

Public Health Committee Testimony – March 4, 2019

RB291: An Act Concerning Scope of Practice of Advance Practice Registered Nurses

Good afternoon Senator Lesser and the Public Health Committee. My name is Stephanie Luon, and I am a licensed pharmacist practicing in the ambulatory care clinic setting within a health system in the state of Connecticut and a member of the Connecticut Society of Health-Systems Pharmacists. I am submitting written testimony on behalf of myself in strong support of RB 921: An Act Concerning the Scope of Practice of Advance Practice Registered Nurses.

This bill amends the current law of collaborative practice authority agreements between physicians and pharmacists (Section 20-631 of the General Statutes) and adds that pharmacists can enter into these agreements with advanced practice registered nurses licensed under chapter 378. This law was originally passed in 2008 and has allowed pharmacists to successfully establish collaborative practice agreements with physicians for numerous chronic conditions. Collaborative practice agreements permit pharmacists to initiate, modify, or discontinue therapy, administer medication, and order associated lab tests in accordance with the protocol.

Advance practice registered nurses now often have their own patient panels and are not practicing under a licensed physician. Currently, pharmacists are unable to provide care to patients referred from an advance practice registered nurse as the law solely permits collaboration between a physician and pharmacist.

Due to the shortage of primary care physicians, advance practice registered nurses and pharmacists are frequently filling in gaps of care. Working pursuant to collaborative practice agreements, pharmacists have demonstrated improved outcomes in quality measures such as better controlled diabetes, reduced blood pressure, medication adherence, and decreased asthma exacerbations requiring emergency department utilization. Pharmacists are highly educated and graduate with a Doctor of Pharmacy Degree. They then often participate in one or two years of additional residency training and sometimes fellowship training before settling into clinical roles.

Pharmacists have the ability to work closely with patients and check in frequently if necessary to assist, where they may only be able to see their primary care provider every several months. Improvement in these quality measures contribute to cost savings and help our patients to live healthier and happier lives. Expansion of the collaborative practice agreements to include collaboration between advance practice registered nurses and pharmacists increases access to care, which can help provide additional care to underserved populations cared for by advanced practice registered nurses. This allows pharmacists to help close the gap in healthcare disparities in our communities.

For these reasons, I support the addition of advance practice registered nurses to the list of health care providers who can engage in collaborative practice agreements with pharmacists to improve access to care to patients in the state of Connecticut.