

**Testimony of the
Pennsylvania Osteopathic Medical Association**

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Past President**

House Professional Licensure Committee

**October 22, 2015
House Bill 765**

Good afternoon Chairwoman Harhart and members of the House Professional Licensure Committee. I am Christopher D. Olson, D.O., a board certified family physician in Shamokin Dam, and a past president of the Pennsylvania Osteopathic Medical Association (POMA). I would like to thank you for the opportunity to present the views of the POMA regarding House Bill 765, which greatly expands the scope of practice for certified nurse practitioners.

House Bill 765 would authorize certified nurse practitioners to diagnose, treat and prescribe medications without the oversight and co-signature of an osteopathic or allopathic physician. Thus, it would effectively allow CNPs the same authority and clinical autonomy as a physician, without the same amount of continuing medical education and training..

They would also be recognized as primary care providers under health care plans, and be reimbursed directly for those services.

While removing physician involvement from the equation, this bill does not include commensurate increases in education, training or competency demonstration requirements for CNPs. It also does not require CNPs to carry a level of liability insurance equal to that of a primary care physician. We fear that the passage of this bill will put the health and safety of Pennsylvania patients at risk.

While CNPs provide safe and essential basic and preventive health care to patients, POMA does not believe their education and training are sufficient to handle autonomous decision-making in regard to patient tests and diagnoses.

It is important to remember the extensive education and training that our state requires of our physicians. Osteopathic physicians complete four years of osteopathic medical school, which includes two years of didactic study and two years of clinical rotation, performed in community hospitals, major medical centers and doctor' offices. This is followed by three to seven years of postgraduate medical education, based on the requirements of their specialty, where D.O.s develop advanced knowledge and clinical skills relating to a wide variety of patient conditions. Physicians (D.O.s and M.D.s) have extensive medical education and comprehensive training that prepare them to understand medical treatment of diseases, complex care management and safe prescribing practices.

In comparison, registered nurse practitioners who hold a two-year master's degree and current board certification in a particular clinical specialty will automatically be deemed to be licensed as independent CNPs.

Board certification in clinical specialties and independent practice rights for CNPs also makes us wonder if they will be allowed to practice in specialty areas, as well as primary care, without a medical degree (D.O. or M.D.) and without a physician's specialty residency.

While we value the contributions of CNPs to the health care delivery system, granting independent practice to CNPs is an unnecessary risk to patient safety. The physician-led team-based practice model has proven to be effective in treating patients and lowering health care costs. POMA supports this model, which maintains physician involvement in direct patient care. It is imperative that Pennsylvania's patients have access to the most highly-trained health care professional – the physician – in order to safeguard their care.

We urge you to protect the safety of Pennsylvania's patients by opposing House Bill 765.

Thank you again for allowing the Pennsylvania Osteopathic Medical Association to present our opposition to this bill today.