

April 22, 2025

Representative Susan R. Donovan
Chair, House Health & Human Services
State of Rhode Island General Assembly
82 Smith Street
Providence, RI 02903

Sent electronically to HouseHealthandHumanServices@rilegislature.gov

Re: RI 6088 - Permits a certified foot care nurse or a certified foot care specialist, to provide certain at-home foot care, including routine foot and nail care including nail clipping

Dear Chairwoman Donovan and members of the House Health & Human Services Committee:

On behalf of the American Podiatric Medical Association (APMA), I am writing again in support of the Rhode Island Podiatric Medical Association (RIPMA) to the Rhode Island House Health & Human Services Committee (the "Committee") to address questions raised at the committee hearing held on March 27, 2025, related to RI H6088, "Permits a certified foot care nurse or a certified foot care specialist, to provide certain at-home foot care, including routine foot and nail care including nail clipping." Specifically, in the hearing, several legislators asked how other states address this issue.

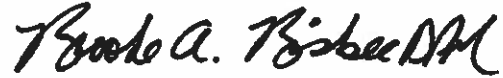
As stated in the hearing, routine foot care, in the absence of localized illness, injury, or symptoms involving the foot, is generally not covered under Medicare. The reason the noncoverage matters is because of the patient involved – a patient receiving covered routine foot care, or "at-risk" foot care, is a complex patient, who frequently has other comorbidities and is at a significantly higher risk of amputation and other complications. In all states, nurses are generally allowed to provide supportive and restorative care by broad, non-prescriptive scopes of practice, and required to refer patients when the care necessitated exceeds that scope of practice. None of the guidance shared as support for this change in law reflected a scope of practice change in statute – all of the guidance was issued by the state nursing boards in advisory opinions. However, as currently drafted, RI H6088 expands the scope of practice by broadly outlining general and specific services that nurses can perform. Codifying this at the statutory level will make Rhode Island the first state to ever do so, and an extreme outlier.

Instead of codifying this scope of practice change, APMA and RIPMA instead strongly recommend that the legislature direct Rhode Island Board of Podiatry to work in partnership with the Rhode Island Department of Health and Rhode Island Board of Nursing to determine the best approach for what is in a nurse's scope of practice at the regulatory and sub-regulatory level, which would be in line and the norm of how other states have handled this question.

APMA appreciates the Legislature's concern with increasing access to care. However, RI H6088, as drafted, lacks sufficient safeguards to ensure patients are receiving appropriate care. **Again, we ask that RI H6088 should not be moved forward for passage and implementation.**

APMA appreciates your consideration and is pleased to discuss this matter further with you. Please contact the APMA Center for Professional Advocacy Director Gail M. Reese, JD, at 301-581-9230 or greesc@apma.org with any further questions or concerns.

Sincerely,

A handwritten signature in black ink that reads "Brooke A. Bisbee DPM". The signature is written in a cursive, flowing style.

Brooke A. Bisbee, DPM
President