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Beat COVID-19 by Making Temporary Pandemic Responses Permanent

By Greg George

Summary

After first relaxing some regulations that got in the way of Michigan's health care professionals gearing up to fight COVID-19, Gov. Gretchen Whitmer reinstated them again. It's time to make the now-lapsed reforms permanent.

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Patients would benefit if the state brought back temporary measures Gov. Gretchen Whitmer made to suspend some unnecessary and costly regulations in health care.

The early responses of the governor and Legislature to fight COVID-19 saved lives. Unfortunately, these life-saving reforms have been suspended, and the novel coronavirus isn't stopping its infectious pursuit of the world just because we started a new calendar year.

Much of last year was spent reacting to COVID-19. We were learning — and still are — exactly what its effects were and how we needed to adjust to keep businesses open and life as close to normal as possible.

Vaccinations are being pushed as the only method we have to fight COVID-19, but the truth is they are but one part of the solution. There is more that can be done to prevent COVID-19 and its variants from overwhelming our health system.

As COVID-19 started spreading across the country, Gov. Gretchen Whitmer issued several executive orders to increase access to qualified providers and hospital bed capacity, and renewed them when they expired. First, the governor suspended scope of practice restrictions that prevented health care professionals from fully using their education, experience and training. Secondly, she suspended licensing restrictions that prevented high-quality, licensed professionals from other states from treating Michiganders without first paying for a Michigan license. She also made it easier for public officials to use emergency procedures to let health care facilities add hospital bed capacity to treat COVID-19 patients. All of this was commendable.

But within months, the governor took the state back to its old ways. In an executive order announcing the change, Whitmer acknowledged that “suspending these scope of practice laws helped save countless lives and ensured our hospitals were fully staffed to care for COVID-19 patients.”

While COVID-19 patients may not be filling up hospitals anymore, the potential remains. Worse yet, Michigan still has a shortage of health care providers, and many of them are feeling significant burnout. They need help.

Scope of practice restrictions contribute to shortages and burnout by limiting patients' access to essential providers. They also increase costs, wait times, and driving distances for patients.

Two executive orders had suspended these restrictions and allowed physician assistants, registered nurses, pharmacists and other medical providers to provide care within their expertise.

It's likely that Michigan benefited from these orders. In locations where nurse practitioners had the same authority and responsibilities as physicians, research has found no significant health differences and comparable patient outcomes between patients randomly assigned to NPs or physicians. Furthermore, research has found that "patients were more satisfied with consultations with nurse practitioners than those with doctors."

Through these two orders, the governor also suspended licensing restrictions for out-of-state medical professionals. The requirements for obtaining a state license are fundamentally the same from state to state: Graduate from an accredited school and program and pass a federal licensure test. The federal Department of Veterans Affairs accepts individuals with a license in good standing to practice in any of its facilities, regardless of where they are licensed. Arizona and Pennsylvania enacted ways of recognizing licenses from other states in 2019, before the pandemic even began.

Three of Whitmer's other executive orders allowed the state health department to issue an emergency certificate of need, or CON, to applicants and defer strict enforcement measures. The department approved over 100 emergency CONs to facilities throughout the state.

CON laws were originally put in place to control health care costs by intentionally limiting consumer choices through restricting the supply of services and facilities. Decades of research, however, find that CON laws are associated with reduced access to care, decreased health care quality, and higher costs. That is why 12 states completely repealed their CON laws, and more than 20 states have fewer CON regulations than Michigan.

The governor has maintained she would welcome "ideas on science-based solutions to protect public health." In that spirit, making these temporary responses permanent will help balance our state's health care needs more efficiently than any state agency or commission can.

We've learned a lot from COVID-19. It has highlighted the areas of our lives, families, communities and government that need to be adjusted. Lawmakers in Lansing should take these lessons and change policies that slow down our health care workers who fight viruses and illnesses. Since the vaccination is months from reaching the arm of everyone who wants one, and new variants of the virus will continue to put pressure on health care workers and the economy, the temporary reforms mentioned here should be made permanent.

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