Myth vs. Fact: SB 1700

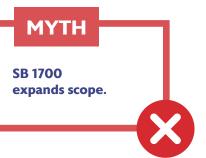






FACT

Decades of studies say that Advanced Practice Registered Nurses (APRNs) are safe. Indeed, APRNs represent just 2% of all medical malpractice claims, both in Texas and nationally, whereas physicians represent 98% of malpractice claims.⁻ 27 states have been passing legislation to remove delegation for almost 30 years, and no state has ever gone back. Also, all branches of the military, the Indian Health Service, and the VA haven't had a physician delegation requirement for years.



FACT

SB 1700 does not expand APRN scope. APRNs are already doing the work. SB 1700 would simply allow APRNs to do the work they already do—just without the administrative and financial barriers of having to pay a physician for a contract. This is not about nurses or doctors. This is about patients getting the quality healthcare they need closer to home.

MYTH

APRNs don't have enough training and education.

FACT

Each APRN is trained to provide care in a narrow specialty such as pediatrics, women's health, or mental health, and no APRN does surgery. In contrast, every physician is trained in ALL medical specialties AND surgery. Because of this, an APRN does not have the same education and training model as a physician. But every APRN is state licensed, nationally certified, and graduate or doctorally prepared to do the job they do, and they build on the strong foundation of a nursing degree and thousands of hours of clinical experience at the bedside.

MYTH

Texas law currently requires supervision of APRNs.

FACT

Texas ended the requirement that a physician be located on-site with the APRN they delegate to in 2013.⁵ "Supervision" only entails checking in ONCE a month by PHONE to review ONE chart. The delegation physician does not need to be in the same clinic or even in the same county as the APRN, and they are not required to provide direct care to the APRN's patients.

ΜΥΤΗ

Texans should only see physicians for healthcare needs.

FACT

If Texans can and want to see a doctor, they can make that choice. This bill is about options. 90% of Texans believe Texas should make it easier to get care from APRNs. 81% support removing the career-long requirement that APRNs contract with physicians. 82% agree that hospitals, clinics, and medical offices are overwhelmed with the number of people seeking medical care, making it hard for people to get appointments and treatment when they need it.⁶

ΜΥΤΗ

APRNs don't go to rural and underserved areas.

FACT

Peer-reviewed research shows that rural areas have seen a 43% increase in nurse practitioners⁷, but according to research from the Journal of the American Medical Association, physicians in rural areas have steadily declined since 2010.⁸ Rural nurse practitioners increase in states that remove delegation requirements, such as the 70% increase in rural NPs that Arizona has seen.

МҮТН

Removing barriers to APRNs does not reduce costs.

FACT

States have estimated that lifting the delegation barrier saves millions of dollars:

- 1. A Texas study showed up to \$47.7 million in Medicaid and Teacher Retirement System of Texas savings, and a growth of \$4.6 billion to state GDP in the first 10 years.⁹
- 2. Florida estimated up to \$44 million in annual Medicaid savings, up to \$2.2 million in state employee health insurance savings, and \$399 million in total health care savings.¹⁰
- A Pennsylvania study estimated a savings of as much as \$6 billion over 10 3. vears.¹¹
- 4. A California study estimated savings of up to \$1.8 billion over 10 years.¹²

Who We Are: Texas for Healthcare Access Coalition

Texans for Healthcare Access is a coalition of 41 organizations representing consumers, business, and a broad range of healthcare stakeholders. These groups have joined forces to remove unnecessary barriers to care and allow Advanced Practice Registered Nurses to provide more access and more options for Texas patients. Learn more here.

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