

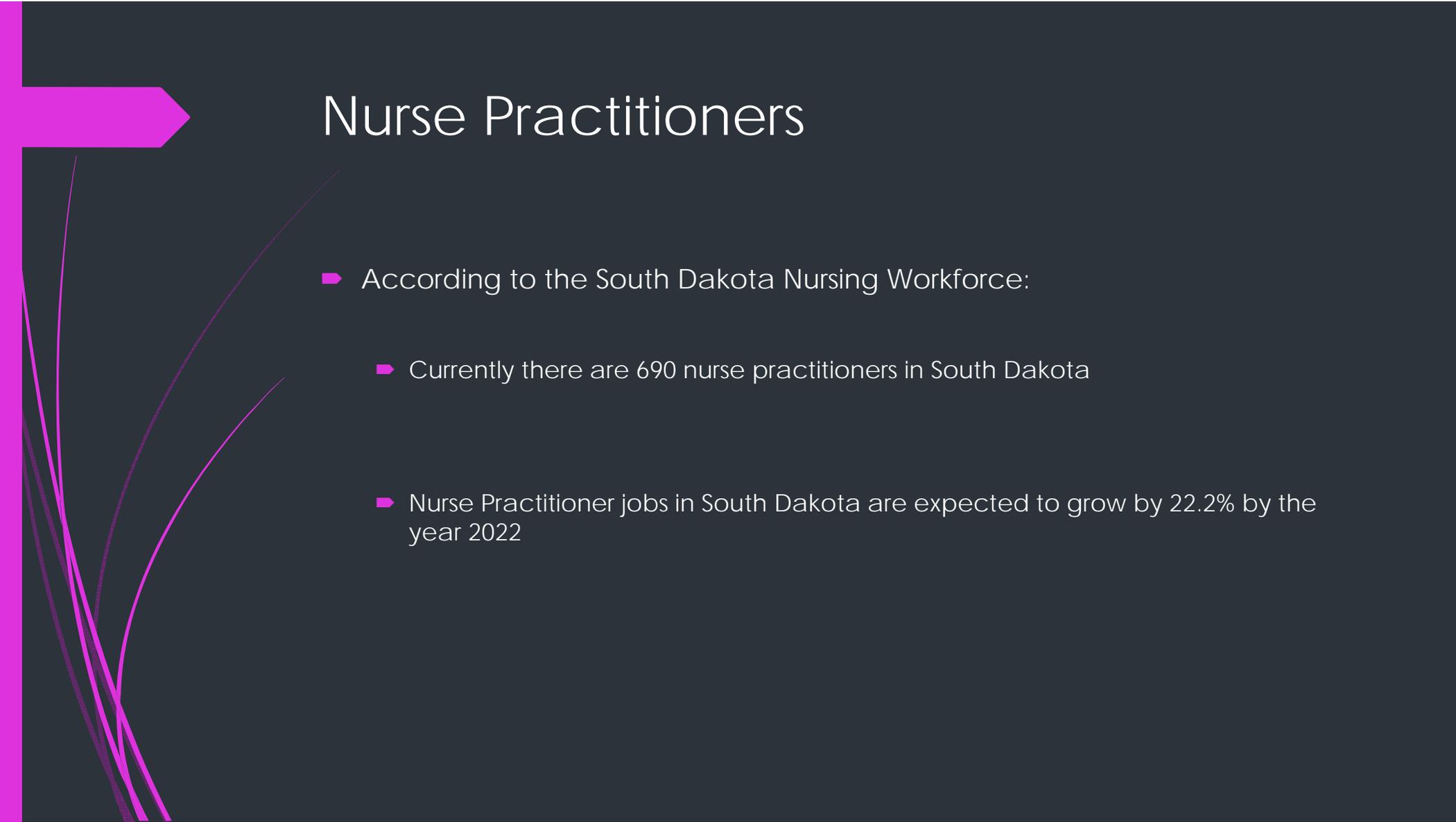


Governor's Primary Care Taskforce Oversight Committee Report



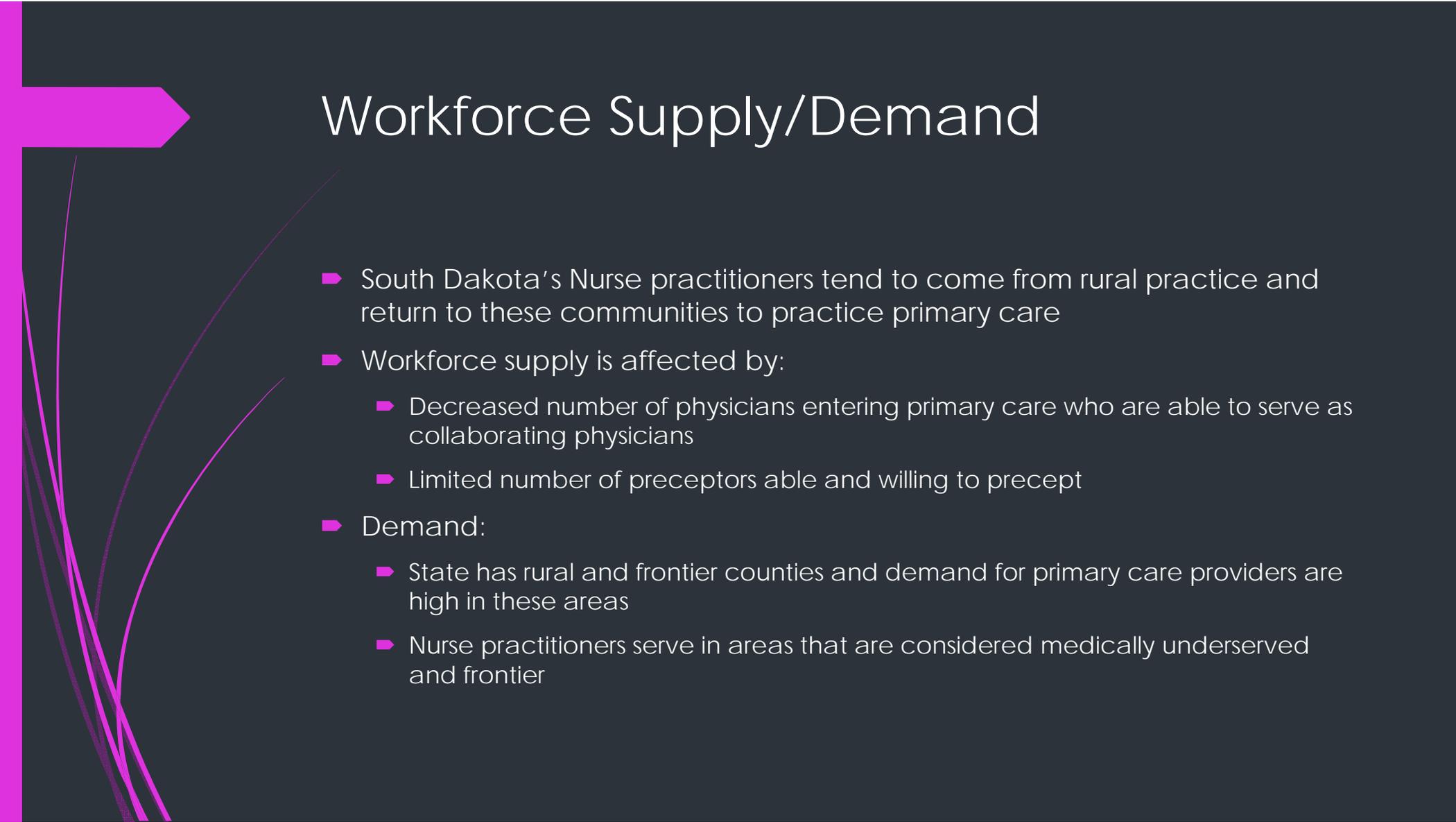
Nurse Practitioners

- ▶ Nurse Practitioners are nurses who:
 - ▶ Complete advanced clinical training at the Doctorate or Master's level
 - ▶ Complete a national certification exam
 - ▶ Focus on health promotion, disease prevention, and health education
 - ▶ Able to:
 - ▶ Assess
 - ▶ Diagnose
 - ▶ Order and interpret diagnostic tests
 - ▶ Prescribe
 - ▶ Manage and treat acute and chronic disease processes



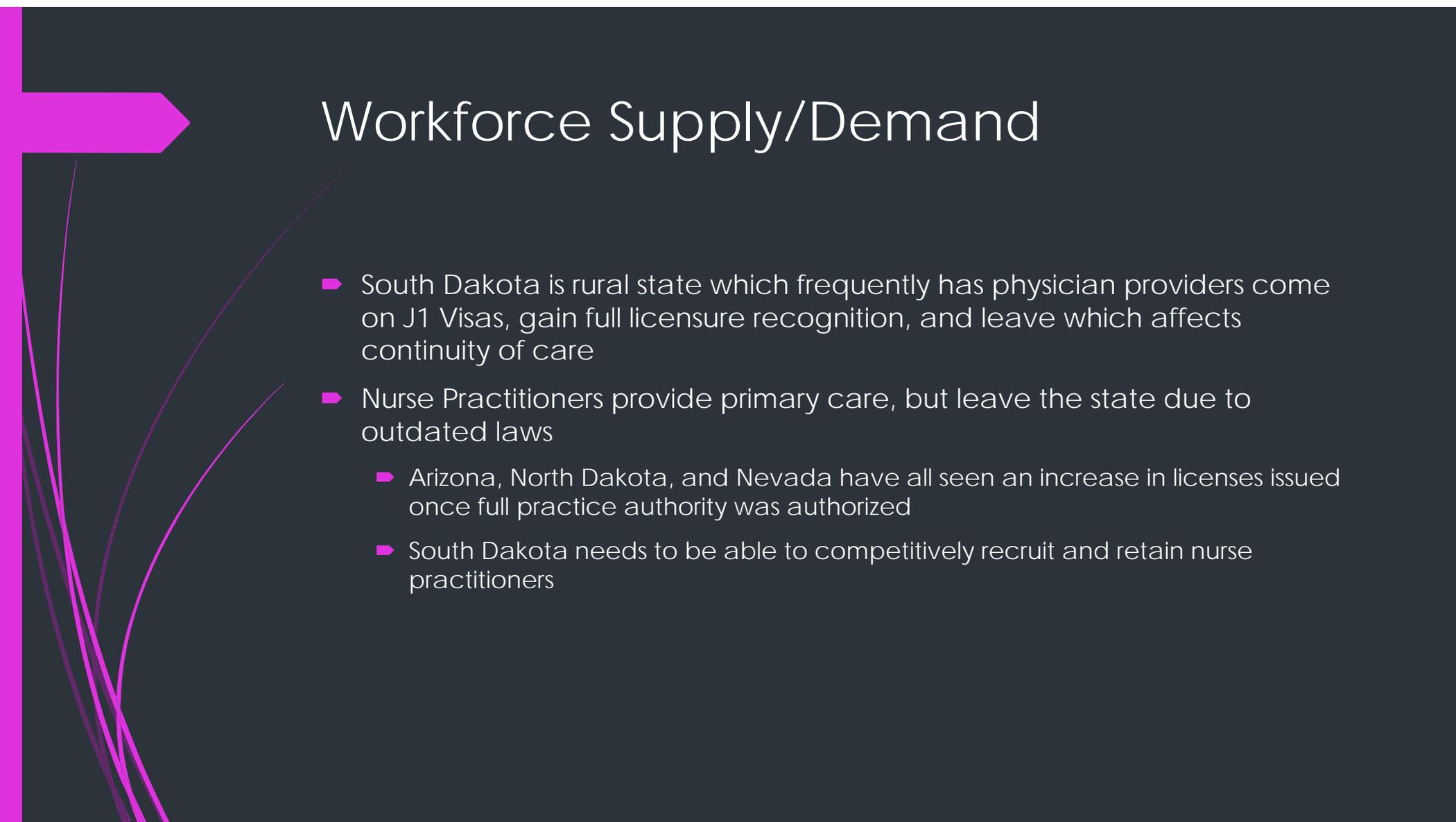
Nurse Practitioners

- ▶ According to the South Dakota Nursing Workforce:
 - ▶ Currently there are 690 nurse practitioners in South Dakota
 - ▶ Nurse Practitioner jobs in South Dakota are expected to grow by 22.2% by the year 2022



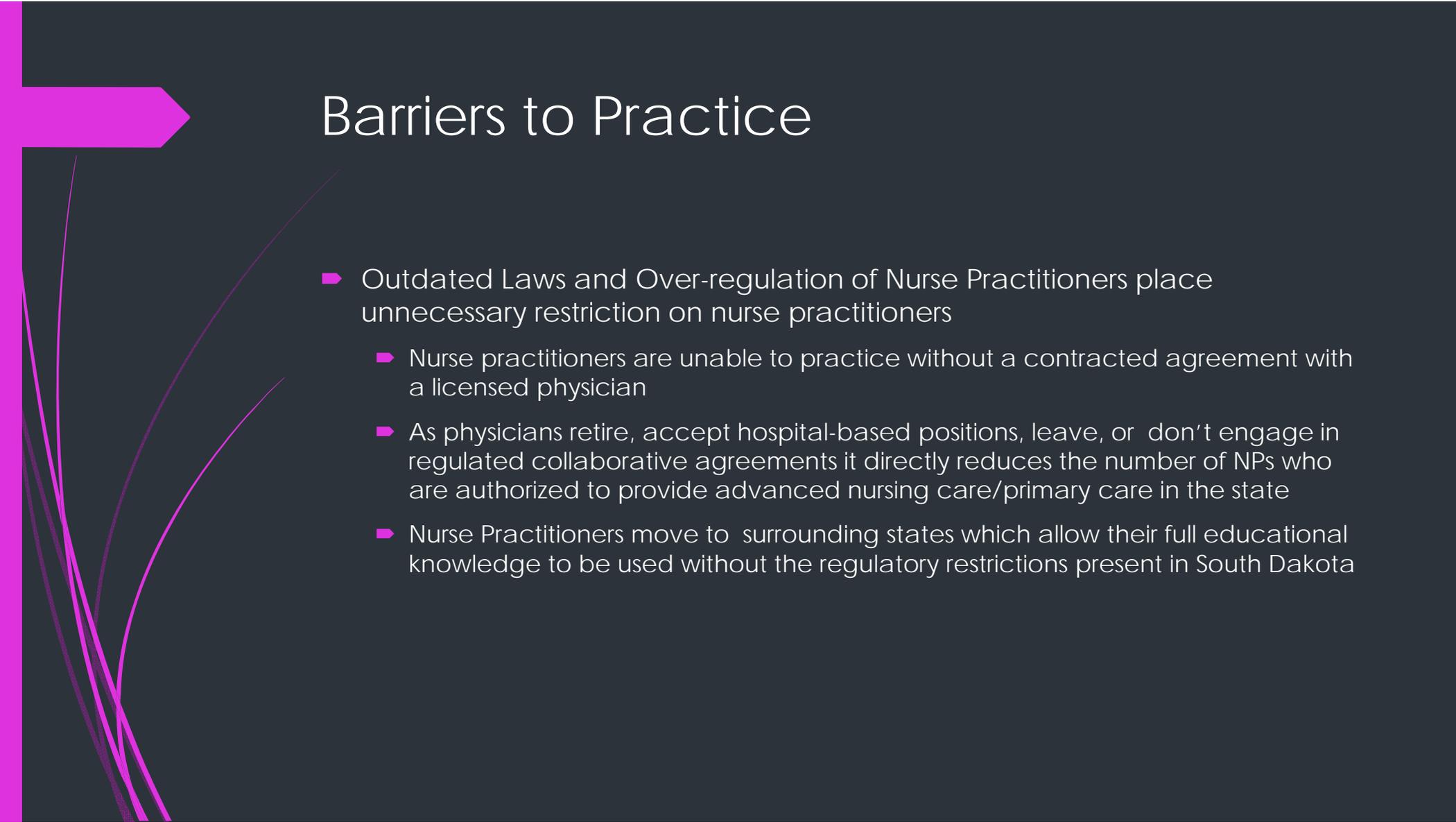
Workforce Supply/Demand

- ▶ South Dakota's Nurse practitioners tend to come from rural practice and return to these communities to practice primary care
- ▶ Workforce supply is affected by:
 - ▶ Decreased number of physicians entering primary care who are able to serve as collaborating physicians
 - ▶ Limited number of preceptors able and willing to precept
- ▶ Demand:
 - ▶ State has rural and frontier counties and demand for primary care providers are high in these areas
 - ▶ Nurse practitioners serve in areas that are considered medically underserved and frontier



Workforce Supply/Demand

- ▶ South Dakota is rural state which frequently has physician providers come on J1 Visas, gain full licensure recognition, and leave which affects continuity of care
- ▶ Nurse Practitioners provide primary care, but leave the state due to outdated laws
 - ▶ Arizona, North Dakota, and Nevada have all seen an increase in licenses issued once full practice authority was authorized
 - ▶ South Dakota needs to be able to competitively recruit and retain nurse practitioners



Barriers to Practice

- ▶ Outdated Laws and Over-regulation of Nurse Practitioners place unnecessary restriction on nurse practitioners
 - ▶ Nurse practitioners are unable to practice without a contracted agreement with a licensed physician
 - ▶ As physicians retire, accept hospital-based positions, leave, or don't engage in regulated collaborative agreements it directly reduces the number of NPs who are authorized to provide advanced nursing care/primary care in the state
 - ▶ Nurse Practitioners move to surrounding states which allow their full educational knowledge to be used without the regulatory restrictions present in South Dakota



Barriers to Practice

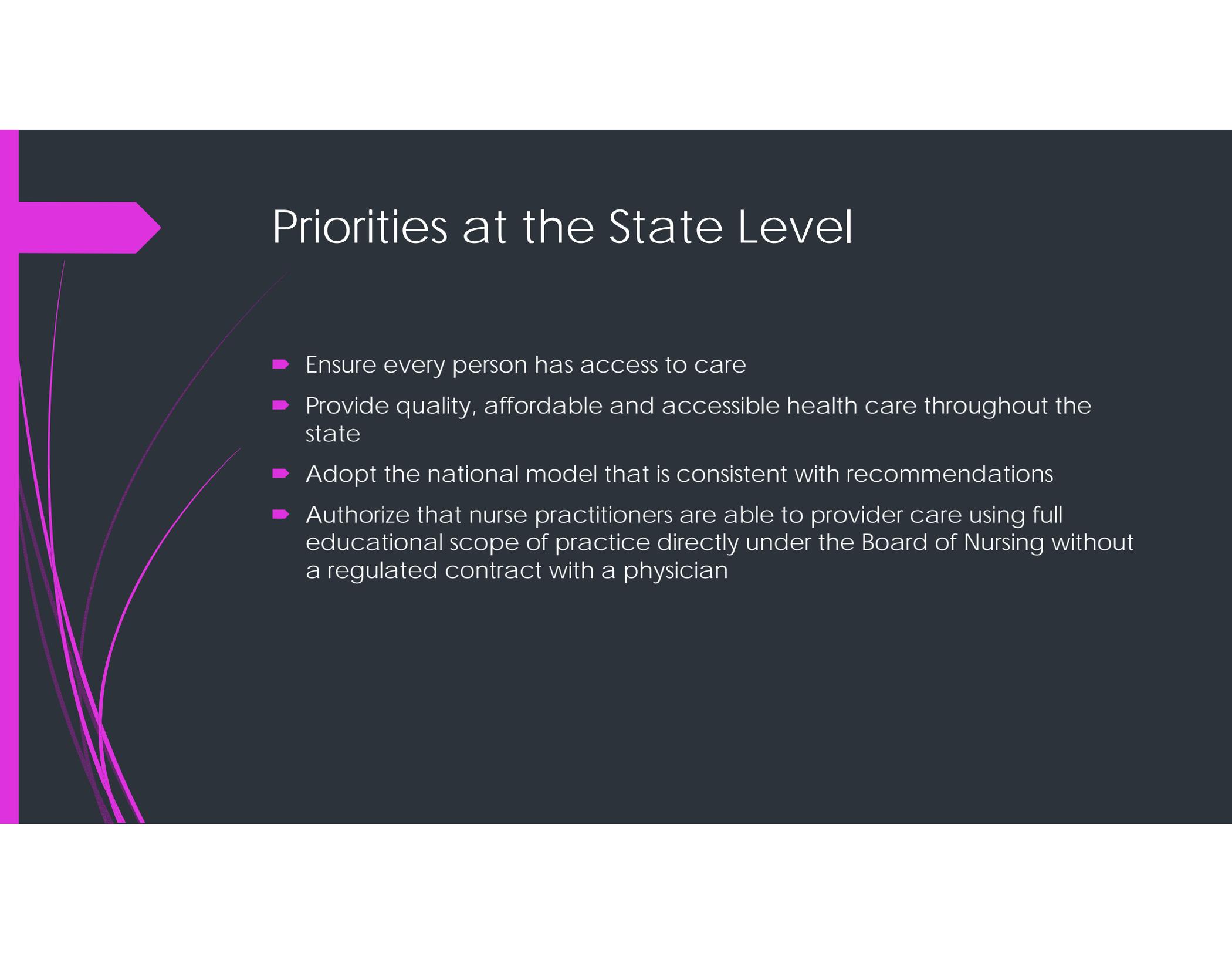
- ▶ These barriers lead to:
 - ▶ Decreased access to care
 - ▶ NP practice sites closing due to regulatory requirement for physician agreements
 - ▶ Reduced opportunities for NPs to migrate to rural and underserved areas
 - ▶ Loss of SD NPs to neighboring states with more favorable licensure and practice laws
 - ▶ Increased healthcare costs
 - ▶ Lack of access is associated with delays in care and deferral of preventative care
 - ▶ Increased care seeking at higher cost settings (i.e., the ER instead of the primary care practice)
 - ▶ Nurse Practitioners who are willing to see Medicare or Medicaid patients are limited unless the affiliated collaborating physician accepts these types of insurance
 - ▶ Decrease quality of life
 - ▶ Challenges for rural SD residents to “age in place” with lack of local providers
 - ▶ Loss of patient choice in healthcare provider

Key Issues/Trends Affecting Profession

- ▶ Reduced practice sites
 - ▶ Closing due to inability to secure a regulated collaborative agreement contact
 - ▶ Inadequate supply of physicians in primary care
 - ▶ Decreased willingness of physicians to enter into the regulated collaboration agreements
 - ▶ NPs are the fastest growing primary care provider profession, but SD is less attractive to prospective providers due to existing regulations
- ▶ **Bottom Line:** *By linking the authorization of NP practice to physicians as a condition of NP licensure and practice, SD is artificially ratcheting down the state's ability to use the NP workforce to meet patient care needs.*

Key Issues/Trends Affecting Profession

- ▶ Over 40% of states authorize nurse practitioners to provide care using their full educational training without regulated collaborative agreement contracts with physicians.
 - ▶ Providers still collaborate but is not required by an unnecessary contract
 - ▶ Not increasing scope of practice
 - ▶ Backed by several national reports
 - ▶ IOM report
 - ▶ FTC report
 - ▶ National Governors' Association
 - ▶ Rand Report
 - ▶ **Bottom Line:** *To be competitive for recruitment and retention of NPs, SD's licensure regulation need to align with national standards.*



Priorities at the State Level

- ▶ Ensure every person has access to care
- ▶ Provide quality, affordable and accessible health care throughout the state
- ▶ Adopt the national model that is consistent with recommendations
- ▶ Authorize that nurse practitioners are able to provide care using full educational scope of practice directly under the Board of Nursing without a regulated contract with a physician