



MICHIGAN COUNCIL OF NURSE PRACTITIONERS

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Testimony before the Local Government and Municipal Finance Committee

RE: HB 5615 (H-1)

May 4, 2022

Good afternoon Chair Calley and members of the Local Government and Municipal Finance Committee. My name is Donna Craig and I am here to discuss HB 5615 on behalf of the Michigan Council of Nurse Practitioners (often referred to as “MICNP” for short). I am a registered nurse and health care attorney, whose law practice for 40 years has been focused entirely on health care law. My clients include physicians, nurses, advanced practice registered nurses, licensed professional counselors, psychologists, social workers, physical therapists, occupational therapists, and doctors of veterinarian medicine. My role as a healthcare attorney is to interpret state and federal laws and advise my clients accordingly.

In addition to my private practice, I have been a member of the State Bar of Michigan’s Health Care Law Section for more than 20 years, with four of those years serving on the Health Care Law Section’s Executive Committee leadership team. As a member of the Health Care Law Section’s leadership team my role has been to analyze and interpret state and federal health care legislation laws to ensure consistency.

Most recently in my role as a healthcare attorney, I was involved with the legislation advocated by licensed professional counselors when they sought a more well-defined scope of practice a couple of years ago. On behalf of the licensed professional counselors I’m proud to say that legislation was passed anonymously in both the House and Senate.

The Michigan Council of Nurse Practitioners stepped up when asked by the Funeral Directors to help the communities of this state and are happy to work with them to be a part of the solution. MICNP is supportive of HB 5615 as introduced. However, I am here today to share my concerns on behalf of the NPs practicing in this state about HB 5615 as amended, which would set a precedent that is not justified and is not consistent with NPs practice in Michigan.

As amended, adding “delegation” to this specific section of the public health code is counterproductive, is unnecessary, and does not address this need for the people of this state. The public health code defines “delegation” as the “authorization granted by a licensee to a licensed or unlicensed individual to perform selected acts, tasks, or functions that fall within the scope of practice of the delegator and that are not within the scope of practice of the delegatee and that, in the absence of the authorization, would constitute illegal practice of a licensed profession.” Nowhere else in the public health code is there any

mention of “delegation” of clinical duties to a NP, only as it relates to prescribing controlled substances. The day-to-day functioning of a NP’s clinical duties are not delegated to the NP as the NP functions based on his/her ability to-perform clinical duties.

As introduced, this bill does not allow for an autonomous expansion of scope. Rather, adding the word “delegation” by amendment in statute further limits the scope of NPs when it comes to making a determination of death. I ask that you acknowledge that such an amendment, is unnecessary under the current law and seeks only to provide an additional barrier to practice in statute. And that adding this language is completely adverse to the goal of this legislation, which is to better serve the people of Michigan by streamlining the process of making a determination of death.

Thank you for your time today. I am happy to answer any questions you may have.

Respectfully submitted,

Donna J. Craig, RN, JD