Division of Nursing

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February 23, 2015

Dear Chairman Shirkey:

I understand that SB 68 is currently before the Senate Health Policy Committee. SB 68 will modernize Michigan's healthcare regulatory environment by defining the scope of practice for Advanced Practice Registered Nurses (APRNs) in the Public Health Code and enable these highly trained providers to practice to the full extent of their advanced education, license, national certification, and competencies within their specialty role.

Specifically, SB 68 provides licensure and a defined scope of practice for Certified Nurse Practitioners (CNPs), Certified Nurse Midwives (CNMs), and Clinical Nurse Specialists (CNS).

APRNs want to ensure that all Michigan residents obtain access to quality healthcare. Michigan has 507 communities designated as Health Professional Shortage Areas (HPSAs), and the misdistribution of health care providers will continue to limit access in rural and urban underserved urban communities. Given this, new language was added to SB 68 that creates the APRN Health Resource Shortage Area Fund. This fund will provide grants to APRNs who begin employment in a Health Resource Shortage Area after the effective date of the Act. This fund is completely self-sustaining through the APRN licensure fee and does not use any state funds.

Advanced Practice Registered Nurses are an essential part of a patient's healthcare team. Their advanced nursing education and training make them qualified to provide healthcare services and manage patient's health within a defined scope of practice. Decades of evidence-based research shows APRNs provide high-quality healthcare services, have high patient satisfaction rates, decrease healthcare costs, and increase access to healthcare. There are numerous evidence-based studies from other states that attribute healthcare cost savings when APRNs are able to practice to the fullest extent of their education, training, and national certification.

A recent study released by the Economic Alliance of Michigan suggests advanced practice registered nurses with full practice authority will not hinder primary care physicians in the state of Michigan, but instead, allow more access to primary care for residents. The study's data demonstrates no adverse relationship between the populations of nurse practitioners and primary care physicians practicing in states that have allowed an autonomy for APRNs. What is clear is that the number of primary care providers grows in the time period after similar legislation has been passed.

I urge you to bring SB 68 to a vote in Senate Health Policy Committee.

Sincerely,

Sue Idczak, PhD, RN, CNE