

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
New England Chapter of the Gerontological Advanced Practice Nurses Association (NEGAPNA)
The Northwest Nurse Practitioner Group

Public Health Committee Hearing

March 5, 2018

Senator Gerratana, Senator Somers, Representative Srinivasin, Representative Steinberg and esteemed members of the Public Health Committee.

My name is Dr. Lynn Rapsilber DNP ANP-BC APRN FAANP and I am a Nurse Practitioner. I am the Chair of the Coalition of Advanced Practice Nurses.

I am writing testimony for HB 5163: AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

We request to be included in the **Sec 2 Subsection (b) to (e) , inclusive, of section 17a-667a of the 2018 supplement item 2(d) and (e)** regarding work groups for the CT Alcohol and Drug Policy council for participation in these work groups. Opioids continue to plague our state and I am happy to report many APRNs have obtained X waivers after intensive training to prescribe MAT. APRNS continue to be part of the solution.

We appreciate and with gratitude thank you for incorporating statutory language as "housekeeping" measures since the passage of PA 14-23 SB #36 allowing APRN Full Practice Authority after 2000 hours and three years under a collaborative agreement with a MD. Every year we bring forth a listing of statutory changes to mirror paperwork to the practice authority of an APRN. These statues have been vetted by the various departments. This is an arduous process taking years to complete. I have attached a listing of the statues and the various departments who have signed off on them for your consideration.

Lastly, regarding the Department of Consumer Protection

Sec. 21a-252 (g) –APRNs were welcomed to the table to discuss language to amend this section of the DCP statute that would set limits on prescribers’ behavior around Schedule 2-5 substance prescribing for ourselves and family members. While we are supportive of this effort and the language that was constructed to meet this goal, the existing statute contains language not reflective of the current CT practice authority of an APRN – placing us in supervisory relationship with PAs and MDs. If this remains in the bill, we cannot support it. Having said that, in this section, we would simply like to be removed from the sentence, and the rest of the section, and statutory language, can stand and support combating the opioid crisis in very appropriate ways.

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These are the sections that we received approval (s) from respective agencies:

EMERGENCY CERTIFICATION

17a-78a Hospitalization of child for diagnosis or treatment of mental disorder under EC or Diagnostic Cert. **ADD APRN**

17a-81 Parental Consent – says “the physician concludes that treatment is necessary_____” **ADD APRN BC**

WORKERS’ COMP:

31-275 (16) – PTSD Firefighters – THIS SATUTE SAYS BOARD CERTIFIED MENTAL HEALTH PROFESSIONAL. **PSYCH APRNs**

31-294d –& 31-294d (b), 31-294d(c) , 31-294d (f) Workers’ Comp – ADD APRNs to Commissioner’s List
from which employers must choose

31-294i Workers’ Comp – To allow APRNs to give physical exams to firefighters and police - ADD APRN

31 – 296 (c)(2)(B) WORKERS’ COMP – where it says claimant’s “attending physician” – ADD APRN

INSURANCE STATUTES

38a – 472a Defining Medical Providers - ADD CHAPTER 378

38a – 478q Use of Labs refers to providers listed in 38a-478 - 38A-478 MUST CHANGE (as noted above)

38a – 488a (c) & (d) Benefits payable – ADD APRN TO SECTIONS (c), (d), (f),(g), (h) and (i)

38a – 492e (b) RE: DIABETES “subsequent diag. by physician” – ADD APRN

38a – 499 – Mandates coverage for services of NPs and CNSs and others – language should be updated

38a-503 Section A includes APRN but (c) states “physician’s office” and “physician” – ADD APRN

38a – 514b(5) diagnosis Autism – & 514b (f) (1) review of treatment plan - ADD APRN

38a – 518e (b) DIABETES says “subsequent diagnosis of a physician – ADD APRN

38A-530 same as 38a-503 (c) ADD APRN

Note: DMV indicated sections were codified in SB 67 that passed last session.

These are sections that are under DPH:

BC = BOARD CERTIFIED

P-MH = PSYCHIATRIC MENTAL HEALTH

SUGGESTED STATUTORY LANGUAGE RE PSYCH WHEN *NEEDED IS*: Advanced Practice Registered Nurse licensed under Chapter 378 who is Board Certified as a Psychiatric Mental Health provider by the American Nurses Credentialing Center (ANCC).

4-105 right to inspect records along with others – ADD APRN

7-51a Vital Records – ADD APRN

17b-233 Application to Newington’s Children’s Hospital - ADD APRN

17b-236 Admission to the Children’s Center – ADD APRN

17b – 278d To order neuro-psych testing for children with cancer who are in the HUSKY PROGRAM – **ADD APRN**

19a – 2a DPH Powers & Duties – **ADD APRN**

19a – 26 State Laboratories – **ADD APRN**

19a – 490b - Vets Health Records – **ADD APRN**

19a – 551 NH Management of personal funds – mentally incapable Title 18 & 19 - **ADD APRN**

19a-570 -19a-579 ALL DEAL WITH LIFE SUPPORT FORMS, HEALTH CARE REPRESENTATIVE AND LIVING WILLS - (FOLLOW-UP DNR LAW)

19a-570 – Living Will Def. add APRN comply with 2016 law.

19a-575a Life Support FORMS refers only to “physician” need add APRN comply with 2016 law

19a-577 – refers to attending physician – **ADD APRN**

19a-578 LIVING WILL - says physician and other health care providers **ADD APRN**

19a-579 This Living Will Statute was negotiated out of Bill #67 – we agreed just to be accommodating – refers to attending physician - **ADD APRN**

DISCLOSURE - THERE ARE DISCLOSURE SSUES UNRELATED TO COURT PROCEEDINGS AND DISCLOSURE ISSUES RELATED TO EVIDENCE.

52 – 146 (c) (d) (e) (f) are statutes addressing disclosure in evidence and these statutes do not list APRNs

52 – 584 MALPRACTICE STATUTE OF LIMITATIONS LISTS – physicians, surgeons, dentists, podiatrists, chiropractors, hospital and sanitariums – ADD APRN