REQUESTING THE ARKANSAS LEGISLATIVE COUNCIL REFER TO THE HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND LABOR A STUDY TO REMOVE THE COLLABORATIVE PRACTICE AGREEMENT REQUIREMENT PLACED ON ADVANCED PRACTICE REGISTERED NURSES.

WHEREAS, advanced practice registered nurses are nurses with advanced education and clinical competencies in providing care to diverse populations in a variety of settings; and

WHEREAS, advanced practice registered nurses are certified, or licensed, and practice in all fifty (50) states; and

WHEREAS, advanced practice registered nurses in the State of Arkansas must obtain a collaborative practice agreement with a physician to have prescriptive authority under Arkansas Code § 17-87-310; and

WHEREAS, a collaborative practice agreement is a written plan that identifies a physician who agrees to collaborate with an advanced practice registered nurse in the joint management of the health care of the advanced practice registered nurse's patients and that outlines procedures for consultation with or referral to the collaborating physician or other healthcare professional as indicated by a patient's healthcare needs; and

WHEREAS, twenty-one (21) states authorize advanced practice registered nurses to have full practice authority that includes full prescriptive authority without supervision; and

WHEREAS, according to a 2010 report by the Center to Champion Nursing in America, nearly forty (40) years of research consistently support the high quality and cost-effectiveness of advanced practice registered nurses; and

WHEREAS, according to a 2010 report by the Center to Champion Nursing in America, studies since the 1960s have found no difference in health outcomes, including patient health status, number of prescriptions written,
return visits requested, or referral to other providers, of care delivered by
an advanced practice registered nurse or physician; and

WHEREAS, collaborative practice agreements between advanced practice
registered nurses and physicians do not increase patient safety or bring
added value to the healthcare system, but add to the cost of care for the
consumer; and

WHEREAS, negative impacts of mandatory collaborative practice
agreements include without limitation:
   (1) Potential interruption or closing of an advanced practice
       registered nurse-operated clinic due to a loss of a collaborative practice
       physician;
   (2) Significant added cost to overhead of the practice due to
       higher fees charged by many collaborative physicians, according to a 2015
       research report issued by the RAND Corporation;
   (3) Decreased healthcare access by adding a barrier for advanced
       practice registered nurses who would like to establish a new clinic,
       according to a 2015 research report issued by the RAND Corporation;
   (4) Inhibitions to the establishment of new healthcare access
       points in rural and medically underserved areas of the state, according to a
       2015 research report issued by the RAND Corporation; and
   (5) Disincentives for new graduates of advanced practice
       registered nurse programs to remain in the state to practice, according to a
       2015 research report issued by the RAND Corporation; and

WHEREAS, often the collaborative practice physician is not on-site or
even within close vicinity of advanced practice registered nurses who are
practicing in a rural community; and

WHEREAS, a 2012 report by the National Governors Association found that
most studies found that health care provided by an advanced practice
registered nurse "is comparable" to health care provided by a physician "on
several process and outcome measures" and advanced practice registered nurses
"may provide improved access to care"; and
WHEREAS, a 2010 report by the Center to Champion Nursing in America states that "no study establishes a basis for requiring that physicians supervise" advanced practice registered nurses; and

WHEREAS, a 2014 report by the Federal Trade Commission found that "additional scope of practice restrictions, such as physician supervision requirements, may hamper" the ability of advanced practice registered nurses to provide primary care services that are within the scope of their education and training; and

WHEREAS, the following major groups and organizations support more autonomy for advanced practice registered nurses:

- (1) The National Governors Association;
- (2) The Institute of Medicine;
- (3) The American Association of Retired Persons; and
- (4) The Federal Trade Commission; and

WHEREAS, to increase patient access to health care, reduce healthcare costs, and promote efficient and timely health care in the State of Arkansas, the General Assembly should modernize the scope of practice laws for advanced practice registered nurses by removing the mandatory collaborative practice agreement,

NOW THEREFORE,

BE IT PROPOSED BY THE ARKANSAS LEGISLATIVE COUNCIL OF THE NINETIETH GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

THAT the Arkansas Legislative Council refer to the House Committee on Public Health, Welfare, and Labor a study to remove the collaborative practice agreement requirement placed on advanced practice registered nurses.

Respectfully submitted,

Representative Karilyn Brown
District 41

By: JMB/JMB