

# Teams Work... for Patients

## *Ohio House Bill 216 undercuts team approach*



House Bill 216 would permit advanced practice registered nurses (APRNs) to practice independently with no requirement for physician collaboration. APRNs are nurse practitioners, nurse midwives, clinical nurse specialists and certified registered nurse anesthetists.

Proponents of H.B. 216 claim advanced practice registered nurses are leaving the state to find work because Ohio law is too restrictive. They say passage of the bill would end this trend and increase APRNs serving in rural areas.

H.B. 216 is over-reaching and unnecessary. It would break from the team-based, coordinated care model that exists today and ultimately jeopardize the safety of the patient.

- There is no data to support APRNs are leaving the state. According to the 13,372 APRNs surveyed in the *2015 Ohio Board of Nursing Workforce Data Summary Report*, only 21 indicated they couldn't find a job. The report also indicates that the number of APRNs working in Ohio has grown by as many as 3,000 since 2013.
- Ohio law does not keep APRNs from practicing in rural areas; they choose not to. Most practice in urban areas like Columbus, Cleveland and Cincinnati.
- Nothing in House Bill 216 guarantees APRNs would work in rural areas. According to the Ohio Board of Nursing Workforce report most APRNs choose to work in a hospital setting and even fewer are electing to work with patients in rural or underserved areas.
- Ohio law allows for an APRN to practice in rural parts of the state and collaborate with a physician anywhere in Ohio.
- APRNs claim they want to practice in primary care; however only 13% chose primary care as their main area of practice.
- House Bill 216 would also allow nurse practitioners, nurse midwives and clinical nurse specialists to independently prescribe addictive and dangerous Schedule II drugs without consulting a physician.
- At a time when prescription drug abuse is one of Ohio's most serious public health challenges, we need greater accountability of prescribing, not less.
- Patients prefer that their care be coordinated and a physician be included in that team model according to a 2015 study by the American Medical Association. In fact patients value and rely upon the additional education and training that physicians receive and they want a physician in the decision-making process.
- A team-based, collaborative care model ensures the patient receives safe, coordinated care that minimizes fragmented or unnecessary expensive treatments.
- The Ohio Legislature has strongly encouraged and supported collaboration when other scope of practice issues were considered.
- When physician assistants sought to expand their practice and pharmacists moved to revise their consult agreements, physicians recognized the need to make changes to scopes of practice that do not jeopardize patient care.
- Ohio's physicians value the abilities and contributions of APRNs and all nurses. However, House Bill 216 goes too far to upset the collaborative effort already underway among all health care professionals.

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We would like to thank the American Medical Association's Scope of Practice Partnership for their assistance in this educational campaign.