Health Professions and Practice Regulations in the Interprofessional Perspective: The U.S. Experience

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Today’s Presentation

- The changing health care delivery system in the U.S.- implications for scope of practice rules
- Issues with state-based health professions regulation in the U.S.
- Strategies to strengthen scope of practice decision-making
Health Reform Is Changing the Health Care Landscape

- Expand access to basic health care services
- Contain costs
- Improve quality of care
Health Reform Supports New Models of Service Delivery

- Accountable Care Organizations, Health Homes and Patient-Centered Medical Homes are increasing in number
- Team-based approaches to care are frequently used in these models
- Team composition and roles vary, depending on the patient population
- Teams may include: physicians, nurse practitioners, physician assistants, registered nurses, social workers, licensed practical nurses, medical assistants, and community health workers, among others
Multidisciplinary Teams Have Positive Impacts on Patient Outcomes

“The provision of comprehensive health services to patients by multiple health care professionals with a collective identity and shared responsibility who work collaboratively to deliver patient-centered care.”


Research suggests health care teams with greater cohesiveness and collaboration are associated with:

- Higher levels of patient satisfaction
- Better clinical outcomes

The most effective and efficient teams demonstrate a substantial amount of scope overlap – i.e., shared responsibilities
So What’s the Problem?

- Maldistribution of primary care practitioners
- Health professions students are not consistently exposed to team-based models of care or trained in emerging functions
- Scope of practice restrictions
  - Health professionals not always allowed to do what they are trained and competent to do
  - Scope overlap needed for team-based care is challenging to achieve
In the U.S., States Are Primarily Responsible for Regulating Health Professions

State Regulations

- Definitions
- Describes Regulatory Body
- Title Protection
- Professional Qualifications
  - Education and Training
- Competency/Certification Requirements
- Licensure Process
- SOP Including Limitations and Exceptions
- Licensure Renewal
- Discipline Process
- Continuing Education
- Appeals Process
Interest in Scope of Practice Regulation is Increasing

- Drivers of change in scope of practice include:
  - Changing public policy: health reform
  - Lack of access to needed health services
  - Demographics: aging population, growing diversity, racial/ethnic disparities
  - Cost pressures in health care: do more with less
  - Technology: more access to data
  - Consumer demand for alternative providers, e.g., acupuncturists
  - Market forces, e.g., retail clinics
What is Scope of Practice?

- Professional scope of practice, i.e. professional competence, describes the services that a health professional is trained and competent to perform.
- Legal scope of practice, based on state-specific practice acts, define what services a health professional can and cannot provide under what conditions.
- Legal scope of practice and professional competence overlap, but amount of overlap varies by state and by profession.
Issues With State Based Health Professions Regulation

- Mismatches between professional competence and state-specific legal scopes of practice
- Lack of uniformity in legal scopes of practice across states for some health professions
- Resistance to allowing scope of practice overlap among health professions
- The process for changing state-specific scope of practice is slow and adversarial
Mismatch Between Professional Competence and State Specific Legal scopes of Practice

- Health reform programs depend on health professionals practicing to their full level of competence
- State-specific scopes of practice have not kept pace with changes in professional competence
- State laws that fail to acknowledge these changes can constrain a health professional’s practice and impact cost, quality and access to care
State to State SOP Variation: Nurse Practitioners

View the interactive version online: www.bartonassociates.com/np-laws

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This chart is for informational purposes only and is not for the purpose of providing legal advice. You should contact the applicable nursing board or your attorney for specific legal advice.

RESOURCES
AANP - www.aanp.org
The 2012 Pearson Report - www.webnponline.com
The Nurse Practitioner’s 24th Annual Legislative Update - www.tnpj.com

http://chws.albany.edu
State to State SOP Variation: Creates Opportunities for Comparative Effectiveness Research


Lack of Uniformity in Scope of Practice: Certified Registered Nurse Anesthetists (CRNAs)

- In New York, CRNAs are authorized providers of anesthesia services, but their scope of practice is not defined in state law
  - Are important providers of anesthesia services in rural NY
  - Cannot directly bill the state’s public insurance program (Medicaid)
  - Must be supervised by a physician

- In Colorado, CRNAs have a defined scope of practice in state law that allows them to practice more autonomously
Resistance to Scope Overlap: Pharmacists Providing Immunizations

- Historically, the administration of immunizations were limited to physicians and nurses
- Broadened to include pharmacists
- State laws to allow pharmacists to give immunizations have taken over a decade to enact - from 1994 to 2009
Emerging Workforce Model: Dental Therapists

- New oral health professional
- Provide basic restorative dental services
- Primarily targeted to underserved populations
- Currently authorized in Alaska and Minnesota
- Early evaluations of the model are promising
Changes to State Scope of Practice Requirements: Slow and Adversarial

- Can be costly
- Often a turf war between two groups with unequal resources
- Typically incumbent professions overpower emerging professions
- Contributes to animosity between professionals expected to work together, making team-based practice models harder to implement
Policy Reforms to Strengthen Scope of Practice Decision-making

- Align profession-specific scopes of practice with professional competence for all health professions
  - Adopt model practice acts
- Increase the engagement of consumers in scope of practice decision-making
- Assure regulatory flexibility to accommodate emerging roles and scope overlap
Policy Reforms to Strengthen Scope of Practice Decision-making

- Use the best available evidence in scope of practice decision-making – based on what is in the best interests of patients
- When evidence is not available, allow time-limited demonstration/pilot programs with comprehensive evaluations
  - California Health Workforce Pilot Projects Program
Policy Reforms to Strengthen Scope of Practice Decision-making

- Create a state oversight committee to review all proposals to change SOP or create new categories of workers
  - Membership: affected health professions, relevant state agencies, labor union and consumer reps

- Establish a national clearinghouse on scope of practice information and research
  - Up-to-date and reliable information on scope of practice proposals, modifications, demonstrations, innovations, evaluations and model practice acts
Thank You

Questions?