



## Take Reins Off Advanced Practice Nurses

By REGINA CUSSON AND IVY ALEXANDER | OP-ED

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Gov. Dannel P. Malloy's call for the General Assembly to expand the scope of advanced practice nurses highlights the importance of improving access to quality health care for Connecticut residents by ensuring that there are sufficient highly qualified health care providers. Some critics, however, want you to think that this is an untested and even dangerous novelty.

Advanced practice registered nurses — APRNs — are already a valued and integral part of the health care system. Designated as independent licensed providers, they are a solution to the primary health care shortage facing not only Connecticut but the nation. Millions of Americans are becoming newly insured by the Affordable Care Act and will require the professional skills of primary care providers who offer health maintenance, chronic illness management and acute illness intervention.

According to John W. Rowe, a physician and professor of health policy at Columbia University, the Affordable Care Act (sometimes called Obamacare) will create an enormous need for an additional 30,000 physicians by 2015 and 65,000 by 2025. This gap that could be filled by today's APRNs, "well-trained registered nurses with specialized qualifications who can make diagnoses, order tests and referrals, and write prescriptions. APRNs could provide a variety of services that primary care physicians now provide," Rowe said, writing for *The Atlantic*.

Already 17 states and the District of Columbia, fully one-third of the country, have eliminated outdated laws constraining APRN practice. This has brought increased access to health care, as well as improved health outcomes and lower health care costs in those states. This trend is supported by extensive quality research studies and a 2010 Institute of Medicine report.

The institute observed that, "what nurse practitioners are able to do once they graduate varies widely [from state to state] for reasons that are related not to their ability, education or training, or safety concerns, but to the political decisions of the state in which they work." In addition, the institute called for state legislators to reform the "scope-of-practice regulations to conform to the National Council of State Boards of Nursing Model Nursing Practice Act and Model Nursing Administrative Rules," which the governor's bill would advance.

Some critics claim that an expanded role for APRNs would undermine the team approach that is reasonably seen as the pathway out of our expensive but not uniformly effective health care. They fret that the expanded role for APRNs is an untested novelty. They warn that fully autonomous APRNs would inhibit coordination of patient care.

There are, however, already a variety of roles that APRNs perform today. They are nurse practitioners who provide complete physical exams, diagnose and treat acute and chronic illnesses, order and evaluate diagnostics, and prescribe and manage medications and other therapies. They are clinical nurse specialists who provide advanced nursing care in medical centers and other complex clinical settings. They are certified registered nurse anesthetists who administer and monitor anesthesia before and during procedures and then pain management afterward to over 65 percent of anesthesia patients in the U.S.

They are certified nurse midwives who provide a range of primary health care to women, including family planning, care to pregnant women, management of low-risk labor and delivery, and newborn infant care.

APRNs number more than 100,000 expert health professionals, with more than 3,000 in Connecticut. Most currently practice as members of health teams in medical practices and medical centers. They have a long history of success since their inception more than 50 years ago.

Nurse practitioners are advanced practice nurses, educated at the master's and doctoral levels, providing high-quality, cost-effective primary and specialty health care to all populations and age groups. APRNs are ready, willing and able to serve the health care needs of millions of newly insured Americans. Because the health care system works best when all providers are able to practice at their full scope, the governor's proposed legislation will increase both access to care and quality of care received. --- *Regina Cusson is a professor and dean of the University of Connecticut's School of Nursing. Ivy M. Alexander is a clinical professor and the director of advanced practice programs at the University of Connecticut's School of Nursing.*