

## THE BENEFITS OF MOBILIZING NURSE PRACTITIONERS IN MAINE

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Maine Legislature, Joint Committee on Health Coverage, Insurance, and Financial Services

February 25, 2021

Chairs Sanborn and Tepler and all distinguished members of the Joint Committee on Health Coverage, Insurance, and Financial Services, thank you for the opportunity to submit testimony on the subject of regulations governing the licensure of nurse practitioners in Maine. I am a professor of economics and director of the Knee Center for the Study of Occupational Regulation at Saint Francis University in Loretto, PA. I am also a senior affiliated scholar with the Mercatus Center at George Mason University.

Based on my own research on the effects of permitting nurse practitioners to practice and use their unique skillsets, I offer the following takeaways:

1. Nurse practitioners can potentially help fill the predictable void in primary care health services as the projected decline in the number of primary care physicians continues.
2. Permitting nurse practitioners to practice to the full extent of their specialized training after successful completion of licensing requirements would improve patient access to care without increasing cost or sacrificing quality.

This is an urgent question, as Maine, like many other states, is facing challenges providing adequate primary care to patients. National trends suggest that the decline in the number of primary care physicians will continue.<sup>1</sup> Nurse practitioners can step in to fill the void created by physicians' absence, as long as the existing law does not tie their hands and unnecessarily delay them from practicing to the full extent of their potential.

Nurse practitioners are often restricted by state law when it comes to applying the skills that they have learned, but they can alleviate the challenges that vulnerable populations encounter accessing primary care. Current Maine law permits nurse practitioners to apply for full practice autonomy after achieving the equivalent of two years of full-time clinical experience. Maine would not be going out on a limb by reducing this experience requirement. Other New England states such as New Hampshire and Rhode Island grant nurse practitioners full practice autonomy immediately upon successful completion of the requirements for licensure.

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1. Robert Graham Center, *Maine: Projecting Primary Care Physician Workforce*, n.d.

Research consistently shows that these restrictions on nurse practitioner scope of practice result in longer patient driving times to receive primary care and reductions in the volume of care provided by nurse practitioners.<sup>2</sup> In addition, researchers consistently find that nurse practitioners are more than capable of providing quality care to patients.<sup>3</sup>

In my own research examining how changes to nurse practitioner scope of practice affect Medicaid patients, my colleagues and I find evidence that permitting nurse practitioners to practice autonomously is associated with patients receiving more care without increasing cost.<sup>4</sup> However, it should be emphasized that our research suggests that the positive effects of granting nurse practitioners autonomy are fully realized only when they are granted full practice authority. The change is quite large: we estimate an 8 percent increase in the amount of care that Medicaid patients receive.

Research continues to demonstrate that nurse practitioners are more than capable of providing high-quality primary care, which is sorely needed. Granting nurse practitioners the ability to practice autonomously immediately upon successful completion of licensure requirements is a commonsense reform. Maine would not be unique; rather, the state would be bringing policy closer in line with other states and taking steps necessary to ensure that citizens receive the care they need.

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2. Donna Felber Neff et al., "The Impact of Nurse Practitioner Regulations on Population Access to Care," *Nursing Outlook* 66, no. 4 (2018): 379–85; Yong-Fang Kuo et al., "States with the Least Restrictive Regulations Experienced the Largest Increase in Patients Seen by Nurse Practitioners," *Health Affairs* 32, no. 7 (2013): 1236–43.

3. E. Kathleen Adams and Sara Markowitz, "Improving Efficiency in the Health-Care System: Removing Anticompetitive Barriers for Advanced Practice Registered Nurses and Physician Assistants" (Policy Proposal No. 2018-08, Hamilton Project at the Brookings Institution, Washington, DC, June 2018).

4. Lusine Poghosyan et al., "The Economic Impact of the Expansion of Nurse Practitioner Scope of Practice for Medicaid," *Journal of Nursing Regulation* 10, no. 1 (2019): 1–6.