



Full APRN Practice in Indiana

What does Full APRN practice mean?

- Removal of the state-mandated practice agreement between an APRN & physician for an APRN to prescribe

What changes can Hoosiers expect with Full APRN practice?

- Improvements in health care efficiency
 - Increase face time with providers since administrative burdens associated with the practice agreement are removed
- Increase in patient healthcare access
 - Reduction in wait times and expansion in supply of APRNs in underserved and rural areas
 - States with the least restrictive APRN regulations had a 2.5-fold increase in primary care access and 15-fold increase in Medicare beneficiaries receiving primary care.
 - 2017 Indiana Rand Study predicted a 14% reduction in ER visits, 32% increase in well-child care visits, and 379,000 more Hoosiers would have access to a primary care provider
- Increase in Indiana APRN workforce
 - Practice agreements discourage APRNs from practicing in the state and promote migration of workforce to other states with less restrictive laws
 - Full practice states of Nevada, North Dakota, and Arizona had increase APRN growth rates by 33%, 83%, and 52% respectively with largest increase occurring in rural counties
 - 2017 Indiana Rand Study predicts a 46% increase in APRNs with FPA
- Reduction in healthcare costs
 - Over 57% of APRNs in Indiana pay a fee to maintain the practice agreement
 - States cost analysis/projected savings associated with FPA.

State	Cost Savings	Projection
Pennsylvania	\$6.4 million	10 Years
Massachusetts	\$4.2-8.2 billion	10 Years
Florida	\$399 million	Annually
California	\$433 million	Annually
Ohio	\$ 4.4 billion	Annually
*Cost savings from reduced ER visits, reduced administrative overhead, & increased preventative visits		

What does Full APRN practice NOT DO?

- Does NOT expand “scope of practice” of APRN
- Does NOT increase patient risk
- Does NOT reduce patient safety
- Does NOT increase healthcare costs
- Does NOT jeopardize other health care providers position in healthcare
- Does NOT interfere with inter-professional collaboration or team-based care. Indiana statute and Indiana state licensing require APRNs to consult and collaborate with other healthcare professionals as necessary to meet the patient’s needs.