October 15, 2020

Technical Review Committee
407 Process for APRN’s, CRNA’s, CSN’s, and CMW’s
c/o Ron.Briel@nebraska.gov

Dear Members of the Technical Review Committee,

Thank you for your time and attention evaluating a proposal which requests an expansion of scope of practice for nurse practitioners, clinical nurse specialists, certified nurse midwives, and certified registered nurse anesthetists.

In reviewing the proposal, of concern on a technical basis, there are four separate professions proposing expansion of their scopes of practice. It is our understanding that the review and legislative process is required to evaluate one proponent or profession at a time. Evaluating multiple professions simultaneously invites confusion, errors and misunderstanding, and an inability to properly and separately address concerns.

Additionally, pursuing a national “compact” agreement, as proposed, usurps each state legislature’s ability to regulate each profession and adjust to changing local circumstances in the dynamic realm of health care. Arguments by the proponent regarding potential increased access to care have been proven unfounded by a national study revealing the greatest increase in nurse practitioners occurred in states with collaborative agreements. This was cited by the Nebraska Medical Association, published in Health Affairs in 2018 (Barnes H, Richards MR McHugh MD, et al. Rural and Nonrural Primary Care Physician Practices Increasingly Rely on NP. Health Affairs. 2018:37(6). Pg. 908-914). Local maps provided to the committee reveal APRN’s practicing largely in the same Nebraska communities as physicians, consistent with findings across the nation. Expanding scope of practice in the proposed manner does not increase access to care for Nebraska.

Removing all collaborative agreement requirements and restrictions on prescribing medications would effectively permit all APRN’s to practice medicine, without the training and experience the legislature demands of physicians. We find this to be unnecessary and laden with risk to the public.

Experience in our local community, and around the country, reveals the power and effectiveness of a team-based care model, led by physicians. This model maximizes patient safety and improves outcomes, while utilizing the skills of various providers appropriately. Though our society appreciates the contributions of the
applicant providers to the health care team, the Metropolitan Omaha Medical Society stands in strong opposition to this proposal.

Sincerely,
John D. Peters, M.D.
President, Metropolitan Omaha Medical Society

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