

THE BENEFITS OF MOBILIZING NURSE PRACTITIONERS IN DELAWARE

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Chair Gay, Vice Chair Pinkney, and all distinguished members of the Senate Legislative Oversight and Sunset Committee:

Thank you for inviting me to testify on the subject of regulations governing the licensure of nurse practitioners in Delaware. My name is Edward J. Timmons. I am a professor of economics and director of the Knee Center for the Study of Occupational Regulation at Saint Francis University in Loretto, PA. I am also a Senior Affiliated Scholar with the Mercatus Center at George Mason University.

Based on the findings of my own research, I believe that permitting nurse practitioners to practice and use their unique skillsets to the full extent of their specialized training immediately after completing licensing requirements will improve patient access to care without increasing cost or sacrificing quality. This is an urgent question, as Delaware, like many other states, is facing challenges in providing adequate primary care to patients. National trends suggest that the decline in population of primary care physicians will continue.¹ Nurse practitioners can potentially help fill this gap. It is important that the existing law does not unnecessarily delay them from practicing and providing care to patients to their full potential.

Nurse practitioners are often restricted by state law when it comes to applying their knowledge and skills and alleviating challenges that vulnerable populations encounter in receiving primary care. Current Delaware law permits nurse practitioners in the state of Delaware to apply for full practice authority after achieving the equivalent of two years of full-time clinical experience. Delaware would not be going out on a limb by eliminating this experience requirement. The District of Columbia grants nurse practitioners full practice autonomy immediately upon successfully completing the requirements for licensure. Fourteen other states also provide nurse practitioners this same opportunity.²

1. Stephen M. Petterson, Angela Cai, Miranda Moore, and Andrew Bazemore. "State-Level Projections of Primary Care Workforce, 2010-2030" (Robert Graham Center, Washington, DC, September 2013).

2. Joanne Spetz, "California's Nurse Practitioners: How Scope of Practice Laws Impact Care" (California Health Care Foundation, Oakland, CA, July 2019).

Research consistently shows that these restrictions on nurse practitioner scope of practice result in longer driving times to receive primary care³ and reductions in the volume of care provided by nurse practitioners.⁴ In addition, researchers consistently find that nurse practitioners are more than capable of providing quality care to patients.⁵

My own research examining how changes to nurse practitioners' scope of practice affect Medicaid patients has found evidence that permitting nurse practitioners to practice autonomously is associated with patients receiving more care without increasing cost.⁶ It should be noted, however, that our research suggests that the positive effects of granting nurse practitioners autonomy are only fully realized when they are granted full practice authority. The change is quite large—we estimate an 8 percent increase in the amount of care that Medicaid patients receive.

Research continues to demonstrate that nurse practitioners are more than capable of providing high quality primary care—care that is sorely needed. Granting nurse practitioners the ability to practice autonomously immediately after satisfying licensing requirements is a common-sense reform. Delaware would not be unique in instituting these changes; rather, the state would be bringing policy closer in line with other states, and taking steps necessary to help ensure citizens receive the healthcare that they need.

3. D. F. Neff, S.H. Yoon, and R. L. Steiner, et. al, "The Impact of Nurse Practitioner Regulations on Population Access To Care," *Nursing Outlook* 66, no. 4 (2018): 379–85.

4. Y. F. Kuo, F.L. Loresto Jr, L. R. Rounds, and J.S. Goodwin. "States with the Least Restrictive Regulations Experienced the Largest Increase In Patients Seen By Nurse Practitioners," *Health Affairs* 32, no. 7 (2013): 1236–43.

5. E. K. Adams and S. Markowitz, "Improving Efficiency in the Health-Care System: Removing Anticompetitive Barriers for Advanced Practice Registered Nurses and Physician Assistants" (The Hamilton Project, Policy Proposal 2018-08, Brookings Institution, Washington D.C., June 2018).

6. L. Poghosyan, E. Timmons, C. M. Abraham, and G. R. Martsof, "The Economic Impact of the Expansion of Nurse Practitioner Scope of Practice for Medicaid," *Journal of Nursing Regulation* 10, no. 1 (2019): 1–6.