

KS APRN Testimony by Gregory Beck in favor of Senate Bill 69

Good Afternoon Senators. My name is Greg Beck and I am here on behalf of my nurse practitioner spouse, Judith Beck, but also as a healthcare consumer concerned about anti-competitive or unfair business practices. Judy could not be here today as she is flying to Atlanta to help deliver my diabetic daughter's first baby-- and our first grandson.

Judy has both a microbiology degree and a Registered Nursing degree from Oklahoma State University, and got her Advanced Practice Registered Nursing (APRN) Degree from KU Medical Center in 1997. She is a board certified Family Nurse Practitioner with licenses in both Missouri and Kansas with separate federal DEA prescribing license, malpractice insurance, and Advanced Cardiac Life Support (ACLS) certification. She has over 17 years of Family Nurse Practitioner Primary Care experience with over 12 years' experience in hospital ERs throughout Eastern Kansas and Western Missouri. She also helped establish NP protocols and worked at a Lawrence internal medicine clinic as well as the VA Hospital in Leavenworth where she had a patient-panel of over 1100 veterans.

For the past 14 months Judy has taken up Kansas' economic growth initiative by trying to start 2 different primary care businesses here in Kansas- one a "Housecalls" business to provide Primary Care to homebound patients in their homes and another business as a clinic-based Direct Primary Care facility. Both endeavors have been stymied by a major constraint under current Kansas law: Physician Collaborative Practice Agreement requirements. Current Kansas law does not allow for independent or autonomous APRN practice that the federal government, 31 other states and the District of Columbia do allow. Kansas is in the minority of states by NOT allowing independent or autonomous APRN practice. (see chart next page)

You as legislators know that Kansas already has a significant shortage of doctors and Judy and I can assure you it has a shortage of doctors willing and able to be collaborating physicians. Starting in November 2013 Judy began her search for the Kansas-mandated collaborating physician to bring her business concepts to life. She called, talked with and emailed numerous co-working physicians who were either too busy, not available, or simply not interested in collaborating for a start-up APRN business. Nearly giving up after 4 months, in February 2014 Judy talked with an MD she had previously worked with who was willing to be a collaborating partner for a 10% share of her business and later as a 50% partner. As a 50% partner Judy assumed the MD would be an equal partner doing an equal share of the work of building the business as well as treating primary care patients. She assumed incorrectly. From February through December Judy and I developed all aspects of the business including the business plan, filed with the KS Secretary of State, Board of Nursing, and Board of Healing Arts, created and copyrighted the business name, logo, and website, found a clinic site and had it completely renovated to current Kansas medical facility codes, ordered furniture and office supplies and established the marketing plan. A week before the clinic was to open to patients the MD withdrew his support as her partner and collaborating physician preventing her from opening the business and forcing Judy to find a replacement collaborating physician. That search continues to this day. This has cost Judy not only a lot of effort, time and money but also lost work opportunities while building the business.

Also related to independent practice and these collaborative practice agreements are Kansas prescribing protocols. Currently, Judy and other Kansas APRNs can "prescribe pursuant to a protocol... that is reviewed annually." The Federal Trade Commission (FTC) anti-competitive practice research finds "the ability to write prescriptions as one of the defining criteria for independent APRN practice...[Their] studies have examined outcomes associated with APRNs with independent prescribing authority, and the results show comparable outcomes between APRNs and physicians. The FTC was unable to find ANY empirical evidence to support the contention that there are patient harms or risks associated with APRN prescribing of non-controlled substances." (FTC, p.37) The federal government, 21 other states and the District of Columbia have less restrictive APRN prescribing protocols than Kansas does. (see chart on next page)

FTC research findings (*Policy Perspectives: Competition and the Regulation of Advanced Practice Nurses*) do not identify support for either the claim that independent APRN practice gives rise to significant safety concerns, or the claim that mandatory supervision requirements redress such concerns (FTC, p.36) and "the contention that APRNs are less able than physicians to deliver care that is safe, effective, and efficient is NOT

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supported by the decades of research that has examined this question.” (Brown and Grimes, 1995; Fairman, 2008; Groth et al., 2010; Hatem et al., 2008; Hogan et al., 2010; Horrocks et al., 2002; Hughes et al., 2010; Laurant et al., 2004; Munding et al., 2000; Office of Technology Assessment, 1986). Additionally, the FTC could find no studies suggesting that care is better in states that have more restrictive scope-of-practice regulations for APRNs than in those that do not. To the contrary, a large body of empirical research shows that APRNs are safe and effective providers of diverse primary care services. Similarly, the FTC saw no research suggesting that the safety or quality of primary care services declines when APRN supervision or collaborative practice requirements are lessened or eliminated. (FTC, p.37)

Please modernize Kansas law to empower APRNs to autonomously or independently practice as 30 other states and the federal government already have. Make it easier for energetic and resourceful APRN entrepreneurs like Judy to open up new healthcare businesses in Kansas thereby alleviating the medical provider shortage while safely spurring competition and providing health care savings to all Kansans.

Judy would be happy to meet with any and all of you should you require additional information or insights-- as soon as she gets back in February from our first grandson's birth. Thank-you

Greg and Judy Beck
Leavenworth, KS

Nurse Practitioner (NP) Scope of Practice Laws By State



