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November 10, 2006

Dr. H. David Bruton
Chair, AMA Reference Committee "L"
c/o Roger Brown, PhD
Director, Office of House of Delegates Affairs
American Medical Association
515 N. State Street
Chicago, IL 60610

Re: Resolutions 902 & 904

Dear Dr. Bruton:

I am writing, on behalf of the American Nurses Association (ANA), to express our concerns regarding Resolutions 902 titled, *Need for Active Medical Board Oversight of Medical Scope-of-Practice Activities by Mid Level Practitioners* and Resolution 904 titled *Diagnosis of Disease and Diagnostic Interpretation of Tests Constitutes Practice of Medicine to be Performed by or Under the Supervision of Licensed Physicians*. These resolutions make several assumptions and claims that are without merit and threaten the development and maintenance of collegial relationships between physicians and other licensed health care professionals at a time when access to quality multidisciplinary care is at a premium.

ANA is the only full service national association representing the interests of the nation's 2.9 million registered nurses through our 54 constituent member associations. We represent nurses in all roles and practice settings. Our membership includes advanced practice registered nurses who provide services to Medicare beneficiaries and are reimbursed directly by Medicare Part B under the physician fee schedule. As an organization representing the largest group of health care professionals, ANA advocates for both patient safety and the ability of all health professions and organizations to innovate and change to meet the needs of their patients.

Resolutions 902 and 904 raise serious concerns in several key ways. First, they are unmistakably a ploy to carve out a segment of the healthcare marketplace that the American Medical Association (AMA) already knows it will not be able to serve or fill, both currently and in the future. Resolution 904 simply has no other purpose than to monopolize Medicare and insurance payments. Unfortunately, such monopolization will also have secondary effects that will further limit access to care by licensed providers who have the education and experience to provide safe quality health care services. It also reduces the availability and choice of providers for those individuals who need it the most, Medicare beneficiaries. This Resolution also fails to recognize that our multidisciplinary delivery of care within this country requires the overlapping of scopes of practice and fails to acknowledge that without this overlap and professional team approach, patients will suffer.

Second, Resolution 902 makes unjustifiable claims that patients are at risk when receiving care from licensed practitioners who are not physicians. There is no evidence to support the Resolution's claim. Furthermore, the premise of the Resolution's claim that licensed practitioners should not practice outside of their education, skill and training, begs the question why any scope of practice discussion should begin with a definition of medical practice. To select one profession as the starting place from which others must "seek authorization" to practice diminishes the importance of all of the health care professions, and certainly ignores the fact that physicians, while schooled for a long period of time, are occasionally woefully lacking in knowledge in areas in which other professionals are knowledgeable and qualified. Based on this faulty premise, Resolution 902 reflects and reinforces the old-fashioned and self-serving positions traditionally held by organized medicine. It does not take into consideration the dramatic changes in education, practice, technology and the health care delivery system we have witnessed in the last 20 years.

Finally, ANA respectfully contends that it is inappropriate for the AMA to advise boards of medicine to regulate, either directly or indirectly, the scope of practice of licensed providers whose scope of practice is already authorized in statutes other than medical practice acts and those health professionals who are not regulated by boards of medicine. State legislatures, boards of nursing and the nursing profession are the appropriate regulators of nursing practice. As health care leaders, physicians and registered nurses need to provide an environment for innovation that allows for more flexible roles and responsibilities for health care professionals putting aside interprofessional conflicts.

Resolutions 902 and 904 represent a step back in history, instead of the forward thinking leadership that is needed at a time when our nation faces a health care crisis. On behalf of the ANA, I urge the AMA Reference Committee "L" to recommend withdrawal of Resolutions 902 and 904. If the Resolutions are not withdrawn, I then urge Reference Committee "L" to recommend to the AMA's House of Delegates that these inappropriate Resolutions not be adopted.

Respectfully,

A handwritten signature in cursive script that reads "Rebecca M. Patton".

Rebecca M. Patton, MSN, RN, CNOR
President

cc: William G. Plested, III, MD, AMA President
Cecil B. Wilson, MD, Chair, AMA Board of Trustees
Nancy H. Nielsen, MD, PhD, Speaker, AMA House of Delegates
Michael D. Maves, MD, MBA, AMA Executive Vice President
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