

Dear Senator or Representative,

I would like to personally thank you for your time and commitment to the health care needs in Kansas. This could not be more emphasized by the ongoing COVID pandemic over the last year. I am a Kansas nurse practitioner providing emergency care to Kansans for the last 15 years, treating COVID patients in rural Kansas emergency departments, and having cared for tens of thousands of patients in urban and rural settings. I have consulted and collaborated with many physicians in nearly every specialty. Professional collaboration is a normal and customary aspect of practice as a nurse practitioner, or that of any health care provider. Our training, education, scope of practice, and board certification allow nurse practitioners to provide the necessary care to patients in urban and across the vastly rural areas of Kansas where we can fill the gaps in access to care. It is important that Kansans have the choice to access care from the thousands of nurse practitioners providing high quality, cost effective, and evidenced based care without restrictive written and costly collaborative agreements.

I would ask the committee to strongly oppose any additional regulatory agencies in Kansas such as the Board of Healing Arts from imposing unnecessary additional oversight or joint regulation. Regulating Nurse Practitioners by two agencies serves no purpose for patients, physicians, hospitals, or any other agencies or institutions. Nurse Practitioners have been practicing for more than 50 years assessing, diagnosing, consulting, and prescribing in nearly every setting. Nearly every state does not have or has removed joint regulation. And there is no body of evidence that suggest additional regulation or oversight serves any purpose for patient safety or outcomes. Nurse practitioners have practiced with high quality evidenced based practice with nearly every study supporting positive outcomes, and very low rates of malpractice claims.

As a nurse practitioner I strongly support full practice authority in Kansas. Many states have moved towards full practice authority. Removing collaborative practice agreements removes barriers that allows nurse practitioners to practice to their full scope or practice, education, and training. Kansans benefit from full practice authority and increase access to care without regulations that restricts access. Future nurse practitioners educated in Kansas and recruited from other states will be more likely to practice in Kansas with the addition of full practice authority. It is important to understand that collaboration and consulting is a normal and customary practice of all health care providers and nurse practitioners would continue this practice as they always have. Our scope of practice, education, and evidenced base practice guide our normal practices of collaboration and consultation. The regulation of collaboration only restricts our ability to practice within our scope.

Thank you for your time and consideration. It is important that Kansas moves forward to align with 23 other states that have adopted full practice authority and remove any language regarding joint regulation and collaborative practice agreements. These regulations are out of date do not align with changes in health care and are supported by many institutions and research. Our current Pandemic, SARS COVID-19, is an example of how removing barriers improved access to care when an executive order was signed granting full practice authority by our Kansas Governor. It is not necessary that full practice authority and removing collaborate practice regulations only occur during a pandemic and should be the future of health care in Kansas.

Michael J. Moore

APRN, FNP-C, ENP-C
Kansas State Representative AAENP
Midwest Regional Director AAENP
5928 S. 103rd E.
Derby, Ks. 67037
316-573-9983