

EXHIBIT 5
DATE 1-17-05
HB 203

**MHA...An Association of Montana Health Care
Providers**

**Testimony Before the
House Business and Labor Committee**

**Pertaining to HB 203
Generally Revise Professional and Occupational
Licensing Laws**

January 17, 2005

MHA...An Association of Montana Health Care Providers Testimony in Support of HB 203

MHA supports passage of HB 203 with the amendment offered to you today. MHA's members employ the majority of the largest group of licensed health care providers, registered and practical nurses. Of these, advanced practice registered nurses (APRNs) are critical to the delivery of services by 2/3 of our members.

Not only are APRNs often the primary health care provider in many of our small, rural communities, they also play a variety of practitioner and leadership roles in all areas of the state. The types of APRNs include certified nurse-midwives, certified registered nurse anesthetists, and advanced practice nurse practitioners. They function in all areas of health care, and because of their changing roles, encounter many practice issues.

Indeed, these issues have become so numerous that the Board of Nursing (BON) has created an APRN committee to tackle the questions and find answers or solutions. The scope of their practices widens and deepens as the health care environment responds to the complex changes taking place; as new medications and technology change diagnostic procedures, subsequent treatment changes as well. The APRN must adjust his/her practice just as physicians do, to provide safe and effective treatment to patients.

At this time, there is one APRN on the BON. Her term expires in July, and it is not written that she be replaced by another APRN. Without someone with her level of education and knowledge, it is virtually impossible for the BON to make appropriate practice decisions when asked for a clarification. The APRN committee will not be able to effectively address licensees' questions and concerns, and the Board will not be carrying out its charge of protecting the public's health and safety.

Requiring an APRN on the Board of Nursing is an idea whose time has come. And, because 2/3 of Montana's hospital facilities are small and rural, it is also appropriate that at least one Board member represent these providers. Their issues are just as complex as, but can be very different from, the larger providers in the state. Until a recent Board member left in the middle of her term, and she was replaced with someone from Billings, there was not a nurse on the Board from east of Great Falls—but there were two from Helena. It would behoove the licensees to have representation from all the areas that are critical to Montana's health care environment.