**To:** House Committee on Government Operations

From: Paulette J. Thabault, DNP, ANP-BC, JD, FAANP
Vermont Nurse Practitioner Association, Member
Norwich University, Director and Professor, School of Nursing
GoodHEALTH/Community Health Centers of Burlington,
Adult Nurse Practitioner

Date: February 2, 2018

Re: Office of Professional Regulation (OPR)H. 684 - An act relating to professions and occupations regulated by the Office of Professional Regulation, Subchapter 2. Advanced Practice Registered Nurses

Good morning, my name is Paulette Thabault. I am an Advanced Practice Registered Nurse (APRN), Adult Nurse Practitioner and Director of the School of Nursing at Norwich University. I also serve on the APRN Subcommittee for the VT Board of Nursing and previously served on the Executive Board of the Vermont Nurse Practitioners Association. I was prepared as a Nurse Practitioner at Simmons College with a Masters in Nursing and I also hold a Doctorate in Nursing Practice from Northeastern University.

I am here today to support the position taken by the Vermont Nurse Practitioner Association in support of **OPR H. 684 - An act relating to professions and occupations regulated by the Office of Professional Regulation.** 

As you know seven years ago the Vermont legislature granted Full Practice Authority for Nurse Practitioners. This was a wise decision and one that has made it possible for NPs throughout our state to provide high quality care to Vermonters who otherwise may not have had access to needed care.

Full Practice Authority reduces undue restrictions on APRN scope of practice and is a significant part of the solution to our impending crisis in the primary care workforce. In Vermont, the primary care workforce shortage is rapidly growing, particularly in rural and underserved areas. Over 85% of NPs are prepared in primary care and are eager to answer the primary care call.

Scope of practice restrictions for newly certified Nurse Practitioners, that were enacted seven years ago are stale and outdated. These restrictions serve no legitimate purpose and it is time to remove them. The restrictions hamper APRNs' ability to provide primary care services that are well within the scope of their education and training.

APRN education is formal and rigorous and licensing in VT ensures that practicing APRNs are graduated from nationally accredited programs and have national certification in their specialty area. An arbitrary transition to practice "apprenticeship", is not consistent with the APRN education objectives or outcomes. There is no evidence that transition elements result in better patient health outcomes or contribute to overall patient safety. Furthermore, results from recent studies indicate that more restrictive states lose potential NPs to states that have more supportive practice acts and regulations that govern NP practice."

Removing these outdated bureaucratic regulations that do nothing to improve safety or quality, will help to remove obstacles for NP practice and help patients access the care they need. Full practice authority without unnecessary collaborative agreements helps to remove delays in care and reduce costs for unnecessary office and other care visits.

Full Practice authority is supported by many nationally recognized organizations including the Institute of Medicine, AARP and the Josiah Macy Foundation. The National Governors Association and the Federal Trade Commission (FTC) have also supported Full Practice Authority and importantly, the FTC has raised antitrust concerns pertaining to restrictive state policies.

In a state where health care costs are rising at unsustainable rates, we should be doing everything possible to improve access to primary care. Full Practice Authority should be extended to all Nurse Practitioners who have completed accredited education programs, achieved national certification and meet the licensing requirements for VT. Current transition to practice requirements limit access to high quality safe care and potentially increase total costs of care without benefit to patients.

In closing I ask that you fully support the provisions in Subchapter 2. of H. 684 pertaining to Advanced Practice Registered Nurses.

Thank you,

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