Independent Practice for APRNs: The Issues & Concerns

Education & Training Gap
*There is a significant gap in the educational and training requirements between Family Physicians and Nurse Practitioners.*

<table>
<thead>
<tr>
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<th>Education Requirements</th>
<th>Total Time for Degree Completion</th>
<th>Total Required Post-Graduate Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Physician</td>
<td>11 years</td>
<td>20,700-21,700</td>
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</tr>
<tr>
<td>Nurse Practitioner</td>
<td>5.5-7 years</td>
<td>2,800-5,350</td>
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Patient Safety
*Due to the gap in education and training between APRNs and Family Physicians, many have raised concerns over patient safety and quality of care.*

- A study on antibiotic prescribing in The American Journal of Medicine found that non-physician clinicians were **10% more likely** than practicing physicians to prescribe antibiotics in out-patient settings.\(^2\)
- Psychiatric care is so much more than just prescribing. More than 50% of patients with mental illness have an underlying physical condition. The complex interaction of medications poses a significant challenge to experienced physicians. Giving APRNs prescribing authority would add them to those who could prescribe opioids and other controlled substances.

Access to Care
*There is not sufficient evidence to suggest that removing barriers to the scope of practice for Nurse Practitioners will increase access to care.*

- In Texas, in 2009, the ratio of primary care physicians per 100,000 people in counties designated as Health Professional Shortage Areas was 32.8, while the ratio of nurse practitioners per 100,000 people in those same counties was 10.4.\(^1\)
- Additionally, there are other solutions such as telepsychiatry and the Collaborative Care Model that could address access to care concerns while maintaining physician involvement.

Cost Issues
*There is no sufficient evidence to suggest that increasing independent practice of APRNs will decrease cost.*

- There is evidence that use of nurse practitioners may actually increase the cost of care due to unnecessary referrals to specialists and ordering of unnecessary diagnostic tests and x-rays.

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1 Primary Care Coalition
2 American Journal of Medicine
3 Journal of the American Academy of Nurse Practitioners