## WHERE PHYSICIAN ASSISTANTS HAVE AUTHORITY TO PRESCRIBE CONTROLLED SUBSTANCES





Source: Edward J. Timmons, "Healthcare License Turf Wars: The Effects of Expanded Nurse Practitioner and Physician Assistant Scope of Practice on Medicaid Patient Access" (Mercatus Research, Mercatus Center at George Mason University, Arlington, VA, January 2016). Based on data from the American Academy of Physician Assistants.

## WHERE NURSE PRACTITIONERS HAVE PRESCRIPTION AUTHORITY AND AUTONOMY, 2012





Source: Edward J. Timmons, "Healthcare License Turf Wars: The Effects of Expanded Nurse Practitioner and Physician Assistant Scope of Practice on Medicaid Patient Access" (Mercatus Research, Mercatus Center at George Mason University, Arlington, VA, January 2016). Based on data from Kevin Stange, "How Does Provider Supply and Regulation Influence Health Care Markets? Evidence from Nurse Practitioners and Physician Assistants," *Journal of Health Economics* 33, no. 1 (2014); Morris Kleiner et al., "Relaxing Occupational Licensing Requirements: Analyzing Wages and Prices for a Medical Service" (NBER Working Paper No. 19906, National Bureau of Economic Research, Cambridge, MA, February 2014).

## CHANGES IN NURSE PRACTITIONER AUTONOMY, 1999–2012





Source: Edward J. Timmons, "Healthcare License Turf Wars: The Effects of Expanded Nurse Practitioner and Physician Assistant Scope of Practice on Medicaid Patient Access" (Mercatus Research, Mercatus Center at George Mason University, Arlington, VA, January 2016). Based on data from Morris Kleiner et al., "Relaxing Occupational Licensing Requirements: Analyzing Wages and Prices for a Medical Service" (NBER Working Paper No. 19906, National Bureau of Economic Research, Cambridge, MA, February 2014).



from supervised to independent

from no authority to supervised

no change