
From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 20, 2009 1:23 PM
To: HTHTestimony
Cc: margaret.maupin@wilcoxhealth.org
Subject: Testimony for HB1378 on 3/20/2009 3:00:00 PM

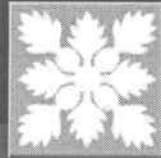
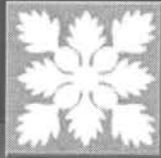
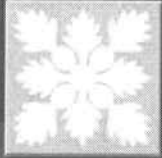
Categories: Green Category, Blue Category

Testimony for HTH 3/20/2009 3:00:00 PM HB1378

Conference room: 016
Testifier position: support
Testifier will be present: No
Submitted by: Margaret Maupin
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Comments:

I am an APRN on the island of Kauai. I work as a primary care provider (UNDER SOME INSURANCE PLANS WHICH HAVE APPROVED THIS-aprn'S AS pcp'S) with a master's degree and a specialty in both women's health and family practice. When this is not approved (ANRN's as PCP's) by some insurance companies, I have to utilize a co-signing physician which results in much confusion for the patient. Often times the patient has never seen this physician This can result in many negative aspects, to name a couple; referrals to specialist generated by the APRN appearing as though they have been generated by the co-signing physician often unknown to the patient-this is a set up for errors and unnecessary time spent on who is doing what and another very negative effect is that a prescription bottle has the co-signing physician's name on it (and not the APRN's name on it) resulting in a patient often times thinking that they have been given the wrong prescription. I ABSOLUTELY SUPPORT THE NEED FOR ALL INSURANCE PROVIDERS TO RECOGNIZE APRN'S AS PRIMARY CARE PROVIDERS. I also work part time in Urgent Care and the prescription restrictions on NP's cause me to have to interrupt a physician 4-8 times per day for a their co-sign for narcotics, including even cough syrup which contains codeine. Again this prescription would be dispensed under the physician's name whom the patient has likely never seen. Before working here in my home state of Hawaii I spent 12 years working in Minnesota as a Nurse Practitioner, having full prescribing rights and my own DEA license which allowed me to prescribe controlled substances. I have been trained at the graduate level in Pharmacology and safe prescribing, and attend continuing education regularly to be sure that this safe and updated prescribing continues. I have never prescribed a controlled drug or other prescription that has resulted in a serious outcome for a patient. Evidence also supports APRN's as safe and careful prescribers of controlled drugs and other medications and treatments, etc. Hawaii is one of the most, if not the most restrictive state in regards to Nurse Practitioner's rights to prescribe. There is no good evidence to support this and the practice of prescribing should be controlled by the BOARD OF NURSING rather than the board of medicine. This is the only category of APRN practice that the Board of Medicine is controlling. The evidence just does not support the need for this. I wholeheartedly support APRN's having full prescribing rights, including controlled substances, managed and directed by the BOARD OF NURSING, not the board of medicine.



Hawaii Association
of Health Plans

www.hahp.org

March 20, 2009

The Honorable David Ige, Chair
The Honorable Josh Green M.D., Vice Chair

Senate Committee on Health

Re: HB 1378 HD2 – Relating to Advanced Practice Registered Nurses

Dear Chair Ige, Vice Chair Green and Members of the Committee:

My name is Rick Jackson and I am President of the Hawaii Association of Health Plans (“HAHP”). HAHP is a non-profit organization consisting of seven (7) member organizations:

AlohaCare
Hawaii Medical Assurance Association
HMSA
Hawaii-Western Management Group, Inc.

MDX Hawai‘i
University Health Alliance
UnitedHealthcare

Our mission is to promote initiatives aimed at improving the overall health of Hawaii. We are also active participants in the legislative process. Before providing any testimony at a Legislative hearing, all HAHP member organizations must be in unanimous agreement of the statement or position.

HAHP appreciates the opportunity to testify with concerns on Sections 2-5 of HB 1378 HD2 as currently drafted which could have the effect of mandating health plans contract with Advance Practice Registered Nurses (APRNs). HAHP takes no position on the remainder of the language in the measure.

We understand that changes have been made to this measure to address earlier concerns however we believe that language contained in Sections 2-5 would still mandate health plans to contract with APRNs. We would respectfully request that this language be further amended to clarify the intent of HB 1378 HD2. Thank you for the opportunity to offer comments today.

Sincerely,

Rick Jackson
President

• AlohaCare • HMAA • HMSA • HWMG • MDX Hawaii • UHA • UnitedHealthcare •
HAHP c/o Howard Lee, UHA, 700 Bishop Street, Suite 300 Honolulu 96813
www.hahp.org

March 20, 2009

LATE

To: Senator David Ige, Chair
Senator Josh Green, MD, Vice Chair
And Members
Senate Committee on Health

From: Kenneth Zeri, RN, MS
President Kokua Mau
President, Hospice Hawaii

**Testimony in support of HB1378 HD2 relating to
Advance Practice Registered Nurses**

Thank you for the opportunity to provide oral testimony during today's hearing. I rose in support of this bill with particular attention to the benefit which an Advance Practice Registered Nurse (APRN) would be able to bring to terminally ill patients. This is particularly important for those residents of Nursing Homes, whose only regular prescribing contact might be an APRN.

As I discussed, CMS regulations allow for a hospice interdisciplinary team to take orders from an APRN for the care of a hospice patient, with the exception of certifying the terminal illness. An APRN with prescriptive authority for controlled substances would be able to deliver complete and rapid care to those hospice patients under her/his care without having to track down a physician to get orders for appropriate pain medications.

This aspect of the bill offers the promise of a more rapid response to pain and suffering and would benefit not only the nursing home patient, but the hospice patient as well.

Thank you for the opportunity to testify. I may be reached at 924-9255 for further questions.