN is no exception and we continue to recruit physicians and other advanced practice clinicians including nurse practitioners, especially for many of our more rural hospital and outpatient locations where physician shortages are more pronounced. In keeping with the industry trends, we are in need of additional nurse practitioners. We have 286 throughout the health network, including 15 at the two Lehigh Valley Hospital-Schuylkill sites in Pottsville. There are 223 serving our LVH-Cedar Crest, LVH-Muhlenberg and LVH-Hazleton locations and 48 at LVH-Pocono. The number of NPs is usually proportionate to the number of physicians practicing at a location.”

Agreement

The Pennsylvania State Nurses Association also supports the legislation. SB25 would permit qualified APRNs to practice in their field of specialty independent of a physician after they fulfill a three-year, 3,600-hour collaboration agreement with a doctor. As the law stands in Pennsylvania, a nurse practitioner must have a collaborative agreement with a physician and the physician gets paid for having that collaborative agreement, according to Betsy M. Snook, Master of Education, Bachelor of Science in nursing, RN, who is CEO of the Pennsylvania State Nurses Association, Harrisburg.

“What we hope to do is disengage from that collaborative agreement,” Snook said.

The bill would help patients gain better access to health care, she said, if nurse practitioners are able to function independently. There are 11,349 Advance Practice Nurses in the state who have an active license; and 4,500 family doctors, residents and medical students, according to Snook. "We need this to pass; it's going to help citizens," she said.

Benefit

"I think the biggest benefit of this legislation would be in rural areas where physician shortages are most prominent," Whalen said. "While this bill should provide additional incentive for NPs to stay in Pennsylvania, finding enough of them as well as doctors to serve in these locations will remain a challenge, but this helps. There is no downside to the bill, only the upside of improving care by increasing access to quality care."

Snook agreed, and said NPs are primary care providers, not providers of advanced medical care or special care. "They're not trying to be physicians and are practicing within their scope," she said. In other states which have similar legislation, "it's working fine," she said, and added there has been no harm data provided for nurse practitioners working independently.

There are four types of advanced practice registered nurses, according to Snook. They are: certified registered nurse practitioners, certified registered nurse anesthetists, certified midwives and clinical nurse specialists. All are registered nurses with advanced training. Nurse practitioners can hold their own Drug Enforcement Administration license and are able to write prescriptions, she said.

Expanding practice authority for nurse practitioners would improve availability of health care, supporters say. "Nearly 35 percent of Pennsylvanians live in an area or population group with inadequate primary care access," www.pasenategop.com states. Twenty-one states and Washington, D.C., have adopted full practice authority for APRNs.

The Senate approved legislation similar to Bartolotta's during the 2015-16 legislative session. SB25 was referred to the Senate Consumer Protection and Professional Licensure Committee Feb. 15.

Delegation

Argall also introduced legislation, Senate Bill 518, which the PSNA supports. SB518 and its companion bill in the house, HB820, sponsored by Rep. Jim Cox, R-129, Sinking Spring, focus on "nurse delegation." The delegation bill started with the association, Snook said: "We submitted the language."

SB518 would amend the Professional Nursing Law to provide registered nurses with the authority to delegate non-nursing care tasks. "Currently, nursing laws do not permit RNs to delegate tasks that do not require nursing judgment or substantial skill. With the lack of delegation language in the Nurse Practice Act, many RNs are unaware that they cannot delegate, but do so on a daily basis, potentially putting their careers in jeopardy," according to a senate memorandum from Argall.

"Registered nurse delegation is the transfer of responsibility for the performance of a task from one individual to another while retaining accountability. With the changing health care environment and evolving role of the RN, the need to delegate, assign and supervise are critical," the memorandum says.

Argall sponsored Senate Bill 853 last session and he's "cautiously optimistic" about the legislation this session. The present bill, SB518, is in the Senate Consumer Protection and Professional Licensure Committee. Argall plans to talk with the committee chairman about it.

"I've been a strong proponent through the years for our local nurses and I've seen firsthand the great work they do every day caring for my parents over the years. My proposal would simply allow registered nurses to do what they are trained to do in school — delegate tasks to assist in the care of patients. The legislation doesn't affect the patient, in fact, we ensure that the delegation does not jeopardize the patient's health," Argall said. "Rural areas rely heavily on registered nurses and nurse practitioners. I'm pleased that the Pennsylvania State Nurses Association supports my legislation, Senate Bill 518, and I'm optimistic that we can finally get this much-needed tweak to the law across the finish line."

Opposition

The Pennsylvania Medical Society opposes Senate Bill 25. According to www.pamedsoc.org, "PAMED supports physician-led, team-based care that emphasizes increased coordination over provider autonomy. PAMED opposes Senate Bill 25, which allows CRNPs to practice independently and eliminates the requirement they collaborate with physicians."