



AMA successfully fights scope of practice expansions that threaten patient safety

#StopScopeCreep

Patients deserve care led by physicians—the most highly educated, trained and skilled health care professionals. Through research, advocacy and education, the AMA vigorously defends the practice of medicine against scope of practice expansions that threaten patient safety.

For over 30 years, the AMA's state and federal advocacy efforts have safeguarded the practice of medicine by opposing nurse practitioner (NP) and other nonphysician professional attempts to inappropriately expand their scope of practice.

Why scope of practice matters

In the Nov. 11, 2021, episode of Moving Medicine, AMA Chief Experience Officer Todd Unger discusses scope of practice and the AMA's ongoing efforts to address this important issue on behalf of physicians with Michaela Sternstein, JD, vice president of the AMA's Advocacy Resource Center.

More than 100 scope of practice victories since 2019

Since 2019, the AMA secured over 100 state legislative victories stopping inappropriate scope expansions of nonphysicians. This work was done in strong collaboration with state medical and national specialty societies.

State and federal correspondence to lawmakers and regulators

Learn more about the AMA's recent actions:

- Letter to Louisiana House of Representatives to oppose House Bill 495 which would give all advance practice registered nurses the ability to provide medical care without any physician involvement, including diagnosing and treating patients and prescribing medications.
- Letter to Louisiana House of Representatives to oppose House Bill 442 which would eliminate physician supervision of physician assistants and allow physician assistants to independently diagnose and treat patients as well as prescribe controlled substances without any physician involvement. This would be an arrangement that no other state allows.

- Letter to the Delaware House of Representatives expressing opposition to House Bill 141 and HB 21 which together would allow all advance practice registered nurses (APRNs) the ability to provide medical care without any physician involvement. It would also set into place the APRN Compact which unlike every other state licensure compact preempts state scope of practice laws and creates uniform licensure requirements.
- Letter to the Colorado General Assembly expressing opposition to House Bill 1184, which would allow physician assistants to practice medicine without any physician involvement including the ability to diagnose and treat patients.
- Letter to the Chairman of the Kansas State Senate expressing opposition to Senate Bill 174 which would allow all advance practice registered nurses (APRNs) the ability to provide medical care without any physician involvement and allow more prescribers of controlled substances.
- Letter to the Chairs of the Health Coverage, Insurance and Financial Services Committee of the Maine State Legislature expressing opposition to legislative document 295 which would allow advanced practice registered nurses (APRNs) the ability to provide medical care without any involvement, including newly graduated APRNs.
- Sign-on letter to the Department of Veterans Affairs (VAs) objecting to the development of standards that threaten the quality of health care provided to our nation's veterans and runs counter to research showing that care is best delivered by physician-led teams. In fact, four in five patients want and expect it.
- Letter to Mississippi State Legislators to oppose Mississippi House Bill 1303, which would allow advanced practice nurses (APRNs) to practice without any physician involvement and also allow nurse practitioners who meet certain requirements to serve as the collaborating/consulting provider for all four types of APRNs.
- Letter to South Dakota House of Representatives strongly opposes South Dakota House Bill H.B. 1163. The bill would have allowed physician assistants to practice without any physician involvement, putting patients at risk and weakening the definition of care team collaboration.
- Letter to Maryland legislators expressing AMA's opposition to Maryland House Bill 182 and Senate Bill 169 that would allow podiatrists to use the term "podiatric physician."
- Letter encouraging New Jersey Governor Murphy to sign the New Jersey Health Care Transparency Act, into law. The bill, which is based on AMA's Truth in Advertising model law, would require all health care professionals to include their professional license and degree in any advertisements and their level of training and legal licensure on a name badge.
- Sign-on letter to Seema Verma urging CMS to sunset waivers involving scope of practice and licensure when the public health emergency concludes.
- Comment letter to Governor Kemp encouraging the governor to veto Georgia Senate Bill 321 (S.B. 321), which would allow APRNs to order diagnostic imaging studies. Such expansion would also increase health care costs and threaten the health and safety of patients in Georgia.

- Sign-on letter to U.S. Dept. of Veteran Affairs as it relates to allowing nonphysician health care professionals in 32 specialties to operate “within the full scope of their license, registration, or certification” and rescind the Memorandum as it relates to encouraging all VA medical facilities to allow CRNAs to practice without physician oversight during the national health emergency.
- Sign-on letter to Department of Health and Human Services responds to a proposal included in the Fiscal Year (FY) 2021 Inpatient Rehabilitation Facility (IRF) Prospective Payment System (PPS) proposed rule, where CMS allows the use of nonphysician practitioners (NPPs) to perform the IRF services.

AMA's work in the courts

AMA Litigation Center filed an amicus brief with ASA in the New Hampshire Supreme Court. The brief asks that the court uphold a New Hampshire Board of Medicine decision that stops individuals from identifying themselves as anesthesiologists if they aren't licensed as such.

South Dakota physician assistant independent practice bill defeated

The strong collaboration of South Dakota State Medical Association (SDSMA) along with state specialty societies and the AMA, helped defeat H.B. 1163. The bill would have allowed physician assistants to practice without any physician involvement, putting patients at risk and weakening the definition of care team collaboration.

Mississippi bill on independent APRN practice defeated

Mississippi's Senate Public Health and Welfare Committee announced they would not consider House Bill 1303, citing the need for further study. H.B. 1303 would have threatened the health and safety of patients in Mississippi by allowing APRNs to practice without any physician involvement and allow nurse practitioners who meet certain requirements to serve as the collaborating/consulting provider for all four types of APRNs.

The victory is a testament to MSMA's multi-year effort in leading a state scope of practice partnership comprised of 17 state specialty societies, as well as a comprehensive education and public relations campaign on the importance of physician-led teams. MSMA's efforts were supported by a grant from the AMA's Scope of Practice Partnership.

Physician-led team-based care safeguarded

CMS did not finalize its proposal to amend the Inpatient Rehabilitation Facility (IRF) coverage requirements to allow non-physician health care professionals to perform certain duties that are currently required to be performed by a rehabilitation physician.

The AMA joined the American Academy of Physical Medicine and Rehabilitation in raising a unified voice with more than 120 state and specialty societies, patient groups and other stakeholders to oppose the proposal that would have had a detrimental impact on patient care and set a dangerous precedent for removing physician supervision requirements in other health care settings.

More than \$2 million in grants awarded

The AMA recognizes the importance of the house of medicine working together, which is why it formed the Scope of Practice Partnership (SOPP) in 2006. Today, the SOPP is comprised of 105 national, state and specialty medical associations. The SOPP has awarded more than \$2.3 million in grants to its members to fund advocacy tools and campaigns.

Produced hundreds of tools to fight scope expansion

The AMA is one of the only national organizations that has created more than 100 of advocacy tools for medicine to utilize when fighting scope expansion legislation and regulation including model bills, legislative templates, state laws analyses, issue briefs and more.

Demonstrated scope expansion does not equal expanding access to care

The AMA has created over 4,500 geomaps, along with the Health Workforce Mapper, to demonstrate that expanding scope does not equal expanding access to care.

For instance, AMA research shows the following:

- Nonphysician providers (such as NPs) are more likely to practice in the same geographic locations as physicians. This is true even in states that allow NPs to practice independently.
- Despite the rising number of NPs across the country, health care shortages still persist, even in states that allow NPs to practice independently.

Engagement with the FTC and administration

The AMA has proactively engaged the Federal Trade Commission (FTC) when necessary and responds to FTC enforcement against state licensure board actions related to scope of practice. In addition, the AMA is working with the administration to preserve physician supervision of nonphysician professionals in Medicare.

The AMA opposes a new declaration from the U.S. Health and Human Services Department (HHS) that allows pharmacists and pharmacy interns to administer vaccines to children between three and 18 years old.

Launched the AMA Truth in Advertising campaign

The AMA launched the Truth in Advertising campaign, aimed at ensuring patients clearly know the license and training of those providing their health care.

Distributed educational wheels

The AMA has distributed thousands of “Education Matters” wheels, to legislators and regulators across the country, that compare the education and training of physicians and nonphysicians.