

Bill in Texas Legislature Would Give Nurse Practitioners More Power



A bill in the Texas House seeks to end regulations that require nurse practitioners to contract with doctors in order to treat and write prescriptions. The proposal, HB1415, would give nurse practitioners (NPs) in Texas the freedom and flexibility they have been seeking for decades, reports **Androvett Legal**

Media & Marketing.

It also would cut costs for both patients and providers, according to attorney **Bill Hopkins** of the Austin office of **Shackelford, Bowen, McKinley & Norton, LLP.**

“From the start, there has been a fundamental tension between their role and the role of the physician in the health care setting,” says Hopkins, who advises both individual and institutional health care providers on matters involving administrative law, regulatory defense and litigation. “No one has ever questioned that the physician is at the top of the pyramid. But over the years there has been some question as to whether there was some room at the top for the nurse practitioner who can drastically improve access to care.”

Currently NPs must complete four years of nursing school and two years in a graduate-level training program. Although they are regulated by both the Texas Board of Nursing and the Texas Medical Board, regulations require a doctor to supervise – even if the physician is not physically present and does not even see the patient, says Hopkins. Similar regulations have been rolled back in other states, with no evidence of increased safety issues, he says, adding that in some studies,

nurse practitioner safety has ranked as high or higher than doctor care.

“For many years, NPs have argued that their knowledge, ability and training were more than sufficient to allow them to practice independently, care for patients and ensure safety,” he says. “The justification for charging NPs for this ‘supervision’ traditionally has been that it is a necessary cost to ensure patient safety. But thanks to the Affordable Care Act, there are more people with insurance than ever before and access has become a primary concern. With the safety argument becoming less relevant and calls for better access getting louder, it looks like this may be the time for NPs to finally get the independence that they have sought.”

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