

Leta Howard

From: Angela Reed <angelareed@chartermi.net>
Sent: Wednesday, June 06, 2012 9:39 PM
To: Leta Howard
Subject: SB 481

Senator Marleau, Senator Robertson, Senator Emmons, Senator Hune, Senator Jones, Senator Schuitmacker, Senator Warren and Senator Gleason,

I am writing to express my commitment to providing high quality, low cost primary health care to those in need in our great State of Michigan. This commitment is one that I share with my Advanced Practice Nursing Colleagues. In order to achieve our mutual goals, the Senatorial Health Policy Committee must allow the advancement of SB 481 out of committee and to the Senate floor for a vote by the legislators. As a Nurse Practitioner, I urge you to support the decision to release SB 481 for a vote. SB 481 is an essential tool to enable the Michigan legislature the ability to provide the citizens of our great State with safe, effective, low-cost, quality providers when choosing a personal health care provider. Advanced Practice Nurses (APRN's) are educated and trained to provide 80-90% of primary care independently of our physician colleagues, yet our current legislative rules in Michigan do not support this. SB 481 would allow APRN's the ability to practice to our full scope of education and training. In fact, the Bill would allow us to practice without unnecessary delays in providing seamless care to our patient populations. Specifically the ability to order Durable Medical Equipment (DME), Speech Therapy (ST), Physical Therapy (PT) and write for prescriptions under our own license, and continue to maintain collaborative practice with the whole team of healthcare providers.

Advanced Practice Registered Nurses (APRN's) are ready and willing to assist Michigan citizens in obtaining their health care needs. With the arrival of over 630,000 newly insured citizens by 2014, the legislature cannot afford to unfairly restrict the practice of capable health care providers that are ready to serve. With the ever-growing population of physicians choosing specialty practice over primary care out of medical school, the legislature should be aware of the needs of the citizens of Michigan to have access to quality, affordable primary care services. In fact, according to Laurie Schudder, DNP, NP in her article "Growth of the Nurse Practitioner Workforce" features on Medscape that highlights a recent study by Auerbach (2012) published in *Medical Care* demonstrated that:

"the NP workforce can be predicted to continue to grow steadily, with an additional 6000-7000 NPs entering the profession annually. This will represent a 94% increase in the number of NPs between 2008 and 2025. When the analysis is limited to NPs who consider their position title to be "NP" rather than administrator, educator, or some other role, the workforce is projected to grow from 86,000 FTEs in 2008 to 198,000 FTEs in 2025, an increase of 130%. From 1992 to 2008, the percentage of NPs who considered their position title to be "NP" increased from 47% to 67%.

The influence that the growth of the NP workforce will have on physician/NP ratios is of critical importance. Currently, that ratio is 5:1 but it is anticipated to fall to 3:1 by 2025. When limited to clinicians practicing in primary care (where approximately half of all NPs are assumed to practice) the ratio declines from its current 4:1 to only 2.3:1."

With or without the implementation of the Affordable Care Act in Michigan, our State will be in urgent need of safe, effective, low-cost, quality healthcare providers that are willing to serve ALL populations. APRN's have an established record of commitment to care and treat medically underserved populations, in both rural and low socioeconomic areas (please see <http://www.nursingworld.org/DocumentVault/APRN-Resource-Section/Understanding-APRN-Distribution-in-Urban-and-Rural-Areas-Using-NPI-Data-Report.pdf>). I respectfully refer you to the 2010 Institute of Medicine report that demonstrates the untapped wealth that is the Advanced Practice Nurse. The report demonstrates the need to allow APRN's to practice to the full education and training that we have received. Not only does it highlight the quality and safety with which we serve our populations, the report also highlights our cost-effectiveness in delivering a high standard of care.

The Future of Nursing: Leading Change, Advancing Health, the Institute states, "Nurses have the opportunity to play a central role in transforming the health care system to create a more accessible, high-quality, and value-driven environment for patients. If the system is to capitalize on this opportunity, however, the constraints of outdated policies, regulations, and cultural barriers, including those related to scope of practice, will have to be lifted, most notably for advanced practice registered nurses(p.85)." Barbara J. Safriet, JD, LLM is also quoted in the report stating, "As decision makers at every level wrestle with the urgent need to broaden access to health care, three challenges have become clear. The care provided must be competent, efficient, and readily available at all stages of life; it must come at a cost that both individuals and society at large can afford; and it must allow for appropriate patient choice and accountability. Among the options available to promote these goals, one stands out: wider deployment of, and expanded practice parameters for, advanced practice nurses (APNs). The efficacy of this option is uniquely proven and scalable. These well-trained providers—including nurse practitioners, nurse midwives, nurse anesthetists, and clinical nurse specialists—can and do practice across the full range of care settings and patient populations. They have proven to be valuable in both acute and primary care roles, and as generalists as well as specialists.² By professional training as well as by regulatory and financial necessity, they have emphasized coordinated and cost-effective care, and they have tended more than other providers to establish practices in traditionally underserved areas(p.443)."

As an Pediatric Nurse Practitioner, my colleagues and I are specifically trained in health promotion, disease prevention and management of acute and stable chronic illnesses for specialized populations. Our education, training and experience as nurses provided us with a unique perspective on approaching health through patient-centered care in unique settings to reduce health disparities that exist in our State, and the ability to do so through interdisciplinary care coordination and case management, as well as expanding access to Health Homes. The current legislative environments limit our ability to order essential services to our patient populations, including Durable Medical Equipment (DME), speech therapy, physical therapy, and prescription medications. This delays care to the patient populations we serve, as well as the care provided by our physician colleagues, by diverting needed time to track down our physician colleagues through time consuming practices that interfere with direct care. The requirements that require physician signatures for such services, do not reduce cost or safety of the patients we serve. In fact, I would argue that they increase cost and do not increase safety. Cost is increased through the time commitment required by both providers to continue this unnecessary "supervision" of capable providers. In addition, the safety of the patient population is well-maintained with the collaboration that exists to prevent medication errors between prescribing providers and pharmacists. In fact, it

would be much easier and safer to have a prescribed medication reflect the name of the prescribing provider, rather than the often nameless face of the collaborating physician that may not be known to the patient, and or place the physician in a position to take responsibility for a prescribed medication for a patient they may have no contact and or knowledge.

Advanced Practice Nurses are prepared, competent, efficient, affordable providers that currently practice in a multitude of care settings and with a multitude of patient populations. We are here and willing providers that would appreciate your support in making the legislative environment conducive to supporting the health and wellness and safety of Michigan's citizens.

Respectfully,

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