The latest on scope of practice legislation with Kimberly Horvath, JD

AMA's Moving Medicine video series amplifies physician voices and highlights developments and achievements throughout medicine.

Featured topic and speakers

In today's episode of Moving Medicine, a discussion with Kimberly Horvath, JD, a senior attorney with the AMA’s Advocacy Resource Center, about scope of practice legislation at the state level. Physician-led health care teams are important to patients. They want doctors involved from diagnoses to treatment—and the AMA advocates on behalf of physicians to address these important issues with lawmakers across the country.

Speaker

- Kimberly Horvath, JD, senior attorney, AMA Advocacy Resource Center

Transcript

Unger: Hello, this is the American Medical Association's Moving Medicine video and podcast. Today we're talking with Kimberly Horvath, a senior attorney with the AMA's Advocacy Resource Center in Chicago about scope of practice and the AMA's efforts to address this important issue on behalf of physicians. I'm Todd Unger, AMA's chief experience officer in Chicago. Kim, thanks so much for joining us. The AMA has been working on scope of practice at the state and federal levels for more than 30 years but it seems to me this is a hotter topic than ever. Why does this continue to be such an important priority for physicians and the AMA?

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Horvath: Yeah, thanks Todd. It's so great to be here today and yes, it's hard to believe it we've been working on this issue for 30 years but absolutely it is becoming more and more important each and every day. And I think the main reason is the top priority for physicians and for the AMA is because of patients. Physicians care deeply about the health of their patients and they care deeply about patient access to high-quality health care. We know the health care has changed a lot over the past 30 years but more than ever, we know that it's important about physicians led care and making sure that patients have access to physician-led care. And I think it's also one of those issues that spans the spectrum of physicians that care deeply about it from medical students and residents to new physicians or physicians that have been around for a really long time as well and established practices. Spans across specialties, spans across types of practices as well. So, certainly one that all of our members care deeply about.

Unger: It's interesting just to kind of key on something you said, I mean we have a very clear idea you mentioned students, residents, physicians and their views on this issue. But from the patient's point of view, what do we know about how patients feel about this issue?

Horvath: Yeah, patients play a central role in how we view this issue as well. And we know, we've conducted a number of studies over the years and know for sure that patients want physicians leading their health care team and they don't just want to but they expect it. In our most recent survey, we found that 95% of patients said it was important or very important for physicians to be involved in their health care diagnosis and treatment decisions, with 68% saying it is very important. So, that's a lot of patients that really think it's important and want to have physicians involved in their health care team. And we know that patients care about their health care obviously, and they care about the cost of care as well. Of course, right? We all do. And I think that we can agree that there's some room for improvement, right? In the health care system overall but patients are really concerned that allowing non-physicians to provide physician level care is a step in the wrong direction. And they fear that patients are going to be the ones that suffer most, should these scope expansions take place.

Unger: A lot of this activity in the scope world takes place at the state level. And a lot of the legislative state sessions around the country are just wrapping up. Can you give us an update on the results so far?

Horvath: Yeah, we've still about half the states are session, so can't give a full update. But certainly, are happy to report, we've had some victories at the state level already this year. And I should pause here and just say that all the work that we do in this area is hand in hand with the state medical associations across the country. We just rely on them so much for their political acumen in this space and again, work hand in hand with them on these issues. We've worked so far this year with 25 state medical associations on this issue and some key victories. As I mentioned, I would give you Colorado and South Dakota defeated legislation that would have allowed physician assistance to practice independently without any physician-led care.
Mississippi defeated legislation that would have expanded the scope of practice of APRNs. Wisconsin, big victory there when Governor Evers veto legislation that would have given APRNs allowed them to practice without any physician involvement. Big wins in Kentucky as well, as well as Tennessee. Alabama defeated all their scope legislation this year, including legislation that would have expanded the scope of practice of optometrists and would have allowed them to perform surgery. So, really important victory there as well.

**Unger:** That is a lot of activity.

**Horvath:** A lot of activity and what we're only halfway through. So, lots of states are still in session, lots of work that's still going on. Lots of bills that we're still really interested in and working with the states on and actually gearing up for 2023 already in a lot of states.

**Unger:** You mentioned the AMA is working in partnership at the state level with state societies, what is AMA bringing to the table in terms of resources?

**Horvath:** Yeah again, strong collaboration with the states at every level. And we provide lots of support on the way and it can take many forms. One is providing a lot of the tools and resources that we have created over the years. Things like our modules, our education and training modules that provide a deep dive analysis of the difference in education and training of various physicians and non-physicians. We have geomap series, 4,500 geomaps over three periods of time. And what these do is they show the practice location of various physicians and non-physicians in a state. And these have been really instrumental in pushing back against the notion that scope expansions are necessary to increase access to care particularly in rural areas. That is an argument that we've heard time and again in legislators and what we have found and what we can clearly show in, for example, these geomaps is that the practice location of physicians and non-physicians tends to be in the same areas of the state.

And it's true, irrespective of state scope of practice laws. So, clearly scope expansion, laws that expand the scope of practice for non-physicians does not correlate to increased number of non-physicians moving into those rural areas. So, the geomaps have been really instrumental in pushing back against that notion. We also provide letters, write letters. We have board members that testify and we are not shy about amplifying, for example, calls to action from the state medical associations encouraging our members or reaching out to the SOPP, the Scope of Practice Partnership and encouraging other members and other national specialty societies to reach out and encourage lawmakers to oppose key bills.

**Unger:** Kim, one of the things that I've been reading about in the press is a study that has come out of Hattiesburg Clinic in Mississippi that examined some of these issues around physician and non-physician care. Tell us more about what that study revealed.


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Horvath: Yeah. So, Hattiesburg Clinic is in Mississippi and they've done a study, it's a 10-year study, and they looked at the quality of care and the cost of care provided by patients that saw non-physicians and patients that saw physicians. And what they found is that patients that saw physicians had both a lower cost of care and a higher quality of care than patients that saw the non-physicians. And what they did with the information was really change how they approached how they used non-physicians like physician assistants and nurse practitioners in their practice. And now what they do is they alternate care provided by physicians and non-physicians, so patients aren't seen only by a non-physician for example.

But they do have physicians involved in their care on a regular basis as well. And I think it's just a really good example of looking at the data, knowing that we all work as part of a health care team but how best to utilize non-physicians as part of that team. And it is as part of a physician-led team, which again, supports AMA policy see in this space and what we've been advocating for at the state level on this issue.

Unger: So, it sounds like on this particular side, AMA bringing a lot of resources on the data front to move this to a data-based discussion. And then in addition to that, there are a lot of resources involved. Talk to us about the scope of practice partnership and what that brings to the table.

Horvath: Yeah. So, the SOPP plays a really important role in our work on scope of practice. And there are 108 organizations that are part of the SOPP and they've really come together with a common goal of defending the practice of medicine and opposing inappropriate scope expansions. The SOPP has been instrumental in creating some of the resources that I mentioned earlier, like the geomaps and also in providing grants to state medical associations, to help them on their work on these issues. Look, we know we can't do this alone and we know that we are much stronger when we're all working together, which is really the purpose of the SOPP and they have played a really pivotal and key role in both building up our scope campaign but also continue to play an instrumental role in again, supporting physician led care in states across the country.

Unger: Kim, this clearly a really important issue for physicians, students, residents, to be involved with. What are some concrete steps and ways that they can get involved?

Horvath: Yeah, I mean first and foremost, become a member of the AMA. But also become a member of the State Medical Association, National Specialty Society. And we know we're better when we're all working together and we're stronger when we work together. But also get to know your state legislator, get to know your state rep, your state senator, and they should know who you are in a good way, right? And don't wait for a bill to be filed or for a key vote, start this now. Build those relationships, it takes time. Even if you haven't done it before, let today be day one to reach out to your lawmaker and seek out information from the AMA, from your state medical society on these issues, so you can educate yourself about how to approach. But also, don't be shy in providing real life experiences with lawmakers. I mean that's the real value that you can provide to them with those experiences, not just
on this issue but on all the issues that are important to physicians. So, I think those are definitely some ways and again, start today.

**Unger:** It is that combination of the facts and you can't assume that your state legislation have that kind of research and data that we covered earlier in this. But also, as you say, combined with personal stories of how it is on the ground for patients. Kim, thanks so much for being here today. That wraps up today's Moving Medicine episode. Make sure you don't miss any more episodes of this because they're terrific. You can subscribe on YouTube or check out all our videos and podcasts at ama-assn.org/podcasts. Thanks for joining us and please take care.

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