

Senator Ned Claxton 3 State House Station Augusta, ME 04333-0003 (207)287-1515

Testimony in opposition to LD 295, "An Act To Repeal Restrictions That Prohibit Certain Advanced Practice Registered Nurses from Providing Essential Health Care Services"

Senator Sanborn, Representative Tepler and esteemed members of the Health Coverage, Insurance and Financial Services Committee. I write in opposition to LD 295, "An Act To Repeal Restrictions That Prohibit Certain Advanced Practice Registered Nurses from Providing Essential Health Care Services."

I apologize for the lateness of this testimony, but I understand the Work Session on this bill was delayed until this week. If I had known earlier, I would have tried to testify in person. My thinking is based on 40 years of working with medical students, family medicine residents and dozens of APRN's.

I continue to support APRN's practicing independently. These are my concerns:

- Medical students with more training (and maybe less experience) are not ready for independent practice when they get their MD degrees
- Much of post graduate education, whether it's residency-based or 2 years of supervision is about working on a team and learning your professional limits
- I've worked with over 12 APRN's and would be fine with any of them practicing independently, but only after some time to mature their medical judgement and to assess their ability to self-assess. The medical residents that caused the greatest concern for the residency faculty where I taught, were those who did not appreciate the limit of their skills and too easily went beyond them
- The ability to self-assess is rarely fully captured in formal testing or in the compacted education cycle of training APRN's or medical students
- The potential gain in this bill is only 2 years-worth of the limited number of APRN's who want to go into independent practice. This is likely a very small number. That many APRN's will not solve the problem of getting providers into rural areas.

I am proud to have been the first physician in my area to hire an APRN into my private practice. She brought impressive people and medical skills to her work and our patients benefited from her expertise. I have always supported APRN's in taking on more responsibility and worked for that during my 10 years as chair of the CMMC Credentials Committee. My specific concerns are that this bill risks having APRN's assume a new role before they are ready to succeed and that patients may suffer.

Thank you for the opportunity to present my thinking to this committee.

Sincerely, Ned Claxton, MD