

Virginia Council of Nurse Practitioners

2021 Virginia General Assembly | HB 1737 Talking Points

Request support for HB 1737, which reduces from five to two the number of years of full-time clinical experience a nurse practitioner must have to be eligible to practice without a written or electronic practice agreement.

Current landscape

- Current Virginia law allows NPs with five or more years of clinical experience to apply for autonomous practice licensure thereby eliminating the need for a practice agreement.
- Under the Governor's Executive Order 57, which was signed on April 17, 2020 and extended with the signing of the Special Session budget in November 2020, NPs with two or more years of clinical experience can practice without a written or electronic practice agreement during the state of emergency.
- Virginia's collaborative requirement ties our state's capacity to use NPs to meet health care needs to the supply and availability of the physician workforce. This needlessly restricts the number of NPs who could otherwise evaluate, diagnose and treat patients and creates unnecessary geographic maldistribution of services and delays in care.
- Since April when EO 57 was enacted, there has been no negative impact on patient safety, and access to care has been improved.
- During the 2021 General Assembly session and with the support of Delegate Dawn Adams, VCNP is introducing HB 1737, which reduces from five to two the number of years of clinical experience an NP must have to practice without a written or electronic practice agreement.

Why this issue needs to be addressed now

- Virginia's practice restrictions impede an NP's mobility and ability to provide care where it is most needed.
- COVID-19's impact on health care is likely to continue for years. Patients and providers need the certainty and continuity of ensuring NPs can deliver health care without restrictions, rather than being a solution during the pandemic only to lose those advances when the emergency passes.
- Making EO 57's regulations permanent allow NPs to remain in Virginia (rather than moving out of state for work) and provide primary and specialty care, especially in underserved areas where the only local practice may have closed or significantly reduced hours.
- Easing practice restrictions also allows NPs to volunteer or re-enter the health care workforce in their communities or as part of the Virginia Medical Reserve Corps.
- According to The Senior List, 283 physicians are needed per every 100,000 residents to maintain a baseline balance between doctor supply and patient demand. Virginia currently has 262.4 physicians per every 100,000 residents, but nearly a third (29.3%) of them are over the age of 60 and likely to retire in the next decade. By easing or removing practice restrictions, NPs can help with this provider shortage.

Information about practice restrictions

- Twenty-nine states, the District of Columbia and the Veterans Administration all have laws and regulations in place embracing the role of NPs and allowing for some level of practice autonomy.
- Of these, sixteen states also require NPs to receive additional clinical experience before transitioning to an unrestricted license
- For the states that do impose an experience requirement before being eligible for autonomous practice, the limit is two or three years, in line with EO 57.
- Virginia is the only state that requires NPs to practice for five years before being eligible for autonomous practice.