

**Memorandum in Opposition
Nurse Practitioner (NP) Modernization Act Extender
H/MH Article VII Part P**

The New York American College of Emergency Physicians (NYACEP) represents over 3,000 dedicated emergency medicine physicians committed to speaking out for broad access to quality health care, especially emergency health services for all citizens.

NYACEP is strongly opposed to extending the exemption for NPs with over 3,600 hours to practice independently without a collaborative agreement with a physician. The shift in New York State that allowed for NP independent practice represents a safety risk to patients and leads to increased health care costs. Nurse practitioners have no residency requirement and only 500-720 hours of clinical training, their education is far less rigorous than the training of physicians. By sharp contrast, physicians complete 4 years of medical school plus 3-7 years of residency, including 10,000-16,000 hours of clinical training.

It is more than just the vast difference in hours of education and training, it is also the difference in rigor and standardization between medical school/residency and nurse practitioner programs. During medical school, students receive a comprehensive education in the classroom and in laboratories, where they study the biological, chemical, pharmacological, and behavioral aspects of human conditions. This period of intense study is supplemented by two years of patient care rotations through different specialties, during which medical students assist licensed physicians in the care of patients. During clinical rotations, medical students continue to develop their clinical judgment and medical decision-making skills through direct experience managing patients in all aspects of medicine. Following graduation, students must then pass a series of examinations to assess a physician's readiness for licensure. At this point, medical students "match" into a 3-7 year residency program during which they provide care in a select surgical or medical specialty under the supervision of experienced physician faculty. As resident physicians gain experience and demonstrate growth in their ability to care for patients, they are given greater responsibility and independence. NP programs do not have similar time- tested standardizations. In summary, NP education and training to deliver patient care is not interchangeable with physician education and training.

In the January 2022 edition of the [Journal of the Mississippi State Medical Organization](#), Batson et al. published an article entitled "Mississippi Frontline – Targeting Value-based Care with Physician-led Care Teams". This was a retrospective study looking at almost 10 years of data from that Hattiesburg Clinic looking at over 300 physicians and 150 advanced practice nurse and physician assistant providers. *The study found that allowing advance practice providers to function with independent panels failed to meet goals in the primary care setting of providing patients with an equivalent value-based experience for*

quality of care, keeping costs stable and meeting patients' expectations and satisfaction with healthcare delivery.

Another recent study showed that, in states that allow independent prescribing, NPs were 20 times more likely to overprescribe opioids than those in prescription-restricted states. Given the current opioid epidemic now more than ever it is critical that patients receive the highest standard of care and that is a team based effort. Health care is a team effort that is optimized when the team members, including the patients, work together-communicating, merging observations, expertise, and decision-making responsibilities-with the common goal of providing the safest and most appropriate care. Effective teams, whether in health care, sports, or other arenas, have leaders. In health care, those leaders are the physicians who have 7 years or more of postgraduate education and at least 10,000-16,000 hours of clinical experience and bear the burden of responsibility for appropriate diagnosis and care. NYACEP believes there is a place for nurse practitioners in the healthcare workforce. However, in high stakes scenarios, with undifferentiated, acutely ill patients, as present in the ED, nurse practitioners are best suited as a member of a physician led team.

NYACEP strongly opposes extending the Nurse Practitioner Modernization Act. NYACEP respectfully asks the Legislature to reject this proposal and sunset Nurse Practitioner independent practice in order to enable patients to receive care in a team based effort which has been proven to provide the highest standard of care.