

SENATE BILL 187: MYTHS VS. FACTS

Recent commentary surrounding SB 187 have been filled with myths and misconceptions. Fortunately, a thorough examination of SB 187 debunks these myths and reveals the true purpose and intent of the measure.

MISCONCEPTION #1 *SB 187 is a scope of practice bill.*

FACT SB 187 does **NOT** expand Nurse Practitioners' scope of practice. The bill simply removes the collaborative practice agreement (CPA). The same services Nurse Practitioners are able to provide with the CPA are the same services they will be able to provide if the bill is successful and the CPA is removed.

MISCONCEPTION #2 *Removing the collaborative practice agreement will allow nurse practitioners "to get out on their own."*

FACT Current law already allows nurse practitioners to practice without supervision. In fact, many nurse practitioners have owned and operated their own clinics for decades, without physician supervision.

MISCONCEPTION #3 *Removing the collaborative practice agreement will end physician and Nurse Practitioner collaboration.*

FACT While many believe this agreement ensures that nurse practitioners and their collaborating physicians are working shoulder to shoulder everyday, this agreement actually requires very little of the physician. **The collaborating physician is not required to review the nurse practitioner's charts or review prescriptions, neither is the physician required to visit the nurse practitioner's clinic.** In fact, there is no time requirement in which a nurse practitioner and the physician must "collaborate."

For instance, some nurse practitioners may only see or speak with their collaborator once or twice a year. During a committee hearing, one nurse practitioner testified to seeing her collaborator only once in 8 years of practice.

MISCONCEPTION #4 *Medicare requires a collaborative practice agreement, regardless of state regulations. Therefore, removing the CPA means that Nurse practitioners will no longer be able to treat Medicare patients.*

FACT The Centers for Medicare and Medicaid services (CMS) does NOT require a collaborative practice agreement. 22 States have removed the CPA and Nurse Practitioners in those states see Medicare patients everyday.

The Collaborative Practice agreement is not a catalyst for true medical collaboration. These agreements are an arbitrary and capricious hindrance on patient care.

PLEASE VOTE YES TO SB 187!



LOUISIANA ASSOCIATION OF NURSE PRACTITIONERS