

February 27, 2014

RSB #36 AN ACT CONCERNING THE GOVERNOR'S RECOMMENDATIONS TO IMPROVE ACCESS TO HEALTH CARE DEALING WITH ADVANCED PRACTICE REGISTERED NURSES (APRNs)

Dear Senator Gerratana, Representative Johnson, and Members of the Public Health Committee,

This letter represents the experience of two psychiatric advanced practice registered nurses (APRNs) in private practice: **Mary Anne Zeh, APRN has been prescribing and providing therapy since 1996 and Kerry Williamson since 1987.** We are asking you to support RSB #36 which removes the mandated *written collaborative* agreement with a physician licensed to practice in the State of Connecticut that all APRNs must have in their possession to practice in this state. This bill is not a change in APRN's scope of practice.

The bill removes a very significant and real barrier to access to healthcare for people in the state of Connecticut and removes a barrier for APRNs to practice in this state.

As psychiatric APRNs we provide mental health treatment (therapy and medications) to some of our state's most vulnerable population. As we illustrate later, the written collaborative agreement actually creates a risk to our patients' safety because the sudden lack of a willing collaborating psychiatrist could shut down our practices instantaneously.

We were part of the Connecticut Society of Nurse Psychotherapists that helped to pass legislation to eliminate supervision of APRNs by physicians in 1999. At that time, the *legislature was heavily lobbied by physicians that it was "unsafe" to remove their supervision of APRN's.* Fifteen years later those claims prove unsubstantiated. Now the State Medical Society wants you to believe that APRNs cannot practice safely without the written collaborative agreement (again without substantial evidence). The physicians opposing this legislation have a vested financial incentive to have APRNs employed by them as it greatly increases their profits. ***The written collaborative agreement binds professional APRNs' practices legally and therefore economically to the medical profession.***

We are solo practitioners and have provided care for thousands of patients (adults and children). We do not have a psychiatrist in our practices. Because many psychiatrists in Connecticut accept only cash-paying patients, psychiatric APRNs provide a much needed service to the rest of the Connecticut residents including children. We have the experience and competence to provide for their care safely. Patients are relieved to have someone who spends time with them.

- **Patients are often referred to us by their primary care physician for psychiatric care because they trust our ability to provide excellent psychotropic medication management and therapy to their patients.**
- Patients come to us with undiagnosed underlying medical conditions such as thyroid problems, sleep apnea, vitamin d deficiency, Vitamin B12 deficiency, heart conditions, hormonal problems, dementia, etc. As nurses, we assess these problems and help our clients get all of the medical care they need.
- We have consulted with and referred our patients as appropriate to primary care providers, endocrinologists, neurologists, cardiologists, sleep centers, ob/gyns, maternal/fetal specialists, etc.

We have experienced first-hand the real threat to our practices and livelihood the law requiring written collaborative agreements has created. This law ultimately threatens our patients' safety and access to care.

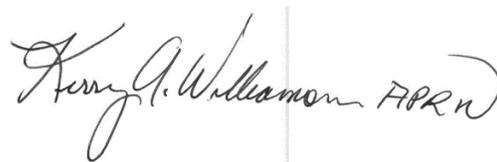
- ***Finding a psychiatrist to collaborate is difficult at best*** – many psychiatrists are advised by their lawyers to avoid collaborating. Some want hundreds of dollars in fees plus coverage of their practices for free when they were on vacation. Some want us to work for them as a condition to collaborate.
- ***Mary Anne Zeh's first written collaboration was with a newly graduated resident that she helped mentor at the hospital where she worked at the time. Because the psychiatrist often failed to keep the monthly appointments, she decided to find someone else.***
- ***We found a psychiatrist through some of our colleagues. We met with this psychiatrist as a group on a monthly basis for a fee (\$350 per hour). After a year or two that psychiatrist abruptly ended the written collaborative agreement. Each member of the group of psychiatric APRNs, each treating hundreds of patients in their respective private practices, had a month to find another psychiatrist for a written collaborative agreement or legally be required to shut down our practices.***
- ***In one instance, to prevent closing our practices we accepted a written collaborative agreement with a psychiatrist who required a hefty fee. Early on it was clear that this psychiatrist's knowledge and practice regarding psychotropic medications was outdated as we were teaching him about new medications. We ended this written collaborative agreement as soon as we could find someone else who was more qualified and willing to work with us. This was a very difficult and lengthy process.***
- ***We joined with a group of APRNs to have a written collaborative agreement with a psychiatrist who was unfamiliar to us. A year later, the Public Health Department suspended this psychiatrist's license. Each of us, again, had to find another psychiatrist for a written collaborative agreement or legally be required to shut down each of our practices.***
- ***We now have a psychiatrist we meet with monthly for an hour and a half to discuss cases, mental health treatment and prescribing. However, we function independently with regard to prescribing medication.***

The current law places our practices and therefore our patients in a very precarious position. We are always at risk of being forced to close our practices because of the current law. If we cannot obtain a collaborating psychiatrist for the written agreement, we legally cannot treat our patients. This puts our patients at risk for abruptly losing access to vital mental health treatment. *This is the real danger to patient safety.*

Respectfully submitted,



Mary Anne Zeh, APRN
(860) 649-4477



Kerry Williamson, APRN
(860) 646-2525

935 Main Street, Suite C2
Manchester, CT 06040