

Connecticut Coalition of Advanced Practice Nurses
 American College of Nurse-Midwives (ACNM), Region I, Chapter 2
 Connecticut Advanced Practice Registered Nurses Society (CTAPRNS)
 Connecticut Association of Nurse Anesthetists (CANA)
 Connecticut Nurses' Association (CNA)
 Connecticut Chapter of the American Psychiatric Nurses Association (APNA-CT)
 National Association of Pediatric Nurse Practitioners (NAPNAP), Connecticut Chapter
 The Northwest Nurse Practitioner Group

Testimony in support of Raised Bill #192 AAC Advanced Practice Registered Nurses and Primary Care Providers for Individual and Group Health Policies.

Senator Crisco, Representative Fontana, and members of the committee:

My name is Lynn Rapsilber MSN-ANP-BC, an APRN, and current Chair of the Connecticut Coalition of Advanced Practice Nurses. The Coalition strongly supports this bill as it addresses consumer access to care and reduces provider liability by credentialing and listing APRNs on insurance panels.

First, the consumer cannot find APRN Primary Care Providers if we are not credentialed. Access to health care providers becomes limited. Some insurers will credential us but not list us in directories or websites. I practice in a specialty practice and often hear patients complain that they do not have a primary care provider. Without proper listing under the patients plan, and if other listed primary Care Providers, namely physicians, are not available, I am not able to help them find a primary care provider. I can refer them to the insurer website, but, APRNs are not listed as primary care providers, maybe under "other health care provider" or not listed at all. This legislation would make access easier for both patients to find us and providers to find more referral sources.

Second, provider liability is a concern. If the APRN is not credentialed, a test ordered by the APRN Primary Care Provider may be returned to a MD, who is not the Primary Care Provider, and not liable for the care of the patient. This often causes a delay in the APRN Primary Care Provider receiving those results and in diagnosis and treatment. The CMIC (Connecticut Medical Insurance Company) recently stated in a newsletter about medical loss prevention, that "ineffective test result tracking: lack of notification and follow up of abnormal test results leads to cases that are difficult to defend and expensive to settle." There have been many examples from my colleagues who have had laboratory and/ or radiology centers refuse to accept the APRN order or they will accept the order but send the test back to a MD not the ordering APRN because the APRN is not the billing provider with the carrier. Credentialing APRNs on all insurance panels will eliminate this risk. The ordering provider will receive the test result back and properly assume the responsibility for that test.

Lastly, there has been discussion about reimbursing by "pay for performance". This looks at outcome measures as a way to reward providers for patient's meeting goals. Data is totally skewed when the APRNs are not credentialed because their data cannot be tracked.

I support Raised Bill #192 for these reasons. Thank you for your time and consideration regarding this bill.