

CMS Operational Plan for Governor Ritter's Collaborative Scopes of Care Advisory Committee



- Building Block:** The Collaborative Scopes of Care Study (Executive Order B 003 08)
- Mission and Scope:** A study shall be conducted involving review and synthesis of the available research regarding expanded and collaborative scopes of practice for advanced practice nurses (APN), physician assistants (PA) and dental hygienists (DH).
- Research Entity:** The Governor's Office shall identify an appropriate research entity (research group) to undertake a study of scopes of practice for the professions of APN, PA, DH in terms of the services that are delivered, the settings in which those services are delivered and the quality of care provided.
- Advisory Committee:** An Advisory Committee has been created, composed of physicians, nurses, dentists and dental hygienists, chaired by Ned Calonge, MD, to provide guidance and advice to the research group. It shall work in collaboration with the Department of Regulatory Agencies and the Department of Public Health and Environment, and shall:
- Advise the research group on the study work plan, analytic framework, literature search, evidence evaluation and evidence synthesis for the study; and,
 - Work with the research group on creating a final report for distribution to the Governor and the General Assembly no later than 12/31/08.
- Appointees:** See Attached
- Background:** This Building Block is a result of a recommendation to Governor Ritter from Senate Health and Human Services Committee Chair, Bob Hagedorn, (D-Aurora), in response to failed legislation proposed in 2007 by Colorado Nurses Association, as well as a recommendation contained in the state's Blue Ribbon Commission on Health Care Reform.

The Executive Order cites concern about: (1) insufficient numbers of providers, especially physicians and dentists, to meet the needs of Colorado, particularly in rural and other underserved communities; (2) inadequate medical provider surge capacity in the event of influenza pandemic; and, (3) other states that have expanded access to coverage being confronted with insufficient numbers of professionals to provide care for newly covered individuals.

Analysis: Executive orders have been used by Governor Ritter as a vehicle for managing complex issues. CMS and Colorado Nurses Association recently negotiated legislation during the 2008 legislative session that won widespread praise in the legislative branch for collaboration and cooperation. CMS's conduct on this legislation enhanced its credibility and should strengthen the profession's voice during the upcoming advisory committee deliberations, assuming adequate preparation and physician consensus.

This Building Block is an opportunity for CMS to evolve CMS policies relating to access, quality, and safety into public policy for the state. The profession must point to evidenced-based research and superior delivery system solutions in a proactive, collaborative, and respectful manner to achieve the mutual goals of the Executive Order and the profession. This approach will gain CMS additional credibility with Governor Ritter, the legislature, and other stakeholders.

Organized medicine must prepare and assist the appointees in every possible way. It is imperative that recent disagreements within organized medicine over 2008 APN legislation be quickly resolved and every effort be made to unify CMS and affected county and specialty medical societies. Anything less will hamper the ability of the physician appointees to represent the best interest of the profession and the patients it serves.

Recommendations: (1) The COL, through its Scope of Practice Subcommittee, be convened to address a work plan to assist the physicians serving on the Advisory Committee.
(2) The Chairman of COL routinely provide progress reports to the Speaker and Vice-Speaker of the House of Delegates.
(3) That county and specialty medical society presidents and executive staff be notified that the CMS Speaker and Vice-Speaker of the House of Delegates are designated to address internal issues relating to process and communication among the medical family.
(4) That CMS leadership maintain close diplomatic ties with Colorado Nurses Association throughout the study ordered by the Governor's Executive Order.
(5) That COL provide a progress report to the House of Delegates in September, 2008.

COL activities at a minimum shall include:

1. Medical Family Coordination and Consensus Building: Immediately convene the Scope of Practice Subcommittee to construct a plan for assisting the physicians serving on the Advisory Committee. Develop a consensus set of goals and a

- strategy that, at a minimum, includes a research agenda, messaging and communications, and other logistics consistent with the responsibilities of the research entity and the mission and scope of the Executive Order.
2. Staffing and Special Assistance: Assess the value of jointly funding with county and specialty medical societies special expertise and assistance for the SOP Subcommittee as it constructs and implements its plan;
 3. Coordinate closely with the physician appointees on the Advisory Committee and the Research Entity;
 4. Analysis of MPA/NPA: Develop a summary and analysis of current law relating to APN scope of practice, regulatory oversight and the interaction between the nurse and medical practices act.
 5. 2008 APN Legislation: Summarize the three bills enacted in 2008 and assess their strengths and weaknesses relative to the role of the advisory committee.
 6. Assemble and consider relevant CMS policies relating to APNs, care in rural and underserved areas, and health care reform.
 7. Rural/Underserved-area Physician Input: Create an ad hoc advisory committee of physicians practicing in rural and underserved areas to provide input to the SOP Subcommittee.
 8. Other activities as needed by the Scope of Practice Subcommittee.