



NORTH DAKOTA
Nurse Practitioner Association

Written testimony to:

67th Legislative Assembly
House Human Service Committee

HB 1415

Chairman Representative R. Weisz and Committee Members

I am Paula Moch, FNP-BC, Legislative Liaison for the North Dakota Nurse Practitioner Association (NDNPA). I am submitting this written testimony on behalf of the NDNPA in opposition of HB 1415 as written.

The NDNPA opposes this bill, as written, due to the exclusion of the Advanced Practice Registered Nurse (APRN) in the verbiage of this bill. Since 2011, the APRN has had full practice authority in the state of North Dakota, including prescriptive authority.

The APRN is a primary care provider or specialist care provider for many residents of North Dakota. By excluding the APRN in this bill, the patient's health care provider may be excluded from participating in this personal decision with their patient. This means the patient may have to search out an unknown health care provider to determine the appropriateness of this lvery personal life ending decision.

Starting with line 9 page 1 "attending physician", "means the the physician who has primary responsibility for the care of the patient and treatment of the patient's terminal illness." This excludes the health care provider APRN who has the primary responsibility for the care of the patient. This may be the APRN primary care provider or specialist in Palliative Care, Hospice, Oncology, Cardiology, Pulmonology, Neurology and other specialities that has diagnosed and treated the patient with the terminal, end stage illness.

Section 23-06.7-01.3 uses the term physician. This eliminates the APRN health care provider from determining capability It is within the scope of practice of the APRN to determine an individuals capability to communicate a health care decision. Not only the capability but also the individuals capacity to understand the consequences of their decision. In line 13 page 1, the term health care provider is used This is defined in Section 23-06.7.8a of this bill, "as a person licensed, certified, or otherwise authorized by the state to administer health care or dispense medication in the ordinary course of business or practice of a profession", such as the APRN.

Line 16, page 1 physician should be changed to health care provider

Line 12 page 2 physician should be changed to health care provider.

Section 23-06.7-01.10 on 2 physicians confirm; not only should the term physician be changed to health care provider as defined by the NDCC and in this document 23-06.7-01.8a, but is also unrealistic. In a rural state like ND, there is rarely 1 physician in a rural community much less 2. This puts undue hardship on the patient who is seeking death with dignity under HB 1415 to travel and search out unknown/unfamiliar physician health care providers.

There are at least 24 other references to physician in HB 1415 that need to be changed to health care provider as defined in HB Bill 1415, section 23-06.7-01.8a, with authority of ND Administrative Code 54-03-03.1 and NDCC 43-12.1

This concludes the written testimony in opposition of HB 1415 as written on behalf of the NDNPA. I am happy to answer any questions.

Thank you for your time.

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