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H.B. 2256 ARNP-Prescribing Medications

February 9, 2005

Chairperson Morrison and Members of the House Health and Human Services Committee,

my name is Debbie Folkerts, and I am testifying today to ask for your support of H.B. 2256, which proposes changes to the current Advanced Registered Nurse Practitioner statutes.

At issue in the United States, and closer to home here in Kansas, we face some very critical issues to our population: access to health care.

Because our state is so vast and expansive, it is imperative that patients not be restricted to only one or two types of “providers.” ARNPs are highly educated, qualified health care providers that will often work in underserved and rural areas that their MD/DO colleagues will not serve in, mostly because there is an inadequate supply of primary care physicians, but also because more densely populated areas are where they can best meet more health care needs.

ARNPs also work in inner-city and suburban areas and fulfill roles in a variety of specialties such as family practice, pediatrics, neurology, gastroenterology, cardiology, women’s health, etc. They complement busy specialty clinics that are overworked and short-staffed, but nonetheless very much still needed. These are services and care that could easily be further expanded to the more remote areas, and Kansas could encourage more recruitment as a “practice-friendly environment” if the “responsible physician” language is removed from the current statute (65-1130). ARNPs are willing to serve these populations but are “handcuffed” by these regulations that impede the normal course of our jobs and thus prevent health care access to Kansans.

Small communities like McLouth, Easton, Carbondale, Phillipsburg, Lakin, and Ludell would undoubtedly benefit from ARNP-staffed clinics, and would welcome the opportunity to have a local health-care provider for their needs. The misconception to the public is that the ARNP can’t practice without an MD. The truth is that the ARNP must have a written protocol with

the physician **only** for writing prescriptions. That is the extent of the written relationship.

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This bill seeks to eliminate this requirement. It also adds more progressive language to the scope statement that provides clear guidance to ARNPs and other health care providers.

