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Physicians, Nurse Practitioners reach landmark scope agreement

(HARRISBURG, PA. Sept. 29, 2020) This afternoon, the Pennsylvania House Professional Licensure Committee approved amendments to House Bill 100 that would create a six-year pilot program expanding the scope of practice for primary care Certified Registered Nurse Practitioners (CRNPs) in federally designated Health Professional Shortage Areas (HPSAs) across the Commonwealth.

Under current law, CRNPs are required to practice under a collaborative agreement with a physician. These agreements have been put in place to ensure patient safety, while allowing health care providers to practice to the extent of their education and training. Despite the loose parameters surrounding collaborative agreements, CRNPs have been advocating for years to practice independently without the oversight of a physician. House Bill 100 would create a pilot program allowing primary care CRNPs to do just that in areas of the state with limited access to health care.

The pilot program has the support of the Pennsylvania Coalition of Nurse Practitioners (PCNP), Pennsylvania Academy of Family Physicians (PAFP), Pennsylvania Chapter of the American Academy of Pediatrics – (PA-AAP), the Pennsylvania Chapter of the American College of Physicians (PA-ACP), Pennsylvania Medical Society (PAMED), and Pennsylvania Osteopathic Medical Society (POMA). House Bill 100 represents a momentous agreement on an issue that has been debated in the state General Assembly for nearly two decades.

In a joint statement, the five state general and primary care physician organizations said, “This pilot program provides a unique opportunity to appropriately evaluate the clinical acumen of the independent CRNP, to analyze health care outcomes, and to measure the degree to which they can improve access to quality care in rural and underserved communities.

“We’ve long recognized the great value that CRNPs provide as important members of a patient’s health care team. We hope this pilot program will improve access to quality health care in rural and underserved areas in our state.

“Much credit should be given to House Professional Licensure Committee Chairman David Hickernell for this concept, and we thank him, Chairman Readshaw and the Committee members for making this a priority.

“We look forward to working with House and Senate leadership to get this to the governor’s desk before the end of the year.”

House Bill 100 is now awaiting consideration by the full House of Representatives.

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