



**NURSE PRACTITIONERS LEGISLATION:
MYTHS AND FACTS**

Get the Facts. Michigan’s NPs have been helping to meet the health care across the state for decades. Senate Bill 279 modernizes state law to improve access to care access, streamline care delivery and make Michigan more attractive for recruiting and retaining more nurses to the state.

<p>Myth: This bill will increase scope of practice beyond current level of education.</p>	<p>FACT: This bill will not change NP scope of practice, or the services NPs are currently authorized to provide in Michigan. NPs are currently licensed to practice and provide care in Michigan within well-defined, established professional standards. This bill simply updates state law to reflect those national standards for NP scope of practice which are based on education, role, and national certification.</p>
<p>Myth: Bill will put patients at risk.</p>	<p>FACT: More than 40 years of peer-reviewed evidence demonstrates that NPs provide safe, high-quality care. Twenty-seven states, D.C. and two US territories have adopted similar laws. These states are associated with better overall access to care and patient health care outcomes in their state health care rankings. S.B. 279 does not impact quality assurance program requirements by health care and/or insurance organizations to monitor outcomes and ensure safe patient care.</p>
<p>Myth: Bill destroys the collaborative relationship between NPs and physicians.</p>	<p>FACT: NPs will continue to coordinate care with physicians and other health care clinicians to provide the best care for patients. NPs, like all health care professionals, have a legal and professional obligation to consult, refer or transfer patients when health care needs are beyond the expertise and the comfort level of the provider.</p>
<p>Myth: Bill will increase health care costs.</p>	<p>FACT: This bill does not alter the patient care services that NPs are currently providing in Michigan. Studies show that patients under the care of NPs in states with licensure models similar to the reforms proposed in S.B. 279 tend to have reduced emergency room visits, decreased hospital length of stay, less costly diagnostic tests and lower prescription drug costs.¹</p>
<p>Myth: Bill will increase malpractice claims and premiums.</p>	<p>FACT: Nurse Practitioners in Michigan currently carry liability insurance with the typical policy coverage of \$1-2 million occurrence/\$3-4 million aggregate. The average annual premium for a full-time adult NP is under \$1000 for a \$2M/\$4M policy. The national malpractice claims against NPs have remained under 2% despite the increasing number of NPs in practice. S.B. 279 does not alter coverage. States that adopted policies like S.B. 279 not associated with higher rates of malpractice or higher premiums.^{2,3}</p>

References:

- ¹ Yang BK, Johantgen ME, Trinkoff AM, Idzik SR, Wince J, Tomlinson C. State Nurse Practitioner Practice Regulations and U.S. Health Care Delivery Outcomes: A Systematic Review. *Med Care Res Rev.* 2021 Jun;78(3):183-196. doi: 10.1177/1077558719901216. Epub 2020 Jan 30. PMID: 31997710.
- ² Cook, ML, and Riley, L. (2014). Malpractice Payments by Profession. *AANP Research Brief*, 2(1).
- ³ Markowitz, Sara, and Andrew JD Smith. *Nurse Practitioner Scope of Practice and Patient Harm: Evidence from Medical Malpractice Cases and Adverse Action Reports.* No. w31109. National Bureau of Economic Research, 2023. https://www.nber.org/system/files/working_papers/w31109/w31109.pdf