



North Dakota Nurse Practitioner Association
Legislative Liaison Team
ndnpalegislative@gmail.com

Written Letter to

68th NORTH DAKOTA LEGISLATIVE ASSEMBLY

HB 1221

Chairman Louser and Committee,

I am Adam Hohman, Legislative Liaison for the North Dakota Nurse Practitioner Association (NDNPA). I am writing to ask you to vote **do not pass** on HB 1221.

The NDNPA understands the importance of transparency and advocates for full honest disclosure with patients in regard to communications and statements for health care services in regard to a health care practitioner's type of license. However, the passing of HB 1221 would likely not significantly alter outcomes for patient care but rather it would create unnecessary administrative hurdles for an already overburdened healthcare workforce.

While there has been a highly visible case recently in California which involved a healthcare practitioner's misrepresentation of credentials, cases as such are not the norm within healthcare. Cases of license misrepresentation are often more reflective of an individual's personal actions rather than the healthcare profession lacking rules and regulations surrounding credentials and licensure. Overall, most healthcare facilities already require health care practitioners to wear name badges and/or post the credentials of their respective practitioners within advertisements or communications to their patients and the public. Meaningful legislation that would impact patient care will not come from legislation such as that proposed in HB 1221 but rather from legislation addressing the more significant healthcare issues in North Dakota.

Currently, there are more significant healthcare concerns in North Dakota that need to be addressed. Prior to the COVID-19 pandemic, healthcare professionals were already dealing with the burden of burnout and workforce shortages, both of which have now become acutely exacerbated due to the pandemic. Further complicating the healthcare landscape for patients in North Dakota is the availability of healthcare providers particularly in rural areas; access to care

and health services, technology, and access to advanced treatment options. Additionally, patients continue to be burdened with the affordability of prescription drugs and their ability to pay for healthcare services. During the pandemic our statewide problem of unmet mental and behavioral health needs has also become acutely exacerbated.

Not only are patients suffering but so are health care facilities. Due to inadequate Medicare and Medicaid reimbursement models, and a lack of staffing and resources many North Dakota hospitals are experiencing difficulty with providing services and remaining financially viable. Of the 53 counties in North Dakota, 19 counties do not have a primary or acute care hospital limiting people's ability to seek needed healthcare readily.

Rather than pass HB 1221 which would create unnecessary administrative hurdles for healthcare practitioners and facilities, we would ask that you instead collaborate with healthcare professionals across the state to produce legislation that addresses more significant healthcare issues that have everyday impact on many North Dakotans.

Thank you for your time.

Adam Hohman, DNP, FNP-BC

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