## Dear Representative Kessler,

My name is Kathryn Osborne. I am a certified nurse-midwife (CNM) and advanced practice nurse prescriber, licensed to practice in the state of Wisconsin. I would like to commend you and the members of the *Special Committee on Health Care Access* for the work that you are doing to insure that all Wisconsin citizens have access to affordable health care. I was particularly impressed with the recommendations that appeared in *Memo No. I* (November 16, 2010), as the recommendations propose a multidisciplinary approach to increasing access to health care.

I am writing today to speak directly to the second bullet point on page 7, which is under the broader heading of "Licensure, Scope of Practice and Related Issues". The recommendation, as stated is to:

Eliminate scope of practice barriers for nurses. Eliminate any state laws which prohibit nurses from performing tasks for which they have adequate training.

There are roughly 120 certified nurse-midwives and hundreds of nurse practitioners that are educated and certified to provide primary care in the state of Wisconsin. Unlike many other states, Wisconsin law contains barriers to practice which prevent these highly skilled, cost effective, health care providers from practicing to the full extent of their certification. These barriers include the following:

- Certified nurse-midwives are required to have a written agreement with a physician in order to practice. There is no evidence that such an agreement improves safety or health outcomes. In fact, many states that allow the practice of CNMs without such an agreement have better maternal child outcomes than Wisconsin. Requiring CNMs to have a written agreement from a physician simply allows physicians to control the ability of nurse-midwives to work and earn a living doing what they are qualified to do.
- Wisconsin statute is unclear about whether or not advanced practice nurses can independently
  admit patients to hospitals. This lack of clarity has resulted in disparate interpretation of law,
  and based on that interpretation, advanced practice nurses have been denied privileges to
  admit patients to hospitals in Wisconsin
- Advanced practice nurses in Wisconsin do not have direct access to the Injured Patients and Families Compensation Fund (PCF). Current law provides PCF coverage for employees of covered entities, but there is no way for an independently functioning advanced practice nurse to get access to the fund. Without Fund coverage, it would be virtually impossible to get independent hospital privileges, even if Wisconsin statute were to clearly allow such privileges. Further, patients of independently practicing advanced practice nurses would not be extended access to the Fund simply because they are being cared for by a health care provider who does not have Fund coverage.

I deeply appreciate the committee's recognition that increased access to health insurance doesn't necessarily translate to increased access to health care. Clearly, improving access to health care requires that we insure that every citizen in this state has access to a qualified and appropriate health care provider; something that is often difficult to do in any number of the state's health

professional shortage areas. Removing the barriers to practice that advanced practice nurses in Wisconsin face is perhaps one of the quickest and most cost effective way in which to improve access to primary care providers for the citizens of Wisconsin. I am attaching a copy of AB 675, a bill that was introduced during the last legislative session (and passed in the Assembly with overwhelming bipartisan support) as an example of the types of statutory changes that might be necessary. I would be happy to discuss this with you further if you have questions or concerns. Thank you again for the attention you are giving to improving access to care for the citizens of Wisconsin.

Sincerely,

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CC: Senator Luther Olsen