



## **Michigan Primary Care Association**

### **Senate Reforms, Restructuring and Reinventing Committee, February 6, 2013 Doug Paterson, MPA, Director of State Policy Supporting SB 2 – Advanced Practice Registered Nurse (APRN) Licensure**

My name is Doug Paterson and I am representing the 35 Federally Qualified Health Center organizations that comprise the Michigan Primary Care Association – and more importantly, the 600,000 Michigan residents who depend upon these Health Centers for their health care needs. I am testifying in support of SB 2, predicated on our belief that Advanced Practice Nurses offer accessible, quality, and cost-effective care that is especially needed in and among medically underserved areas and underserved populations of our state.

Collectively our member organizations operate over 220 Health Center sites throughout Michigan. Every site is located in or serves a federally recognized Medically Underserved Area or Population. Currently in Michigan, there are 221 federally designated Primary Care Health Professional Shortage Areas and 112 Medically Underserved Area or Population designations. These deem nearly 1 million Michigan residents as underserved. Put simply, the presence of these designations means there are not enough medical providers to adequately serve these areas and populations. In order to immediately quell today's shortages, the US Health Resources & Services Administration cites that 444 provider FTE would be required.<sup>1</sup>

As each of you has probably seen or heard, data on Michigan's looming health workforce crisis is stark. A 2006 Michigan workforce study projected that Michigan will be short 4,400 primary care physicians in 2020.<sup>2</sup> Furthermore, a 2008 study showed that, among active physicians, about 47 percent are age 55 or older and will reach retirement in the next 10-15 years. In addition to aging physicians, it is well established that the overall aging of Michigan's population due to the baby boom phenomenon will drive greater demand for services. If these facts are accepted, then Michigan policy makers are compelled to develop a plan that will help increase the numbers and types of providers that will enter the medical field in our state.

As an association that delivers primary care to Michigan residents, we believe part of the plan must include more effective use of APRNs, which would be afforded with passage of SB 2. APRNs play a vital role in providing primary care services in Michigan, especially because they tend to disproportionately provide care for the underserved populations in both urban and rural areas.<sup>3,4</sup> Since the passage of the public health code in 1978, the training and practice of nursing has changed dramatically. Advanced Practice Nurses are now training in clinical practice in record numbers and Michigan needs to create an environment that not only takes advantage of these practitioners, but also invites them to practice and remain in our state.

*Michigan Primary Care Association is a leader in building a healthy society in which all residents have convenient and affordable access to quality health care. Its mission is to promote, support, and develop comprehensive, accessible, and affordable quality community-based primary care services to everyone in Michigan.*

Currently, 16 states and DC allow Nurse Practitioners (NPs) to independently prescribe and practice without written physician delegation. Michigan is competing with these states for health care providers no differently than we are competing for businesses to come to the state. The same cases can be made for both. As a result, we must create an environment that delivers safe and high-quality care, and is also friendly and open to people seeking to practice in Michigan.

We believe that SB 2 is a critical tool in assuring that in coming years people can find providers willing, able and qualified to provide their health care needs.

Thank You

Doug Paterson, MPA  
Director of State Policy  
Michigan Primary Care Association

### References

<sup>1</sup>US Health Resources & Services Administration. (2012). HRSA Data Warehouse, HPSA and MUA/P Statistics by State

<sup>2</sup>Center for Health Workforce Studies. (2006). Michigan Physician Supply and Demand Through 2020. Retrieved June 5, 2012 from [http://ihcs.msu.edu/pdf/Michigan\\_Physician\\_Supply\\_Demand\\_Through\\_2020.pdf](http://ihcs.msu.edu/pdf/Michigan_Physician_Supply_Demand_Through_2020.pdf)

<sup>3</sup>Grumbach, K et al. (2003). Who is Caring for the Underserved? A Comparison of Primary Care Physicians and Non-physician Clinicians in California and Washington. *Annals of Family Medicine*, 1(2), 97-104

<sup>4</sup>The Nursing Workforce Issues in Michigan. (2002). Retrieved July 2, 2010, from <http://web1.msue.msu.edu/msue/iac/transition/papers/NursWork.pdf>

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