



KANSAS ACADEMY OF
FAMILY PHYSICIANS

CARING FOR KANSANS

7570 W 21st ST N
Bldg. 1046 Suite C
Wichita KS 67205
316.721.9005
Fax 316.721.9044
kafp@kafponline.org
www.kafponline.org

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Quinter

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TESTIMONY: SB 69 (Opponent)
Senate Public Health & Welfare Committee
January 29, 2015

Presented by: Mary Beth Miller, MD, Board Chair

Thank you for the opportunity to provide testimony on Senate Bill 69, on behalf of the Kansas Academy of Family Physicians (KAFP). KAFP represents more than 1,560 practicing, resident and medical student members from across this great state. The mission of KAFP is to promote access to, and excellence in, health care for all Kansans through education and advocacy for family physicians and their patients. *Quality health care and health outcomes for our patients guide our public policy work.* As family physicians, we see people of all ages, both men and women, and we work with almost every type of ailment and illness that afflict our patients.

We have worked closely with the Kansas Medical Society, of which I am also a member, on a Task Force that met and discussed issues with the APRN group several times since the 2014 legislative session. Having been a part of that, I am especially grateful for the opportunity to have an open discussion about this bill and the many misconceptions surrounding it.

My desire today is to provide a better understanding of physician training and practice, how the collaboration between physicians and nurses plays out in the practice setting and, specifically, how it looks in a very rural Kansas setting.

My Practice

I am a board certified family physician in private practice in Cheyenne County. I and another physician provide medical care for our county of nearly 3,000 people. Because of this, I understand very well the importance of “physician extenders” such as nurse practitioners and physician assistants. In our county, as in other areas of the state, our collaborative team practice allows us to bring the best possible healthcare to our citizens.

When we first began meeting with the APRNs in our interim Task Force, the stated problem they gave as impetus for this legislation was that there were issues in some cases where physicians may not be providing appropriate oversight under the collaborative agreements we now have in Kansas law. We wanted to explore that more and see if we might address it, but they told us their bottom line was they wanted to do away with the collaborative agreements altogether and have the unfettered independent practice offered in SB 69.

Physician Training

Physicians complete four years of medical school, on top of a four-year bachelor’s program. They then add another three to seven years of residency training. It is in this residency training that they receive the invaluable benefit of **between 10,000 to 16,000 hours of direct clinical care.**



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Medical doctors are taught to provide thorough examinations in order to make complex differential diagnoses, moving beyond just symptom management to develop comprehensive plans that treat the whole patient.

APRN training in my practice area focuses on symptom identification, immunization, medication administration, and patient progress in recuperation or rehabilitation plans. Their knowledge and expert management in these areas make them valuable members of physician-led healthcare teams.

Collaboration

I believe my collaboration with well-trained APRNs and Physician Assistants brings the best possible healthcare to the citizens of Kansas. Independent practice as proposed in SB 69 drives a critical wedge in the team-based model of which KAFP has long been supportive.

This dramatic expansion of practice scope will disrupt a practice model that is not broken and, in fact, is working well to address access issues, while continuing to make healthcare quality and patient safety our chief priority. SB 69 would serve to further fragment healthcare access at a time when healthcare professionals and policymakers have worked so hard to create a more seamless care system with patient-centered medical homes. It will chip away at the stability of Kansas' high quality healthcare system.

Recommendations

I urge you to reject SB 69. If APRNs desire to expand their nursing practice into the scope of medical practice and procedures, we urge that they do so under the regulatory supervision of the Kansas Board of Healing Arts – the authority designated by law to regulate the practice of medicine in our state.

Again, I thank you for the opportunity to speak with you today.