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Testimony in Favor of SB 481

Senate Health Policy Committee

Senate Hearing Room, Ground Floor, Boji Tower, Lansing

Presented by Debra Nault, RN,

Associate Executive Director of Nursing Practice

Good afternoon. Thank you, Mr Chair and members of the committee, for allowing me to testify in support of Senate Bill 481 today. My name is Debra Nault, and I have been a registered nurse in Michigan for 35 years. I am the Associate Executive Director of Nursing Practice at the Michigan Nurses Association. Prior to my current position I was a Labor & Delivery nurse at Sparrow and have been a Certified Nurse Midwife for nearly 15 years. I am also part time faculty at MSU's College of Nursing.

We are glad to be part of the discussion that addresses important issues related to healthcare and nursing practice. State legislation regarding the legal scope defining our practice, often legally restricts the care we can provide. According to the Robert Wood Foundation, what Advanced Practice RNs are able to do after graduation varies widely across the country for reasons that are not related to their ability, education, or experience, but rather to the political decisions of the individual state. No studies suggest that APRNs are less capable than physicians to deliver care that is safe, effective, and efficient or that care is better in states with more restrictive scope of practice regulations.

Evidence from the Foundation also shows that APRNs provide quality care for all ages of patients, including those with acute and chronic illnesses, promote health maintenance, and spend more time with patient education. The trend over the past 20 years on the part of state legislatures has been to expand scopes of practice for nurses. The experience of states that have led these changes offers important data for those who continue to believe that patient care may be adversely affected, or that expanded nursing practice autonomy threatens the professional and economic roles of physicians. Research in Massachusetts demonstrated that utilizing nurse practitioners and physician assistants to their full scope of practice could save the state billions of dollars over a 10 year time period. Improved quality and patient satisfaction, with a reduction in costs has been demonstrated at the Veterans Administration Health System, Geisinger Health System, and Kaiser Permanente.

This bill is particularly important as Michigan has a large rural population and may face a shortage of primary care physicians. 54% of Michigan Nurse Practitioners are currently working in Primary Care. The original language in the Public Health Code did not specifically address Advance Practice Nursing, and the CNS role was not identified. These areas of nursing have developed extensively over the last several decades, creating a need for regulatory language to reflect the advances in practice. The list of

prescribers in the Code should acknowledge the already well established practice of prescriptive authority by including Nurse Midwives and Nurse Practitioners.

As part of the IOM report, *The Future of Nursing: Leading Change, Advancing Health*, the committee considered the roadblocks that nurses face at all levels, taking note of the legal barriers in many states that prohibit advance practice registered nurses (APRNs) from practicing to their full education and training. This diverse committee of *national experts* determined it is time to eliminate the outdated regulations and organizational and cultural barriers that limit the ability of advanced practice nurses to practice to the full extent of their education, training, and competence.

The U.S. is transforming its health care system to provide quality care, which will hopefully lead to improved health outcomes, and the nursing profession plays a significant role. The current conflicts between what APRNs **can** do based on their education and training, and what they **may** do according to state and federal regulations must be resolved.

Thank you again for the opportunity to testify in support of Senate Bill 481 today.