

**2019 SENATE ENERGY AND NATURAL RESOURCES**

**SB 2138**

# 2019 SENATE STANDING COMMITTEE MINUTES

## Energy and Natural Resources Committee Fort Lincoln Room, State Capitol

SB 2138  
1/17/2019  
Job Number 30953

☐ Subcommittee  
☐ Conference Committee

Committee Clerk: Marne Johnson
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### Explanation or reason for introduction of bill/resolution:

A bill relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles.

### Minutes:

4 attachments
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**Chair Unruh:** Opened the public hearing on SB 2138.

**Senator Judy Lee, District 13 (1:35-2:30) Introduced the bill.** This bill will permit an Advanced Practice Registered Nurse (APRN) as an additional professional who can recognize, (Inaudible) and verify the physical conditions that are necessary for special hunting permits. Following me is a very qualified APRN who will go through the details with you. As you know, they are a primary care provider in North Dakota as well as physicians, and so they are capable of doing this. This will allow things to run more smoothly, and allow for these permits to be provided for hunters.

**Chair Unruh:** Any consideration for Physician's Assistants (PA) in the bill?

**Senator J. Lee:** There is not, they didn't ask. You may certainly consider that. They don't have the same level of education as APRNs have. The PAs are licensed through the Board of Medicine, Ms. Courtney Koebele is here and she can tell you what the Medical Association might say about that, if you're looking at that as another possibility. I have no objections; it just wasn't something that was requested at the time.

**Senator Piepkorn:** Would you remind me of the difference between person and individual?

**Senator J. Lee:** The individual refers to a human being, and a person may be a human being or an entity, such as a corporation. It's a legal difference in definition but individual makes it clear that we're talking human beings here.

**Courtney Koebele, North Dakota Academy of Physician Assistants and the North Dakota Medical Association (4:00-5:12) in support with amendments, please see attachment #1.**

**Cheryl Rising, Family Nurse Practitioner, North Dakota Nurse Practitioner Association (5:40-9:47) Testified in support, please see attachment #2 for testimony, attachment #3 is additional testimony from Kelly Hollenbeck. Attachment #4 is reference, a packet of maps indicating Nurse Practitioners, Certified Midwives, CNAs and Clinical Nurse Specialists, Psych Nurse Practitioners; and their location in the state.**

**No further testimony, hearing closed.**

# 2019 SENATE STANDING COMMITTEE MINUTES

## Energy and Natural Resources Committee Fort Lincoln Room, State Capitol

SB 2138  
1/18/2019  
Job Number 31038

☐ Subcommittee  
☐ Conference Committee

Committee Clerk: Marne Johnson
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### Explanation or reason for introduction of bill/resolution:

A bill relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles.

### Minutes:

No attachments
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**Chair Unruh:** Opened committee discussion. This bill allows APRNs to verify physical conditions for special hunting permits. There was also an amendment to add physician's assistants to the bill.

**Senator Piepkorn:** I move to adopt the amendment.

**Vice Chair Kreun:** I second.

**A voice vote was taken, motion carries.**

**Senator Piepkorn:** I move do pass as amended.

**Senator Cook:** I second.

A rollcall vote was taken.

Motion carries 6-0-0.

**Senator Piepkorn:** Will carry.

January 18, 2019

SK  
1381

PROPOSED AMENDMENTS TO SENATE BILL NO. 2138

Page 1, line 2, after "allowing" insert " physician assistants and"

Page 1, line 11, after "physician" insert ", physician assistant,"

Renumber accordingly

Date: 1/18/19  
Roll Call Vote #: 1

2019 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 2138

Senate Energy and Natural Resources Committee

☐ Subcommittee

Amendment LC# or Description: 19.0182.01001

Recommendation: ☒ Adopt Amendment  
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☐ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
Other Actions: ☐ Reconsider ☐ \_\_\_\_\_

Motion Made By Sen. Piepkorn Seconded By Sen. Kreun

Senators	Yes	No	Senators	Yes	No
Chair Jessica Unruh			Senator Merrill Piepkorn		
V. Chair Curt Kreun			Senator Jim Roers		
Senator Dwight Cook					
Senator Donald Schaible					

Total (Yes) \_\_\_\_\_ No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Voice Vote, Motion Carries

Date: 1/18/19  
Roll Call Vote #: 2

2019 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 2138

Senate Energy and Natural Resources Committee

☐ Subcommittee

Amendment LC# or Description: 19.0182.01001

Recommendation: ☐ Adopt Amendment  
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☒ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
Other Actions: ☐ Reconsider ☐

Motion Made By Sen. Piepkorn Seconded By Sen Cook

Senators	Yes	No	Senators	Yes	No
Chair Jessica Unruh	X		Senator Merrill Piepkorn	X	
V. Chair Curt Kreun	X		Senator Jim Roers	X	
Senator Dwight Cook	X				
Senator Donald Schaible	X				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Sen. Piepkorn

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**SB 2138: Energy and Natural Resources Committee (Sen. Unruh, Chairman)**  
recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends  
**DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2138 was placed  
on the Sixth order on the calendar.

Page 1, line 2, after "allowing" insert " physician assistants and"

Page 1, line 11, after "physician" insert ", physician assistant,"

Renumber accordingly



**2019 HOUSE ENERGY AND NATURAL RESOURCES**

**SB 2138**

# 2019 HOUSE STANDING COMMITTEE MINUTES

## Energy and Natural Resources Committee

Coteau A Room, State Capitol

SB 2138

2/28/2019

33103

☐ Subcommittee

☐ Conference Committee

Committee Clerk, Kathleen Davis
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### Explanation or reason for introduction of bill/resolution:

Relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles

### Minutes:

Attachment 1 & 2
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**Vice Chairman Damschen** opened the hearing on SB 2138.

**Chairman Porter**, Dist 34, Mandan, ND: this is about who can sign the applications on who gets the special privileges of shooting from a vehicle. We want to make sure we have consistency in G&F laws, and the same language being used in the crossbow section. This may need a little more cleanup to expand to other professions that aren't in this particular piece of the code. Other practitioners need to be added to this bill as we work on it.

**Cheryl Rising, Nurse Practitioner Association:** presented Attachment 1 and 2 in support.

**Kellee Hollenbeck, APRN FNP-C** presented Attachment 3 in support.

**Courtney Koebele, ND Acedemy of Physician Assistants** presented Attachment 4 in support.

**Chairman Porter:** questions? Further support? Opposition? closed the hearing.

# 2019 HOUSE STANDING COMMITTEE MINUTES

## Energy and Natural Resources Committee

Coteau A Room, State Capitol

SB 2138

3/21/2019

34135

☐ Subcommittee

☐ Conference Committee

Committee Clerk, Kathleen Davis
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### Explanation or reason for introduction of bill/resolution:

Relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles

### Minutes:

**Chairman Porter:** Rep. Mitskog had asked to make sure she had worked on the physician's statement; she wanted to double check and make sure everything was ok with this. The report back is that everything is ok, however, it's important for the record on this bill, the same as what we did with the disability component, G&F, while they're expanding the number and types of practitioners, they also make sure the conditions are listed, are verification of the person actually needing the permit. In this case it's to shoot from a stationary vehicle.

**Rep. Mitskog:** in review, the physician assistants are easy but under the definition of advanced practice registered nurses who is qualified to issue these. So anybody that has those credentials are able to issue these permits. I did have questions with regard to the scope of practice some of these nurse practitioners practice in. Specifically, they had nurse anesthetists being able to issue these permits. If you look at the scope of practice of a nurse anesthetist, they have the training, but their daily work is doing anesthesia. I have concerns; they're allowed to sign off on these permits. I talked to G&F about that. I think by changing and increasing the objective criteria they have to document on the application form and having that provider sign and give their credentials and license number, is going to hopefully prevent favors from being done. People that typically wouldn't see patients like a nurse anesthetist isn't going to have a patient come to him or her for a physical disability. The application form needs to be worked on and hope to work with G&F on that to prevent any abuses of the process.

**Rep. Anderson:** I move a Do Pass for SB 2138.

**Rep. Ruby:** second.

**Chairman Porter:** We have a motion for a Do Pass and a second on SB 2138. Discussion?

**Rep. Keiser:** I would like to recognize that today in Bismarck we see a lot of physician assistants and nurse practitioners in the treatments and they are tougher than doctors are. Maybe we ought to

challenge the doctors and not these two. They cross every T and dot every I much better than doctors do.

**Rep. Mitskog:** I fully agree they are very thorough and very well trained. But again, we're trying to prevent the abuses and somebody just having their friend sign off on this; in reviewing forms from other states, particularly SD's, they try to capture more objective information on the form to prevent those favors from being done.

**Chairman Porter:** further discussion? Roll call vote: 13 yes, 0 no, 1 absent. Rep. Mitskog is carrier.

Date: 3-21-19  
Roll Call Vote #: 1

**2019 HOUSE STANDING COMMITTEE**  
**ROLL CALL VOTES**  
**BILL/RESOLUTION NO. 2138**

House Energy and Natural Resources Committee

☐ Subcommittee

Amendment LC# or Description: \_\_\_\_\_

Recommendation: ☐ Adopt Amendment  
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☐ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
Other Actions: ☐ Reconsider ☐ \_\_\_\_\_

Motion Made By Anderson Seconded By Ruby

Representatives	Yes	No	Representatives	Yes	No
Chairman Porter	✓		Rep. Lefor	✓	
Vice Chairman Damschen	AB		Rep. Marschall	✓	
Rep. Anderson	✓		Rep. Roers Jones	✓	
Rep. Bosch	✓		Rep. Ruby	✓	
Rep. Devlin	✓		Rep. Zubke	✓	
Rep. Heinert	✓				
Rep. Keiser	✓		Rep. Mitskog	✓	
			Rep. Eidson	✓	

Total (Yes) 13 No 0

Absent 1

Floor Assignment Rep. Mitskog

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**SB 2138, as engrossed: Energy and Natural Resources Committee (Rep. Porter, Chairman)** recommends **DO PASS** (13 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). Engrossed SB 2138 was placed on the Fourteenth order on the calendar.

**2019 TESTIMONY**

**SB 2138**

Senate Energy and Natural Resources Committee

January 17, 2019

SB 2138

Chair Unruh and members of the Senate Energy and Natural Resources Committee. I'm Courtney Koebele and I represent the North Dakota Academy of Physician Assistants. We support SB 2138, with one small amendment.

Physician assistants (PAs) undergo rigorous medical training and must graduate from an accredited PA program in order to take the national certifying exam to be licensed. Like physicians and nurse practitioners, PAs must complete extensive continuing medical education throughout their careers.

PAs are licensed healthcare providers that practice medicine to include the diagnosis and treatment of medical conditions, ordering of diagnostic studies, and have prescriptive privileges for medications. Physician assistants also are primary care providers like physicians and advanced practice registered nurses. Therefore, we are asking that physician assistant be amended into the bill.

Thank you for your time today. I would be happy to answer any questions.

Proposed amendments to SB 2138

Page 1, Line 11, after "physician" insert "physician assistant"



**TESTIMONY TO:**

Senate Energy and Natural Resources

66<sup>TH</sup> NORTH DAKOTA LEGISLATIVE ASSEMBLY

Senate Bill 2138

Madam Chair Unruh and Committee Members:

I am Cheryl Rising, FNP-BC, FAANP and legislative liaison for the North Dakota Nurse Practitioner Association. I am here today to testify in support of Senate bill 2138 relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles. This bill has added advance practice registered nurses on line 11 and 12. There were also grammar and language updates. In 2011, advance practice registered nurses could be primary providers with no collaborative agreement. Currently with this law when an advance practice registered nurse assesses that an individual needs a special hunting permit, another office visit with a physician is required. An additional office visit increases health care costs to the health care system and patients. The North Dakota Nurse Practitioner Association asks that you approve this bill.

North Dakota Nurse Practitioner Association

[www.ndnpa.org](http://www.ndnpa.org)

**Legislation Tracking Team**

Cheryl Rising: [crisingnp@gmail.com](mailto:crisingnp@gmail.com) 701-527-2583

Jenna Herman: [jmherman@umary.edu](mailto:jmherman@umary.edu) 612-518-3647

Tara Brandner: [tbrandner04@gmail.com](mailto:tbrandner04@gmail.com) 701-471-9745

**Additional Legislative Committee**

Tisha Scheuer: [tscheuer28@gmail.com](mailto:tscheuer28@gmail.com)

Allison Peltier: [allison.peltier@ndsu.edu](mailto:allison.peltier@ndsu.edu)

Paula Moch: [paulamochfnp@gmail.com](mailto:paulamochfnp@gmail.com)

Testimony to:

Senate Energy and Natural Resources

66<sup>th</sup> ND Legislative Assembly

Madam Chair Unruh and Committee Members,

I am Kellee Hollenbeck APRN FNP-C. I have been an Advanced Practice Provider at the Bone and Joint Center for 9 year. I am lucky to be able to work both autonomously and in conjunction with the Orthopedic Surgeons at the Bone and Joint Center.

I am here today to testify in support of Senate bill 2138 which would allow Advanced practice nurses to grant access to handicap hunters who would like to shoot from a vehicle. In 2011, Advanced practice nurses were allowed to be primary care providers without a collaborative agreement, since that time, many licensures and permits have been changed to allow Advanced practice providers to practice autonomously. However, a special hunting permit to allow those with difficulty ambulating may have been left behind. Recently, I had a long-time patient that was having difficulty due to arthritic knees and hips. He had been drawn for a buck license but was going to be unable to ambulate the distance needed to fill his license. He came to me for evaluation and it was found that he would qualify for the special permit with the Game, Fish and Parks that would allow him to shoot from a stationary vehicle. Unfortunately, these permits still require a physician to sign exclusively. In order to fulfill his needs, he had to make a separate appointment with a physician and repeat the same exam. This cost him time and extra healthcare expense. Advanced practice providers are currently able to sign other permits such as Handicap permits, and Crossbow permits. I ask that you approve this bill in order to help me and other Advanced Practice Registered Nurses to provide full service health care to our patients.

Thank you,

Kellee Hollenbeck APRN FNP-C

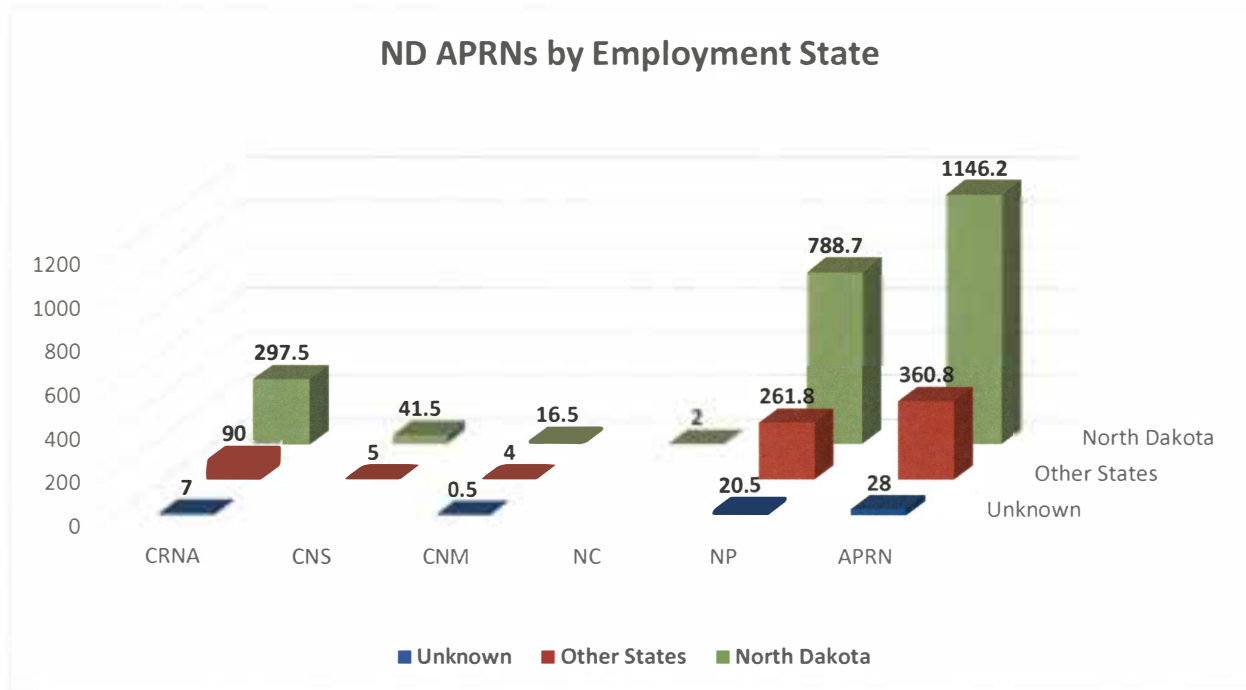
701-400-5790

khollenbeck@bone-joint.com

## APRNs in ND

**Methodology:** All providers are counted as one full-time equivalent (FTE). Providers that are dually licensed in more than one discipline are split equally among each discipline. Those that indicated more than one practice state are divided equally to each state and providers that indicated more than one practice location are divided equally to each site.

**APRNs:** As of September 10, 2018, there are 1,534 advanced practice registered nurses (APRNs) licensed in North Dakota. Of the total APRNs, there are 1071 nurse practitioners (NPs), 394.5 certified registered nurse anesthetists (CRNAs), 46.5 are clinical nurse specialists (CNS), 21 certified nurse midwives (CNMs), and 2 nurse clinicians (NCs). Twelve APRNs were dually licensed, 7 CNS/NPs, 4 CNM/NPs and 1 CRNA/NP. As of November 11, 2018, 1,111 APRNs have prescriptive authority.



Since 2016, there has been a 20% increase (246) of APRNs licensed in North Dakota which included a 29% increase in NPs, 17% increase in CNMs, 4% increase in CRNAs, 8% decrease in CNSs, and no change in NCs. See table 1.

Table 1

	ND Licensed APRNs by Employment State					
	Unknown		Other States		North Dakota	
	2016	2018	2016	2018	2016	2018
CRNA	8	7	91.5	90	278.5	297.5
CNS	0	0	5.5	5	45	41.5
CNM	0	0.5	1	4	17	16.5
NC	0	0	0	0	2	2
NP	12	20.5	166	261.8	652.5	788.7
APRN	20	28	264	360.8	995	1146.2

**Nurse Practitioners:** North Dakota has 1071 licensed NPs, 788.7 FTE (73.6%) indicated they are currently practicing in North Dakota at least part of the year. Of those practicing within North Dakota, 70.5% are practicing in the more urban cities of Bismarck, Mandan, Fargo, West Fargo, Grand Forks and Minot with 27.8% practicing in more rural areas, and 1.7% are unknown. Please see attached maps of psychiatric NPs and psychiatric NPs and CNS combined.

Although licensed in North Dakota, 261.8 FTE NPs indicated states other than North Dakota as their State of employment including Minnesota (79.5), South Dakota (32), Texas (25.7), Missouri (23), Arizona (11), Wisconsin (10), Washington (8), Montana (7), Iowa (6.5), California (6), Florida (5.7), Georgia (5), Colorado (4), Ohio (3.5), Nebraska (3.2), Utah (3), Arkansas (2), Hawaii (2), Illinois (2), Louisiana (2), Maryland (2), New Jersey (2), Nevada (2), Massachusetts (1.5), Virginia (1.2), Connecticut (1), Indiana (1), Kentucky (1), Mississippi (1), North Carolina (1), New Mexico (1), New York (1), Oklahoma (1), Oregon (1), Pennsylvania (1), Tennessee (1), Maine (0.5) and West Virginia (0.5).

Of the nurse practitioners practicing in North Dakota 80.2% (632.2/788.7) indicated their specialty area was family medicine. Other specialties included adult, gerontology, neonatal, pediatric, psychiatric, and women's health. See chart below.

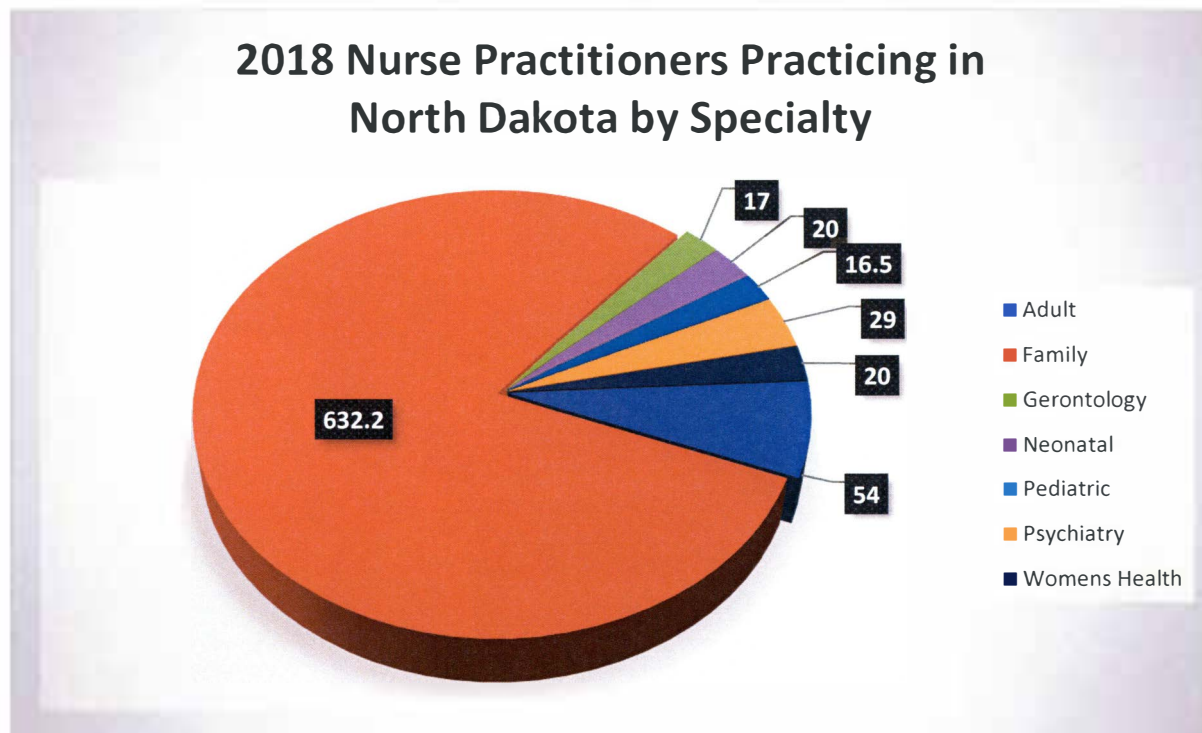


Table 2

North Dakota Nurse Practitioners by Specialty		
	2016	2018
Adult Medicine	42.5	54
Family Medicine	519.5	632.2
Gerontology	19	17
Neonatal Medicine	18	20
Pediatric Medicine	11	16.5
Psychiatry	20	29
Women's Health Care	22.5	20

Since 2016, the number of nurse practitioners practicing in pediatrics increased by 50%, psychiatry (45%), adult medicine (27.06%), family medicine (21.69%), and neonatal (11.11%) while gerontology decreased by 10.53% and women's health care (11.11%). See Table 2. Currently, 29 nurse practitioners specialize in psychiatry. Of those, 17.5 (60.3%) practice within the more urban cities of

Bismarck, Fargo, West Fargo, Grand Forks and Minot. Please see attached map of the locations of NPs with a specialty in psychiatry.

**Clinical Nurse Specialists:** In North Dakota 46.5 CNS are licensed of which 41.5 (89.2%) indicated they currently practice in the State. Of the 41.5 CNS currently practicing in North Dakota 33.5 (80.7%) are practicing in the more urban cities of Bismarck, Fargo, Grand Forks, and Minot. Please see attached map.

Although licensed in North Dakota, 5 CNS indicated they practice outside of the State. These included Minnesota (2.5), Alabama (1), Iowa (0.5), Ohio (0.5) and South Dakota (0.5). Of the clinical nurse specialists practicing in North Dakota, 60.2% indicated their specialty area was psychiatry and 26.5% indicated adult medicine. Please see chart below.

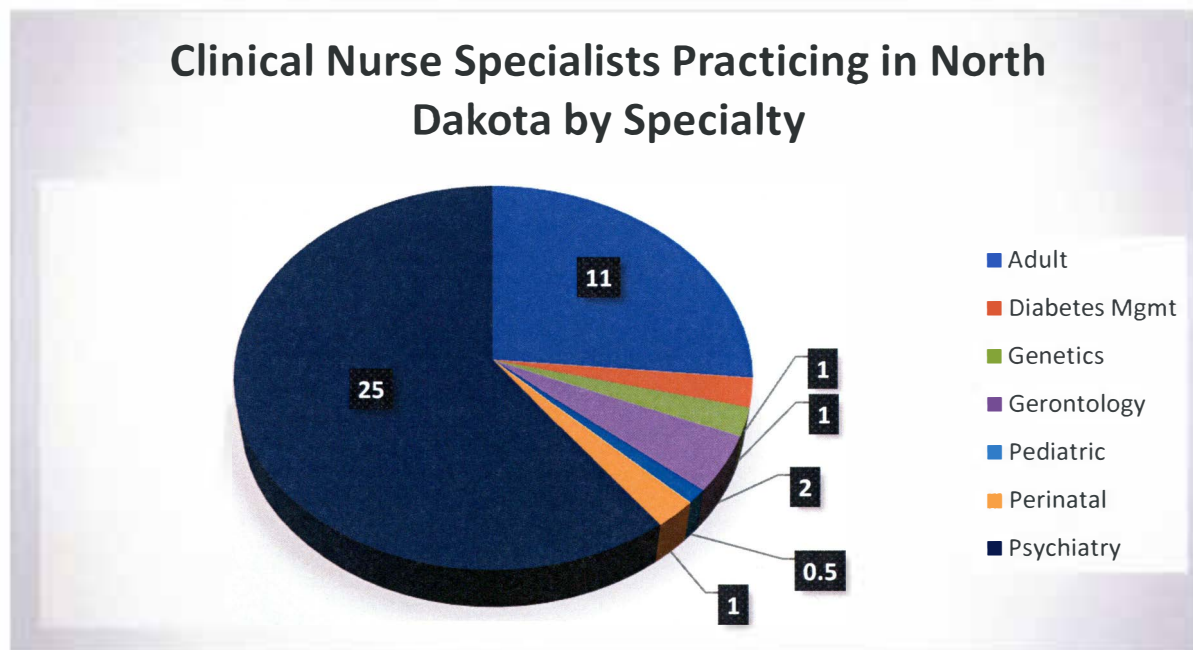




Table 3

North Dakota Clinical Nurse Specialists by Specialty		
	2016	2018
Adult	12.5	11
Diabetes Management	1	1
Genetics	1	1
Gerontology	2	2
Pediatric		0.5
Perinatal	2	1
Psychiatry	26.5	25

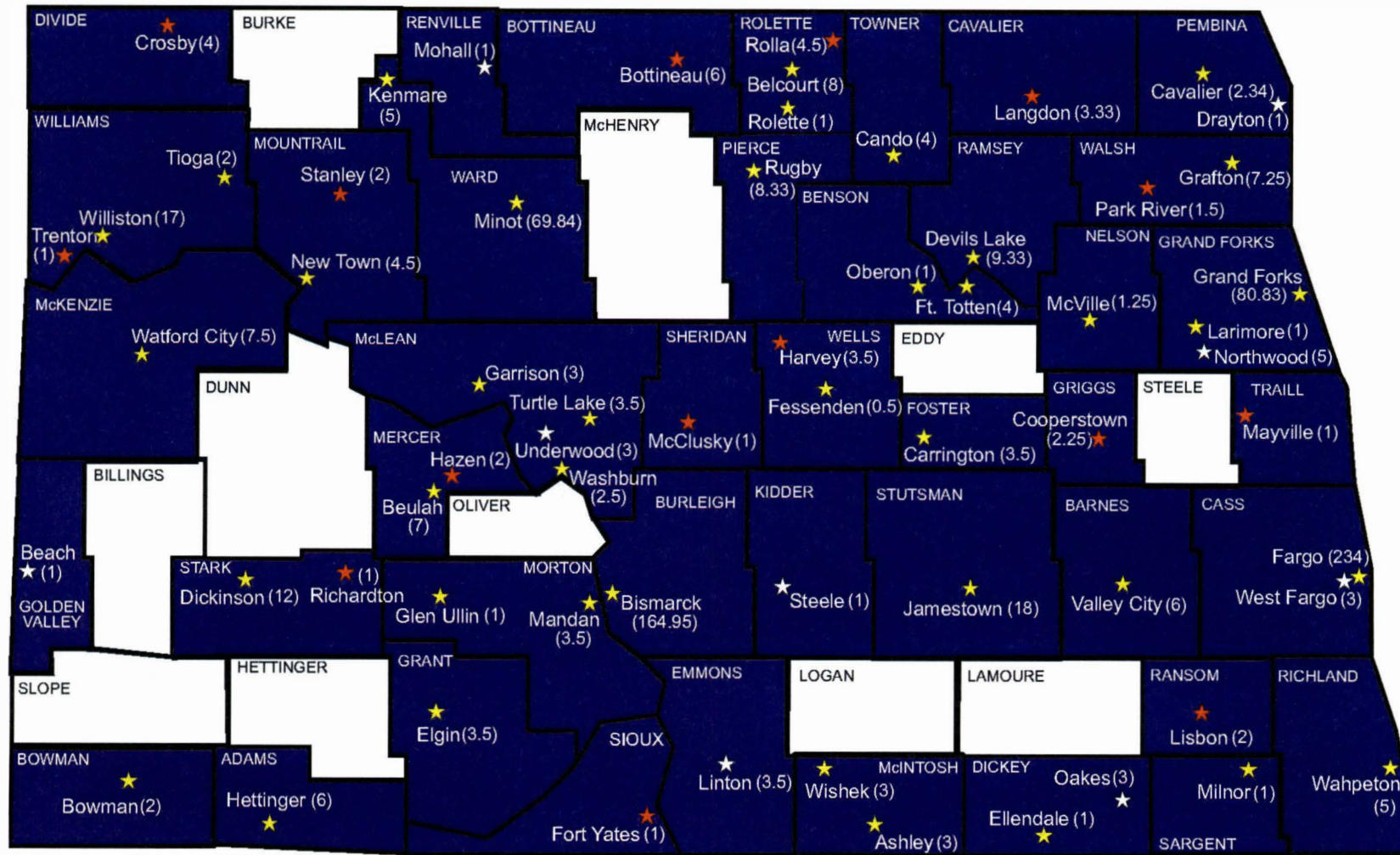
Since 2016, the number of CNSs practicing in North Dakota has declined by 7.8%. Those practicing in adult medicine declined by 12% and psychiatry by 5.66%. See Table 3. Of the 25 practicing in psychiatry, 74% (18.5) CNSs are practicing in the more urban areas of Bismarck, Fargo, Grand Forks and Minot. Please see attached maps of psychiatric CNSs and psychiatric CNSs and NPs combined.

**Certified Nurse Midwives:** A total of 21 CNMs are licensed in North Dakota of which 16.5 indicated they are practicing within the State. Two or 12.1% of the CNMs are practicing in rural areas of Belcourt and Williston. The other 14.5 indicated they were practicing in three of the more urban cities including Fargo (7.5), Minot (5), and Grand Forks (2). Although the total number of licensed CNMs increased in 2018 compared to 2016, those that indicated they practice in North Dakota decreased by 0.5 FTE. Please see attached map.

**Certified Registered Nurse Anesthetists:** North Dakota has 394.5 licensed CRNAs of which 297.5 indicated they are practicing in North Dakota. Of the CRNAs practicing in North Dakota, 84.1% are practicing in the four most urban cities of Bismarck, Fargo, Grand Forks and Minot; 14.2% are practicing in rural areas and 1.7% did not indicate a practice city. The total number of CRNAs practicing in North Dakota increased by 6.8% from 2016 (278.5) to 2018 (297.5). Please see attached map.

**Nurse Clinicians:** As in 2016, two nurse clinicians continue to practice in North Dakota in 2018. Both nurse clinicians practice in urban areas and specialize in rehabilitation and psychiatry.

# 2018 North Dakota Nurse Practitioners



**NORTH DAKOTA**  
Nurse Practitioner Association

- Nurse Practitioners practicing within county
- ★ Nurse Practitioners' FTE increased since 2016
- ★ Nurse Practitioners' FTE decreased since 2016
- ☆ No change Nurse Practitioners' FTE since 2016

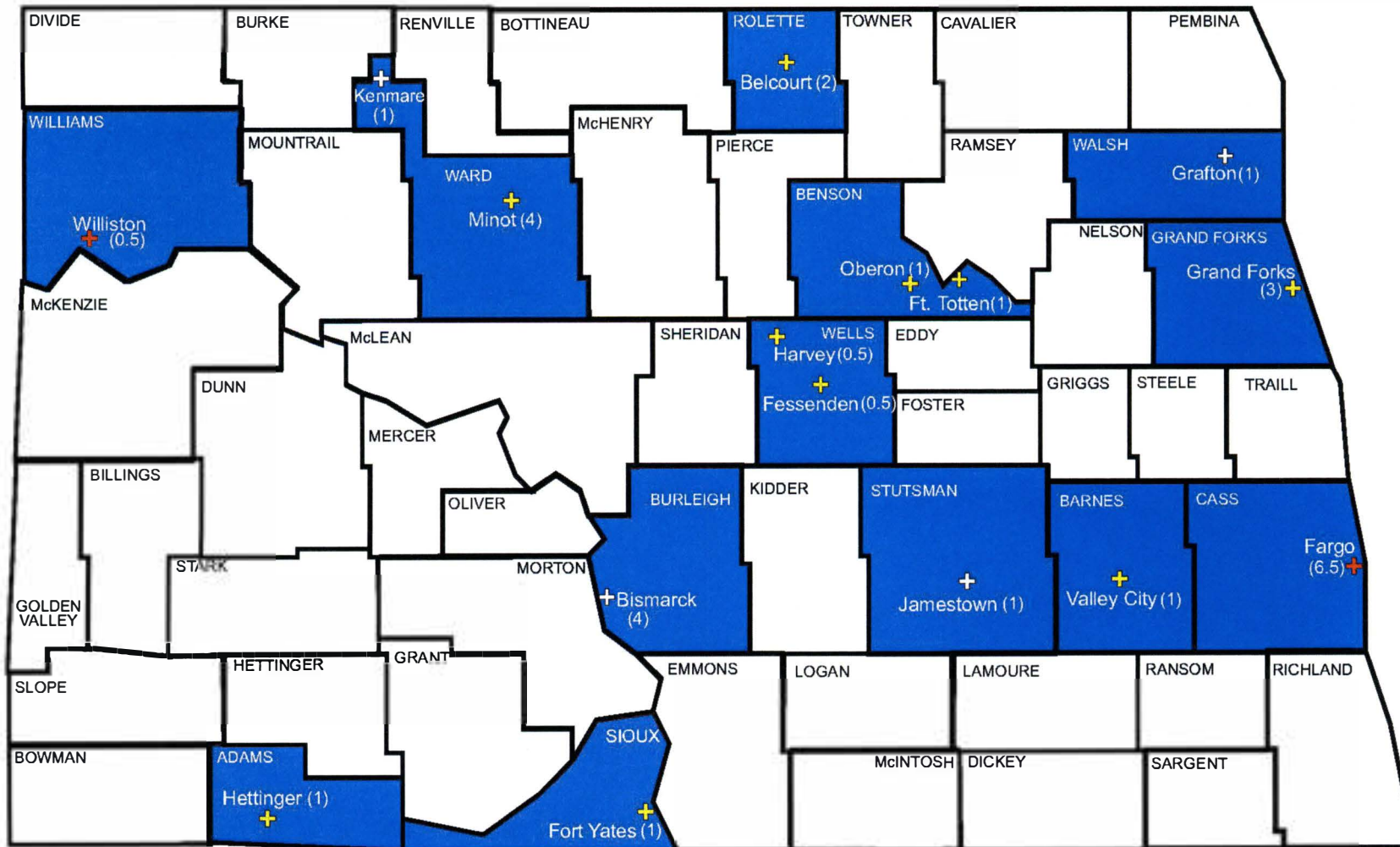
\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

Unknown (13)

11/18

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# 2018 North Dakota Psychiatric Nurse Practitioners



11/18



**NORTH DAKOTA**  
Nurse Practitioner Association

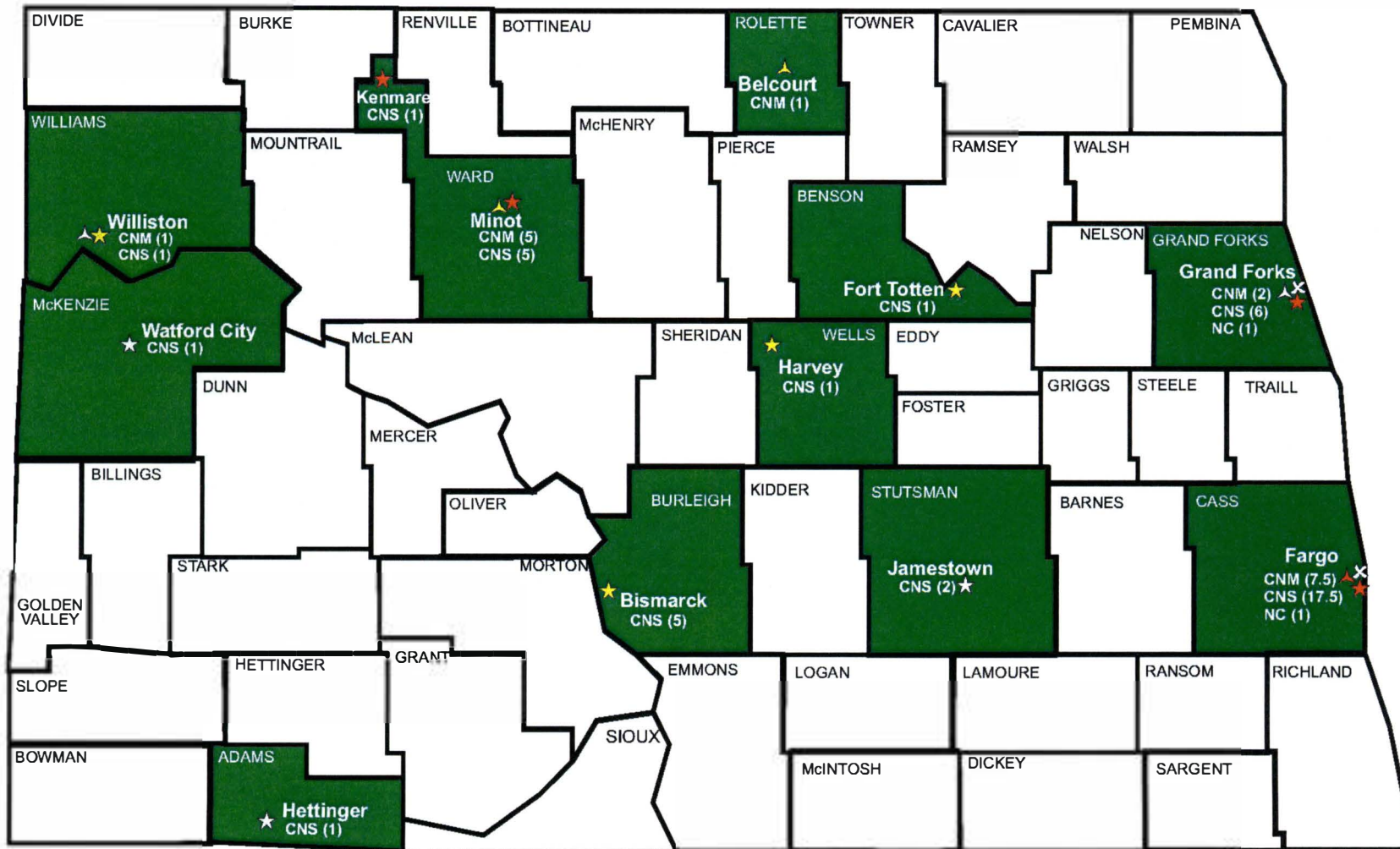
- Psychiatric Nurse Practitioners practicing within county
- + Psychiatric Nurse Practitioners' FTE increased since 2016
- + Psychiatric Nurse Practitioners' FTE decreased since 2016
- + No change Psychiatric Nurse Practitioners' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

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1.17.19  
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# 2018 North Dakota Certified Nurse Midwives (CNM), Clinical Nurse Specialists (CNS), and Nurse Clinicians (NC)



**NORTH DAKOTA**  
Nurse Practitioner Association

■ CNMs, CNS, and/or NC practicing within county

▲ CNMs' FTE increased since 2016

▲ CNMs' FTE decreased since 2016

△ No change CNM's FTE since 2016

⊗ No change NC's FTE since 2016

★ CNS' FTE increased since 2016

★ CNS' FTE decreased since 2016

☆ No change CNS' FTE since 2016

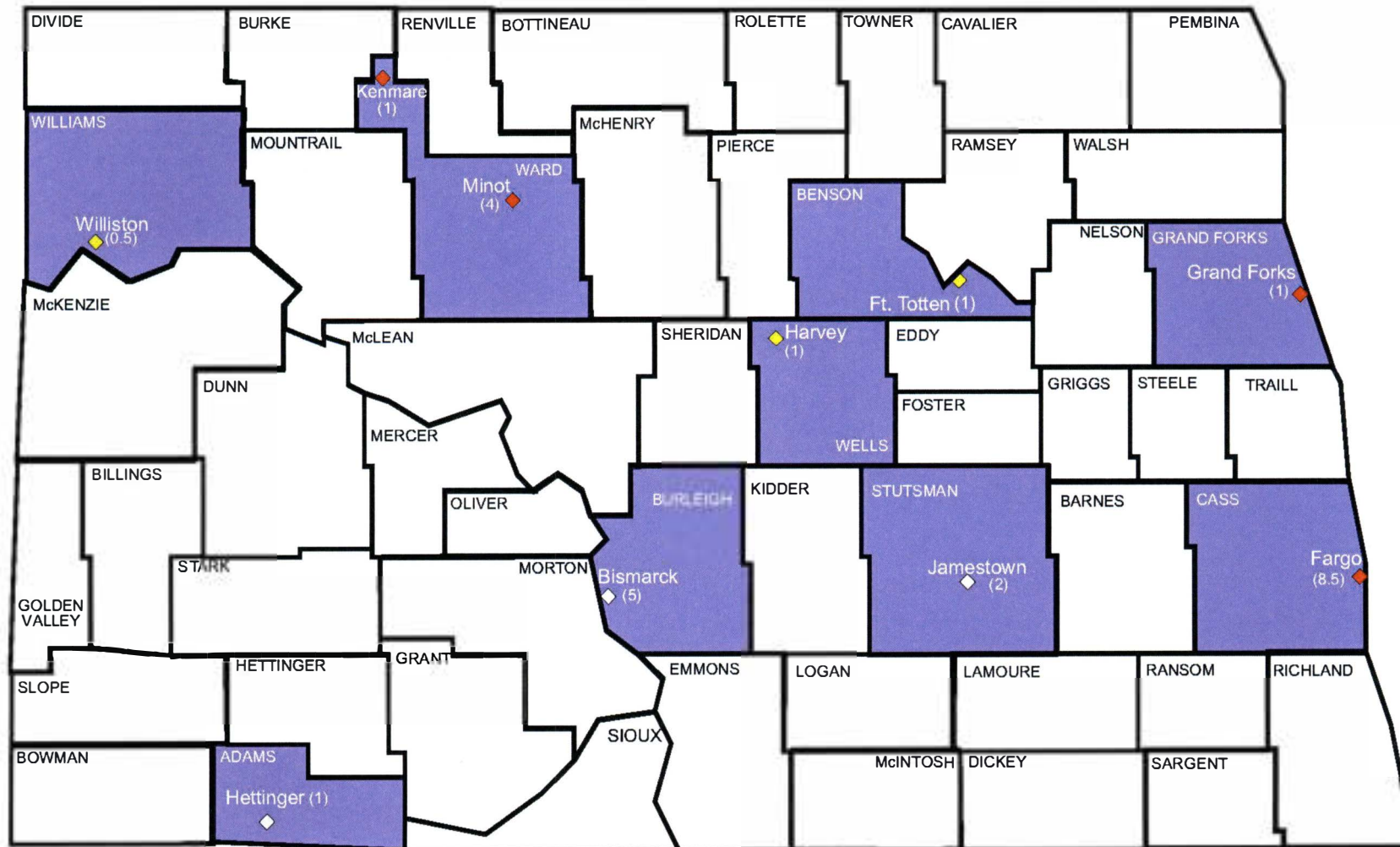
CNM Unknown (0.5)

11/18

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

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# 2018 North Dakota Psychiatric Clinical Nurse Specialists



11/18



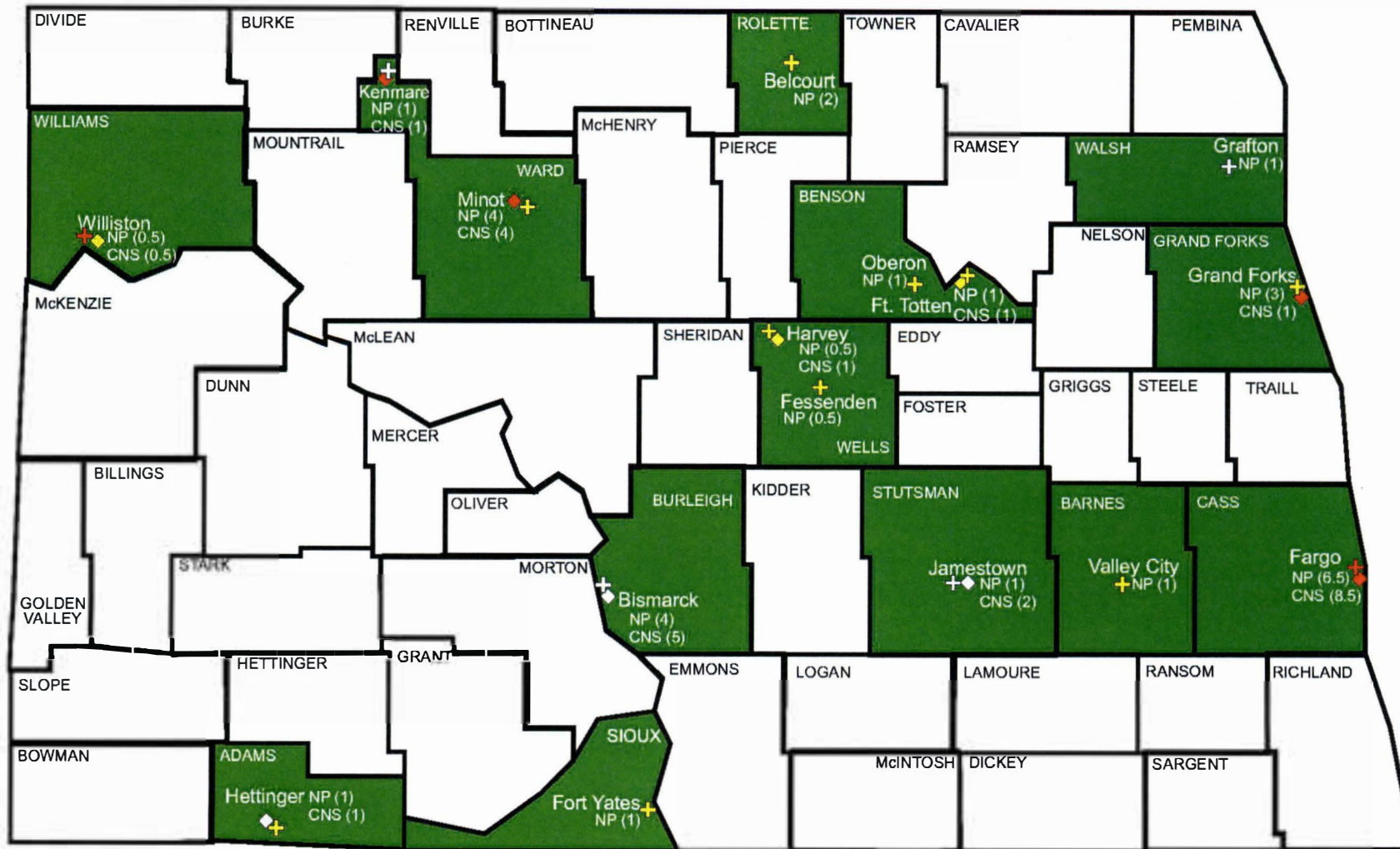
**NORTH DAKOTA**  
Nurse Practitioner Association

- Psychiatric CNS practicing within county
- ◆ Psychiatric CNS' FTE increased since 2016
- ◆ Psychiatric CNS' FTE decreased since 2016
- ◇ No change Psychiatric CNS' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

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#4  
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# 2018 North Dakota Psychiatric Nurse Practitioners and Clinical Nurse Specialists



11/18

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#4  
pg. 9



Map of North Dakota showing county names and population data for 2010. Counties with populations of 10,000 or more are shaded dark blue and marked with a yellow star. Other counties are white. Some counties have smaller populations marked with orange stars.

County	Population (2010)	Marked
Grand Forks	38,500	Yellow Star
Minot	69,840	Yellow Star
Bismarck	63,590	Yellow Star
Fargo	117,500	Yellow Star
Williston	9,500	Yellow Star
Dickinson	7,580	Yellow Star
Hazen	1,250	Yellow Star
Tioga	0.5	Orange Star
Kenmare	5	Orange Star
Rugby	2	Orange Star
Devils Lake	4,500	Orange Star
Mayville	1	Orange Star
Jamestown	5,500	Orange Star
Valley City	2	Orange Star
Oakes	2	Orange Star
Wahpeton	1	Orange Star
Ashley	1	Orange Star
Hettinger	1,250	Orange Star
Bowman	0.33	Orange Star

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

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#4  
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TESTIMONY TO:

House Energy and Natural Resources

66<sup>TH</sup> NORTH DAKOTA LEGISLATIVE ASSEMBLY

Senate Bill 2138

Chairman Porter and Committee Members:

I am Cheryl Rising, FNP-BC, FAANP and legislative liaison for the North Dakota Nurse Practitioner Association. I am here today to testify in support of Senate bill 2138 relating to allowing advanced practice registered nurses to verify the physical conditions necessary for special hunting permits to be issued to individuals to shoot from stationary motor vehicles. This bill has added advance practice registered nurses on line 11 and 12. There were also grammar and language updates. In 2011, advance practice registered nurses could be primary providers with no collaborative agreement. Currently with this law when an advance practice registered nurse assesses that an individual needs a special hunting permit, another office visit with a physician is required. An additional office visit increases health care costs to the health care system and patients. The North Dakota Nurse Practitioner Association asks for your support on Senate bill 2138.

North Dakota Nurse Practitioner Association

[www.ndnpa.org](http://www.ndnpa.org)

**Legislation Tracking Team**

Cheryl Rising: [crisingnp@gmail.com](mailto:crisingnp@gmail.com) 701-527-2583

Jenna Herman: [jmherman@umary.edu](mailto:jmherman@umary.edu) 612-518-3647

Tara Brandner: [tbrandner04@gmail.com](mailto:tbrandner04@gmail.com) 701-471-9745

**Additional Legislative Committee**

Tisha Scheuer: [tscheuer28@gmail.com](mailto:tscheuer28@gmail.com)

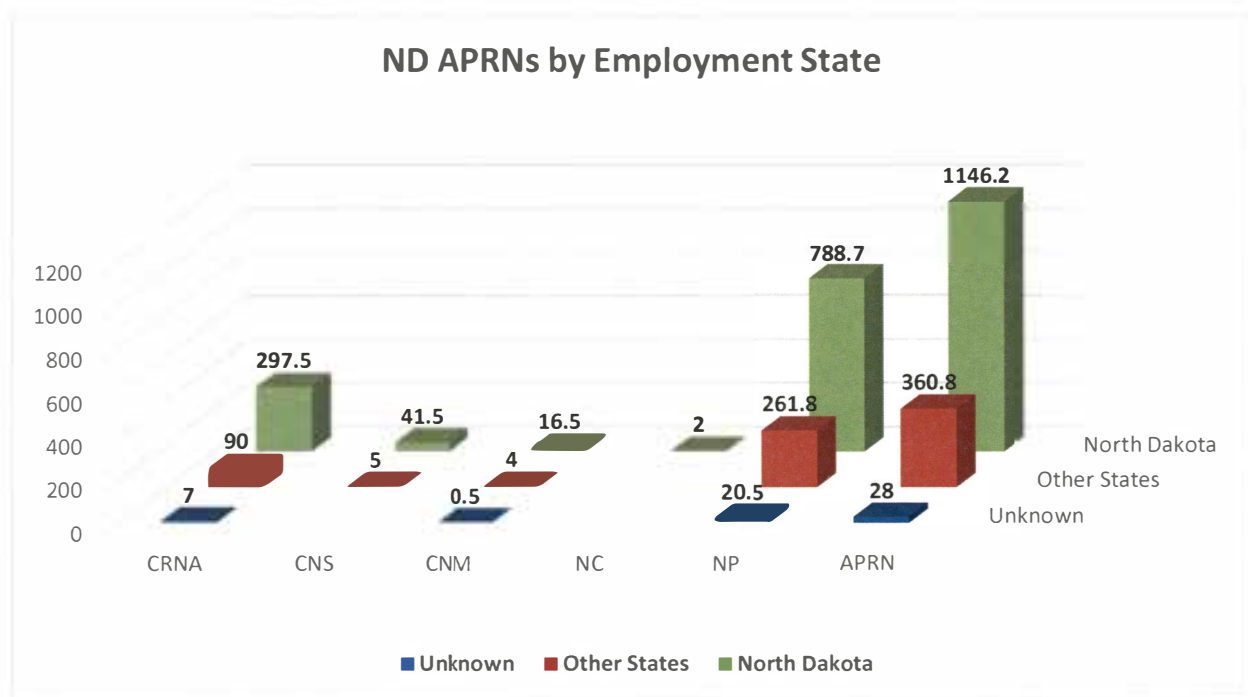
Allison Peltier: [allison.peltier@ndsu.edu](mailto:allison.peltier@ndsu.edu)

Paula Moch: [paulamochfnp@gmail.com](mailto:paulamochfnp@gmail.com)

## APRNs in ND

**Methodology:** All providers are counted as one full-time equivalent (FTE). Providers that are dually licensed in more than one discipline are split equally among each discipline. Those that indicated more than one practice state are divided equally to each state and providers that indicated more than one practice location are divided equally to each site.

**APRNs:** As of September 10, 2018, there are 1,534 advanced practice registered nurses (APRNs) licensed in North Dakota. Of the total APRNs, there are 1071 nurse practitioners (NPs), 394.5 certified registered nurse anesthetists (CRNAs), 46.5 are clinical nurse specialists (CNS), 21 certified nurse midwives (CNMs), and 2 nurse clinicians (NCs). Twelve APRNs were dually licensed, 7 CNS/NPs, 4 CNM/NPs and 1 CRNA/NP. As of November 11, 2018, 1,111 APRNs have prescriptive authority.



Since 2016, there has been a 20% increase (246) of APRNs licensed in North Dakota which included a 29% increase in NPs, 17% increase in CNMs, 4% increase in CRNAs, 8% decrease in CNSs, and no change in NCs. See table 1.

Table 1

	ND Licensed APRNs by Employment State					
	Unknown		Other States		North Dakota	
	2016	2018	2016	2018	2016	2018
CRNA	8	7	91.5	90	278.5	297.5
CNS	0	0	5.5	5	45	41.5
CNM	0	0.5	1	4	17	16.5
NC	0	0	0	0	2	2
NP	12	20.5	166	261.8	652.5	788.7
APRN	20	28	264	360.8	995	1146.2

**Nurse Practitioners:** North Dakota has 1071 licensed NPs, 788.7 FTE (73.6%) indicated they are currently practicing in North Dakota at least part of the year. Of those practicing within North Dakota, 70.5% are practicing in the more urban cities of Bismarck, Mandan, Fargo, West Fargo, Grand Forks and Minot with 27.8% practicing in more rural areas, and 1.7% are unknown. Please see attached maps of psychiatric NPs and psychiatric NPs and CNS combined.

Although licensed in North Dakota, 261.8 FTE NPs indicated states other than North Dakota as their State of employment including Minnesota (79.5), South Dakota (32), Texas (25.7), Missouri (23), Arizona (11), Wisconsin (10), Washington (8), Montana (7), Iowa (6.5), California (6), Florida (5.7), Georgia (5), Colorado (4), Ohio (3.5), Nebraska (3.2), Utah (3), Arkansas (2), Hawaii (2), Illinois (2), Louisiana (2), Maryland (2), New Jersey (2), Nevada (2), Massachusetts (1.5), Virginia (1.2), Connecticut (1), Indiana (1), Kentucky (1), Mississippi (1), North Carolina (1), New Mexico (1), New York (1), Oklahoma (1), Oregon (1), Pennsylvania (1), Tennessee (1), Maine (0.5) and West Virginia (0.5).

Of the nurse practitioners practicing in North Dakota 80.2% (632.2/788.7) indicated their specialty area was family medicine. Other specialties included adult, gerontology, neonatal, pediatric, psychiatric, and women's health. See chart below.

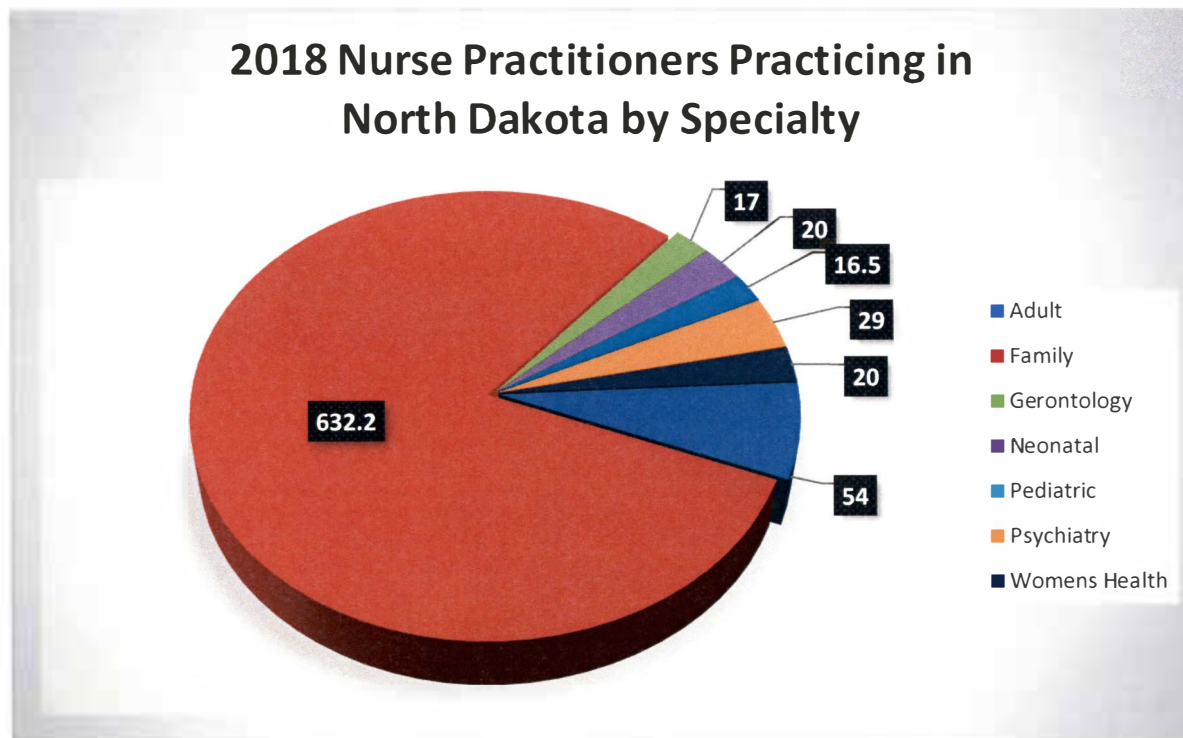




Table 2

<b>North Dakota Nurse Practitioners by Specialty</b>		
	<b>2016</b>	<b>2018</b>
<b>Adult Medicine</b>	42.5	54
<b>Family Medicine</b>	519.5	632.2
<b>Gerontology</b>	19	17
<b>Neonatal Medicine</b>	18	20
<b>Pediatric Medicine</b>	11	16.5
<b>Psychiatry</b>	20	29
<b>Women's Health Care</b>	22.5	20

Since 2016, the number of nurse practitioners practicing in pediatrics increased by 50%, psychiatry (45%), adult medicine (27.06%), family medicine (21.69%), and neonatal (11.11%) while gerontology decreased by 10.53% and women's health care (11.11%). See Table 2. Currently, 29 nurse practitioners specialize in psychiatry. Of those, 17.5 (60.3%) practice within the more urban cities of

Bismarck, Fargo, West Fargo, Grand Forks and Minot. Please see attached map of the locations of NPs with a specialty in psychiatry.

**Clinical Nurse Specialists:** In North Dakota 46.5 CNS are licensed of which 41.5 (89.2%) indicated they currently practice in the State. Of the 41.5 CNS currently practicing in North Dakota 33.5 (80.7%) are practicing in the more urban cities of Bismarck, Fargo, Grand Forks, and Minot. Please see attached map.

Although licensed in North Dakota, 5 CNS indicated they practice outside of the State. These included Minnesota (2.5), Alabama (1), Iowa (0.5), Ohio (0.5) and South Dakota (0.5). Of the clinical nurse specialists practicing in North Dakota, 60.2% indicated their specialty area was psychiatry and 26.5% indicated adult medicine. Please see chart below.

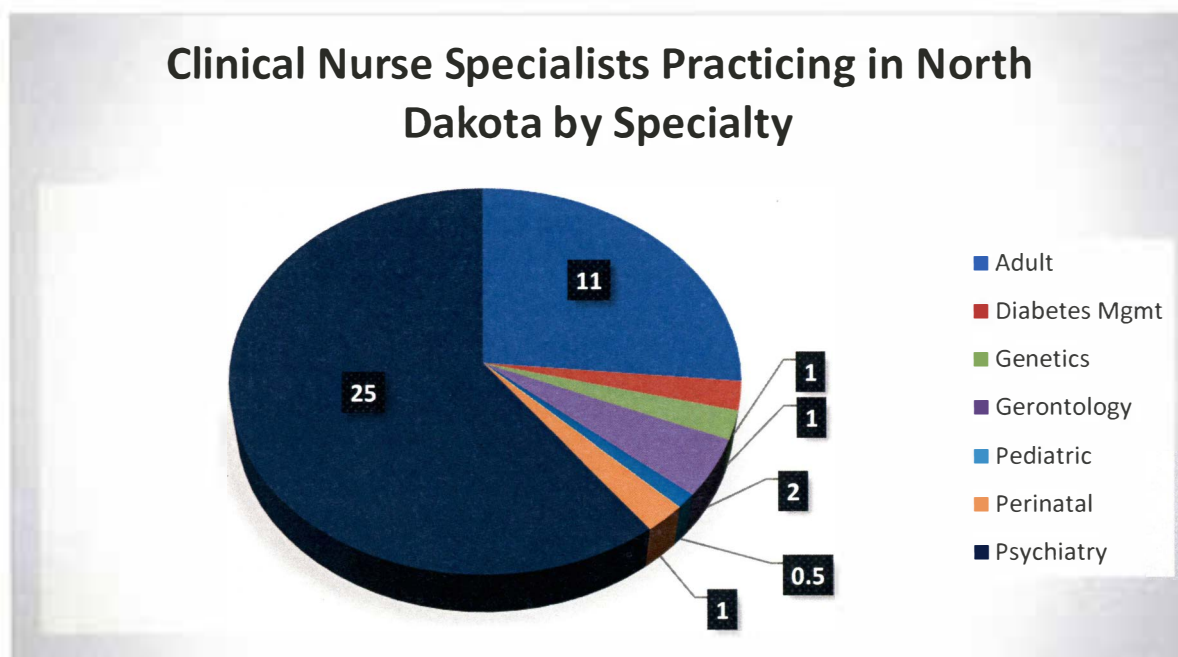




Table 3

North Dakota Clinical Nurse Specialists by Specialty		
	2016	2018
Adult	12.5	11
Diabetes Management	1	1
Genetics	1	1
Gerontology	2	2
Pediatric		0.5
Perinatal	2	1
Psychiatry	26.5	25

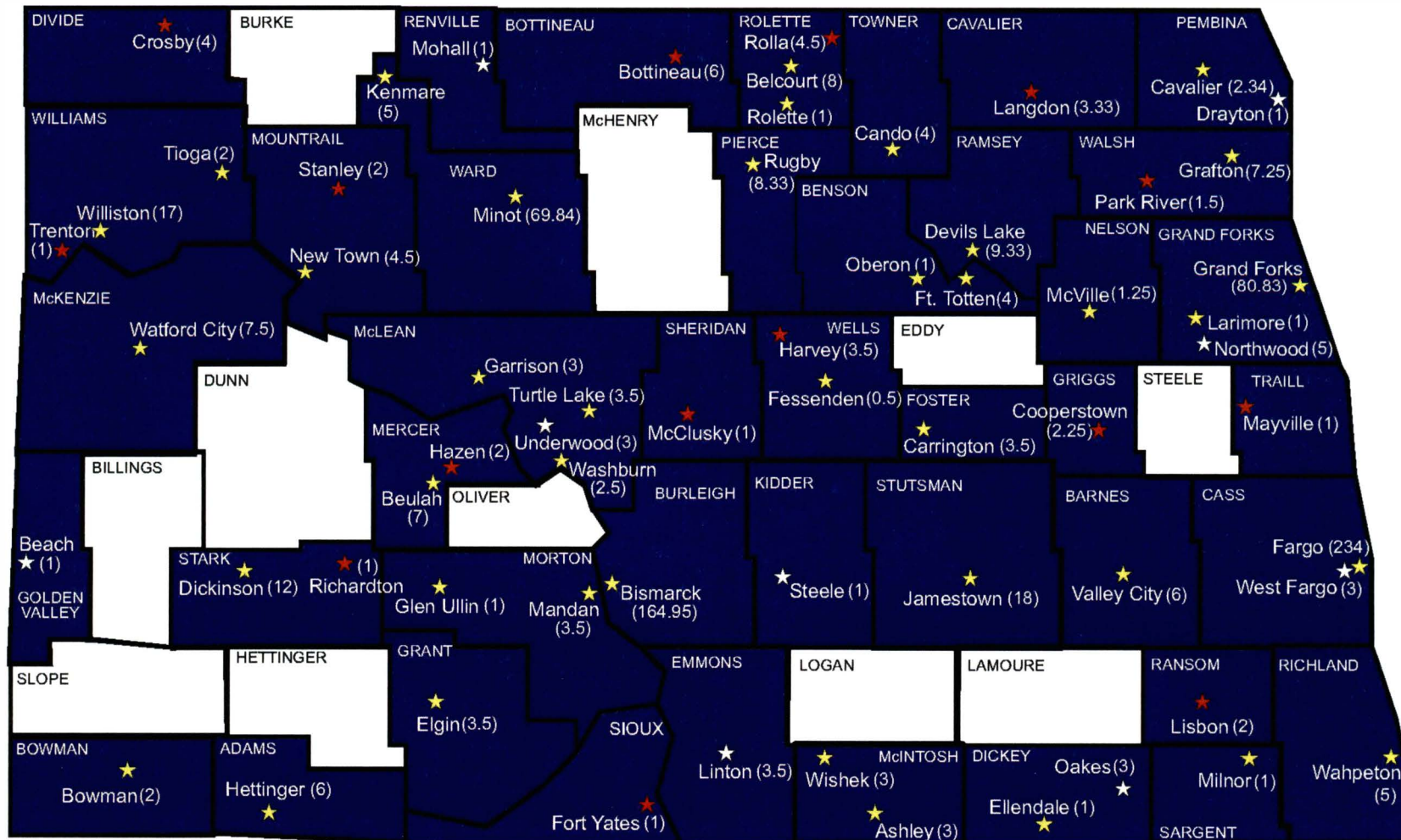
Since 2016, the number of CNSs practicing in North Dakota has declined by 7.8%. Those practicing in adult medicine declined by 12% and psychiatry by 5.66%. See Table 3. Of the 25 practicing in psychiatry, 74% (18.5) CNSs are practicing in the more urban areas of Bismarck, Fargo, Grand Forks and Minot. Please see attached maps of psychiatric CNSs and psychiatric CNSs and NPs combined.

**Certified Nurse Midwives:** A total of 21 CNMs are licensed in North Dakota of which 16.5 indicated they are practicing within the State. Two or 12.1% of the CNMs are practicing in rural areas of Belcourt and Williston. The other 14.5 indicated they were practicing in three of the more urban cities including Fargo (7.5), Minot (5), and Grand Forks (2). Although the total number of licensed CNMs increased in 2018 compared to 2016, those that indicated they practice in North Dakota decreased by 0.5 FTE. Please see attached map.

**Certified Registered Nurse Anesthetists:** North Dakota has 394.5 licensed CRNAs of which 297.5 indicated they are practicing in North Dakota. Of the CRNAs practicing in North Dakota, 84.1% are practicing in the four most urban cities of Bismarck, Fargo, Grand Forks and Minot; 14.2% are practicing in rural areas and 1.7% did not indicate a practice city. The total number of CRNAs practicing in North Dakota increased by 6.8% from 2016 (278.5) to 2018 (297.5). Please see attached map.

**Nurse Clinicians:** As in 2016, two nurse clinicians continue to practice in North Dakota in 2018. Both nurse clinicians practice in urban areas and specialize in rehabilitation and psychiatry.

# 2018 North Dakota Nurse Practitioners



**NDNPA**  
NORTH DAKOTA  
Nurse Practitioner Association

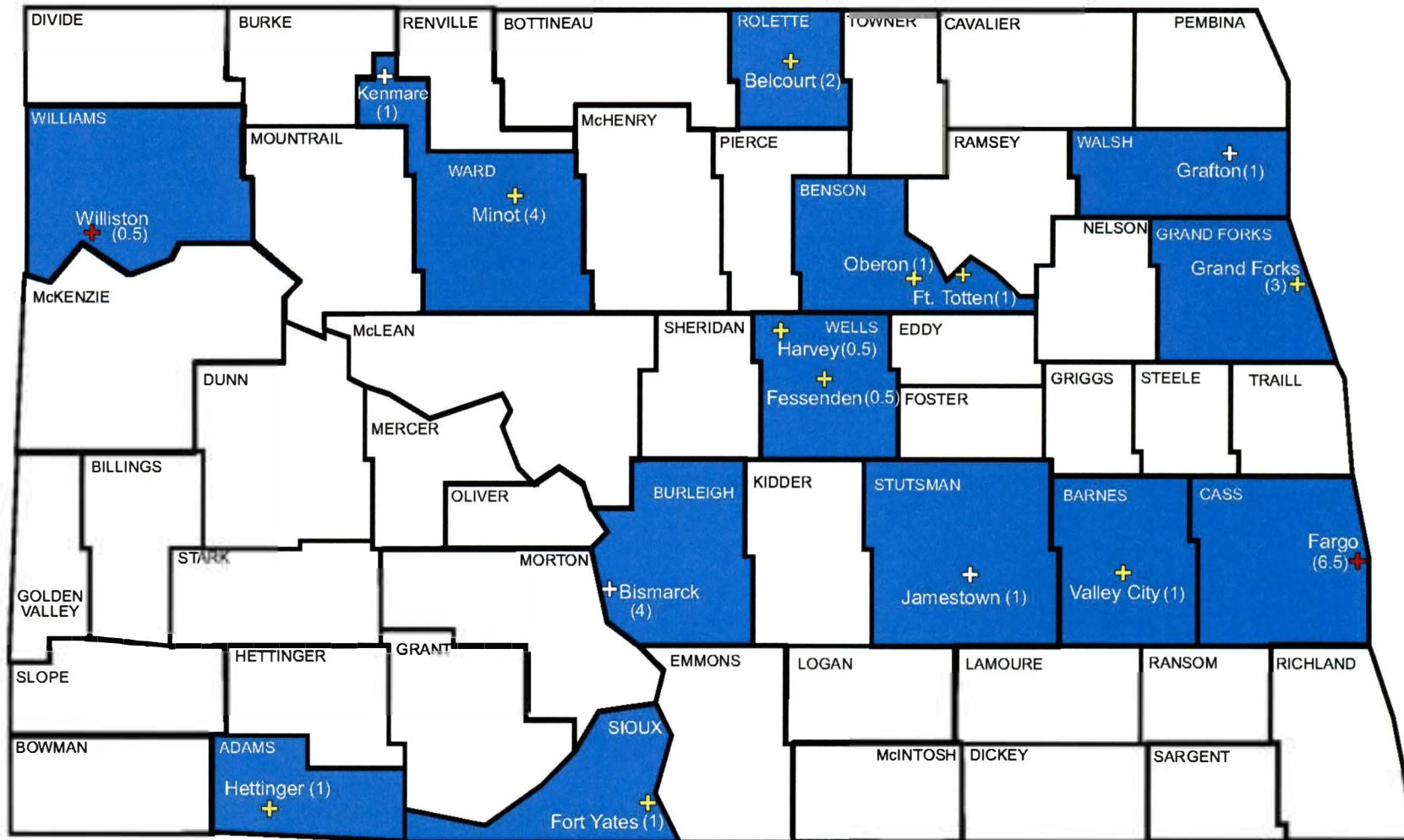
- Nurse Practitioners practicing within county
- ★ Nurse Practitioners' FTE increased since 2016
- ★ Nurse Practitioners' FTE decreased since 2016
- ☆ No change Nurse Practitioners' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

Unknown (13)

11/18

# 2018 North Dakota Psychiatric Nurse Practitioners



11/18

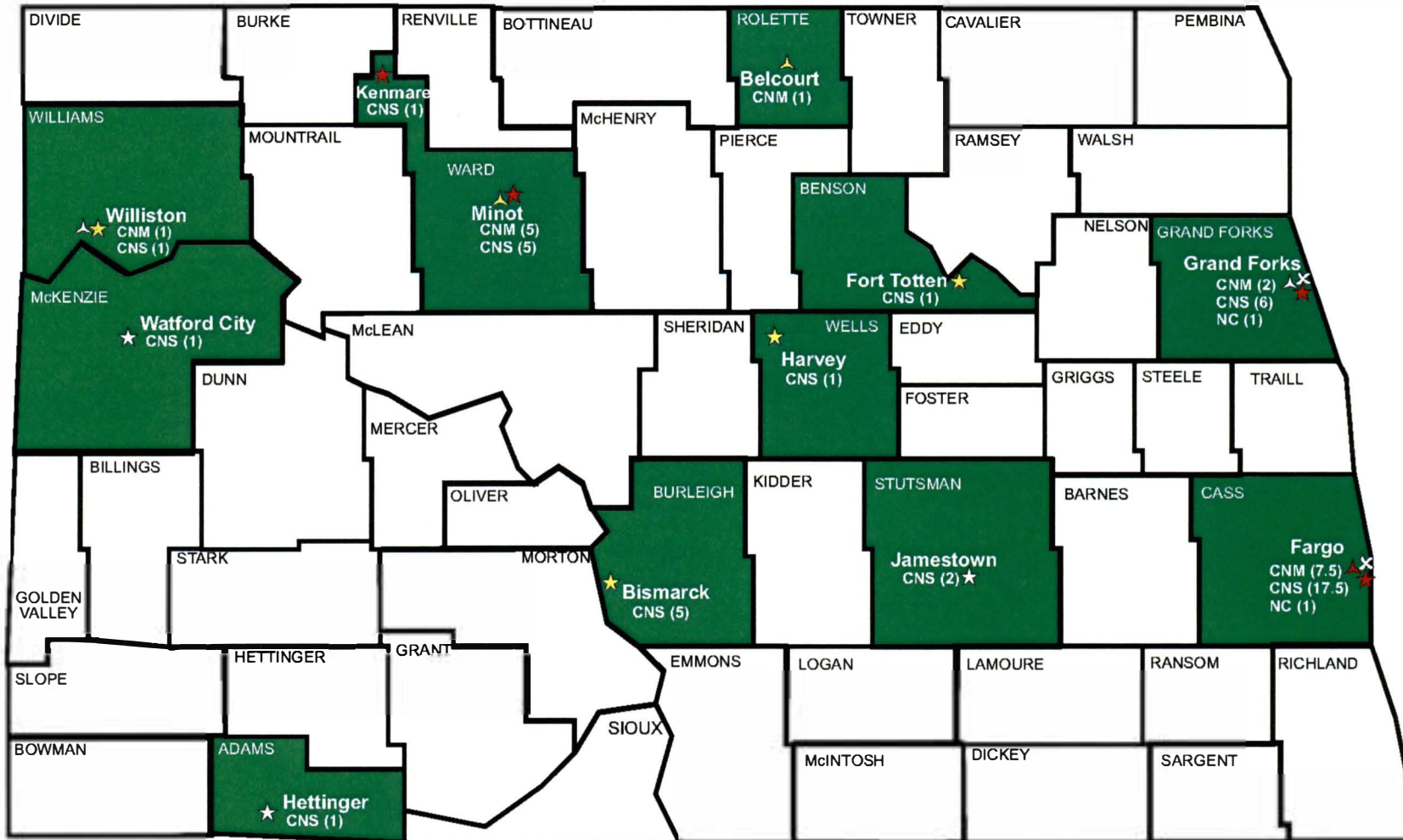
**NDNPA**  
NORTH DAKOTA  
Nurse Practitioner Association

- Psychiatric Nurse Practitioners practicing within county
- + Psychiatric Nurse Practitioners' FTE increased since 2016
- + Psychiatric Nurse Practitioners' FTE decreased since 2016
- + No change Psychiatric Nurse Practitioners' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.



# 2018 North Dakota Certified Nurse Midwives (CNM), Clinical Nurse Specialists (CNS), and Nurse Clinicians (NC)



**NDNPA**  
NORTH DAKOTA  
Nurse Practitioner Association

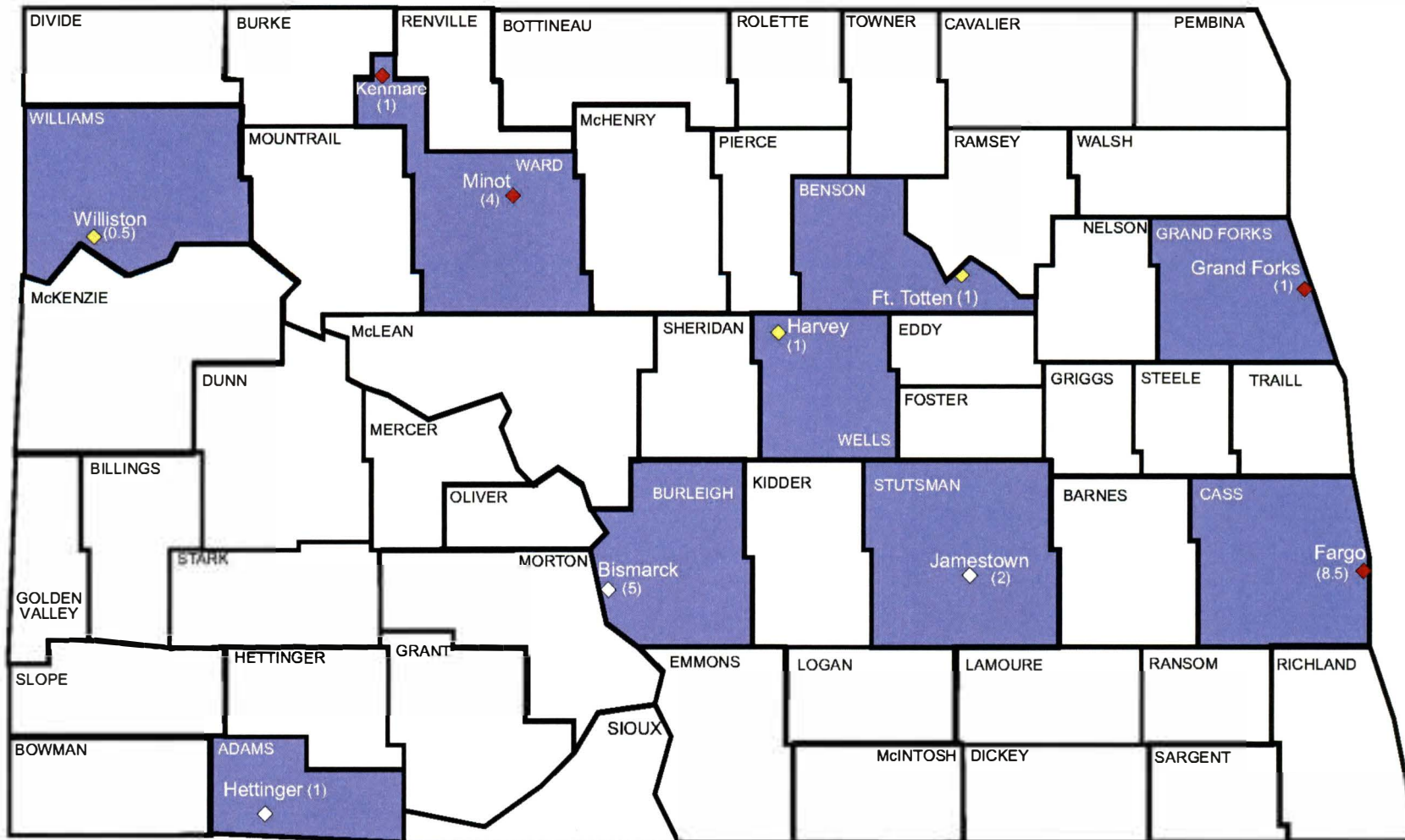
- CNMs, CNS, and/or NC practicing within county
- ▲ CNMs' FTE increased since 2016
- ▲ CNMs' FTE decreased since 2016
- △ No change CNM's FTE since 2016
- ⊞ No change NC's FTE since 2016
- ▲ CNS' FTE increased since 2016
- ▲ CNS' FTE decreased since 2016
- △ No change CNS' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

CNM Unknown (0.5)

11/18

# 2018 North Dakota Psychiatric Clinical Nurse Specialists



11/18

- Psychiatric CNS practicing within county
- ◆ Psychiatric CNS' FTE increased since 2016
- ◆ Psychiatric CNS' FTE decreased since 2016
- ◇ No change Psychiatric CNS' FTE since 2016

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

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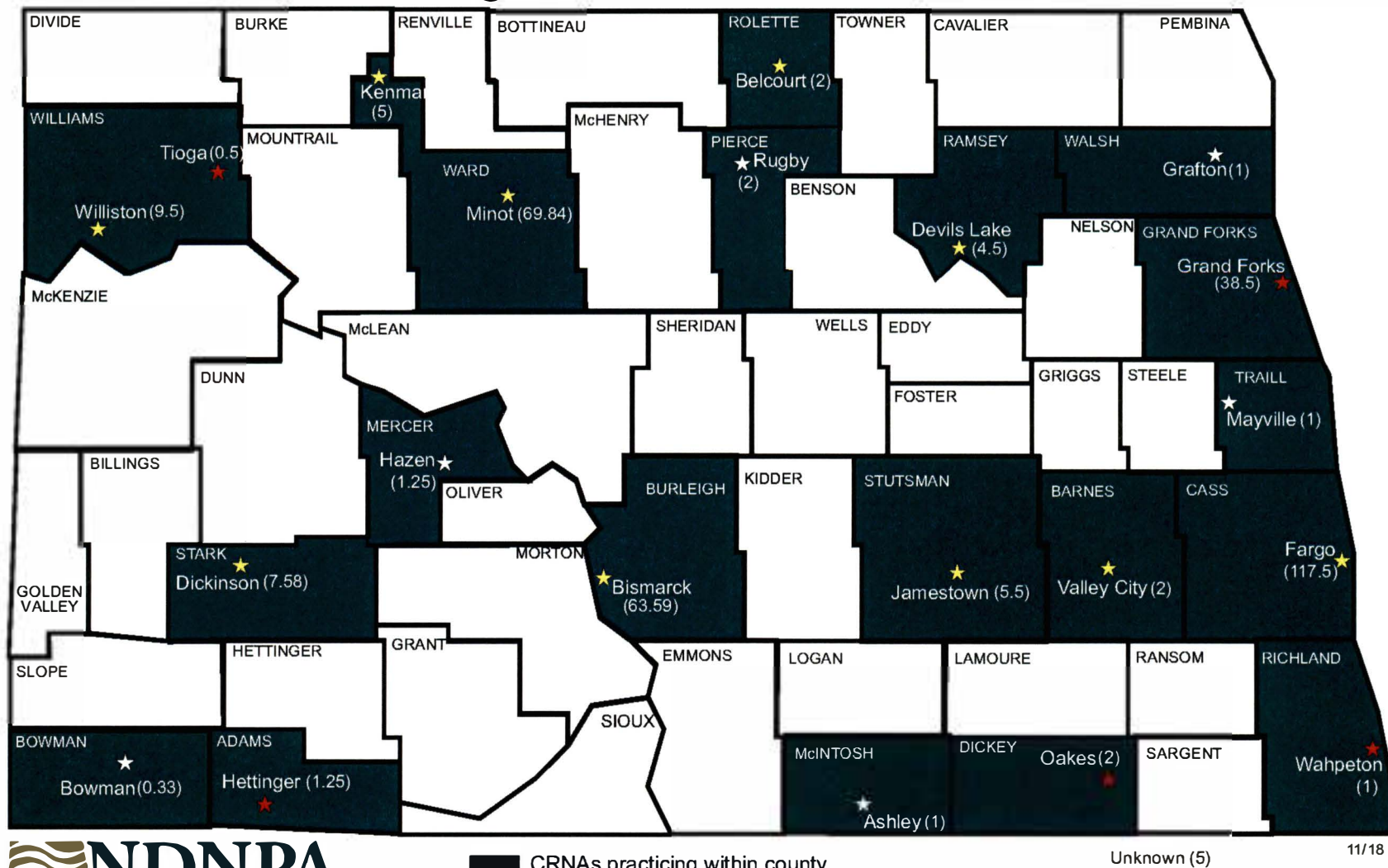


■ Psychiatric NPs and/or CNS practicing within county
 11/18  
+ Psychiatric NPs' FTE increased since 2016
 ◇ Psychiatric CNS' FTE increased since 2016  
+ Psychiatric NPs' FTE decreased since 2016
 ◇ Psychiatric CNS' FTE decreased since 2016  
+ No change Psychiatric NPs' FTE since 2016
 ◇ No change Psychiatric CNS' FTE since 2016

**SB 2138**  
**2.28.19**  
**Attachment 2**



# 2018 North Dakota Certified Registered Nurse Anesthetists



**NDNPA**  
NORTH DAKOTA  
Nurse Practitioner Association

\* Full time was assumed for each licensed Nurse practitioner. For those that indicated more than one site, the FTE was split equally and not based on actual hours worked.

Testimony to:

ND House Energy and Natural Resources Committee

66<sup>th</sup> ND Legislative Assembly

Chairman Porter and Committee Members,

I am Kellee Hollenbeck APRN FNP-C. I have been an Advanced Practice Provider at the Bone and Joint Center for 9 years. I am lucky to be able to work both autonomously and in conjunction with the Orthopedic Surgeons at the Bone and Joint Center.

I am here today to testify in support of Senate bill 2138 which would allow Advanced practice nurses to grant access to handicap hunters who would like to shoot from a vehicle. In 2011, Advanced practice nurses were allowed to be primary care providers without a collaborative agreement, since that time, many licensures and permits have been changed to allow Advanced practice providers to practice autonomously. However, a special hunting permit to allow those with difficulty ambulating may have been left behind. Recently, I had a long-time patient that was having difficulty due to arthritic knees and hips. He had been drawn for a buck license but was going to be unable to ambulate the distance needed to fill his license. He came to me for evaluation and it was found that he would qualify for the special permit with the Game, Fish and Parks that would allow him to shoot from a stationary vehicle. Unfortunately, these permits still require a physician to sign exclusively. In order to fulfill his needs, he had to make a separate appointment with a physician and repeat the same exam. This cost him time and extra healthcare expense. Advanced practice providers are currently able to sign other permits such as Handicap permits, and Crossbow permits. I ask that you approve this bill in order to help me and other Advanced Practice Registered Nurses to provide full service health care to our patients.

Thank you,

Kellee Hollenbeck APRN FNP-C

701-400-5790

khollenbeck@bone-joint.com



House Energy and Natural Resources Committee

February 28, 2019

SB 2138

Chairman Porter and members of the House Energy and Natural Resources Committee. I'm Courtney Koebele and I represent the North Dakota Academy of Physician Assistants. We support SB 2138.

Physician assistants (PAs) undergo rigorous medical training and must graduate from an accredited PA program in order to take the national certifying exam to be licensed. Like physicians and nurse practitioners, PAs must complete extensive continuing medical education throughout their careers.

PAs are licensed healthcare providers that practice medicine to include the diagnosis and treatment of medical conditions, ordering of diagnostic studies, and have prescriptive privileges for medications. Physician assistants also are primary care providers like physicians and advanced practice registered nurses.

Thank you for your time today. I would be happy to answer any questions.