

Health and Human Services Committee

LB 916

January 31, 2014

**Dr. Joseph Acierno, Chief Medical Officer
Division of Public Health
Department of Health and Human Services**

Good afternoon Senator Campbell and members of the Health and Human Services Committee. My name is Dr. Joseph Acierno (J-O-S-E-P-H - A-C-I-E-R-N-O). I am the Chief Medical Officer and Director of the Public Health Division in the Nebraska Department of Health and Human Services. I am testifying on behalf of the Department in opposition to LB 916.

LB 916 makes revisions to the Nurse Practitioner Act. This bill would allow a Nurse Practitioner to practice without an integrated practice agreement with a collaborating physician.

Currently, there is a requirement for an integrated practice agreement to ensure that there is a written agreement between a nurse practitioner and a collaborating physician to provide for the delivery of health care through an integrated practice.

Currently, the newly licensed nurse practitioner is required to have two thousand (2000) hours of supervised practice. This bill does not provide for any supervision or mentorship for new, inexperienced nurse practitioners. There should be some form of supervision or mentorship for new nurse practitioners. Not only are they lacking experience as a nurse practitioner, but in some cases they may have graduated as a nurse practitioner without having first practiced as an RN. It is not in the best interests of the public to eliminate the requirement for an integrated practice agreement for new nurse practitioners.

Eliminating the integrated practice agreement with a physician removes the assurance that the nurse practitioner has at least one physician on file who has agreed to serve in a collaborative capacity.

Currently, there is a provision in the statute for the Advanced Practice Registered Nurse (APRN) Board to waive the requirement for an integrated practice agreement under certain circumstances. We believe this provision provides a sufficient avenue for nurse practitioners who are practicing in an area where there is a shortage of health care services, are unable to find a collaborating physician to sign a practice agreement, and who meet the requirements to practice without protocols. We recognize that there is an increase in nurse practitioners who report having difficulty obtaining integrated practice agreements. To date, there have been 10 nurse practitioners who have requested and been granted waivers.

The department regards it to be in the best interests of the public to retain the requirement for an integrated practice agreement. My Credentials Review Process Report (commonly known as the 407 Report) provides additional information on this matter; and copies of this Report have been provided to you electronically.

I would be happy to answer any questions.