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House of Representatives COMMONWEALTH OF PENNSYLVANIA HARRISBURG

COMMITTEES

PROFESSIONAL LICENSURE - MAJORITY CHAIRMAN FINANCE RULES MAJORITY POLICY CAPITOL PRESERVATION

January 16, 2008

FAX: (717) 295-7816

Mr. Kim Kaufman Executive Director Independent Regulatory Review Commission 333 Market Street, 14th Floor Harrisburg, PA 17101

RE: Proposed Regulation 16A-4926 State Board of Medicine Nurse Midwife Prescriptive Authority

Dear Mr. Kaufman:

The House Professional Licensure Committee on this date voted to take no formal action on Regulation 16A-4926 until final regulation is promulgated and submit the following comments:

- 1. The Committee questions the reason for including a definition of "midwife colleague" in the regulations when no other medical practitioner has a definition for a colleague.
- 2. The Committee requests clarification of the fee in §16.13. Is the \$15 fee for "verification" of licensure" required only once, or if a licensee is licensed in more than one state, does the licensee pay for verification in each state?
- 3. Section 18.6a(a)(2)(i) and (ii) state that a midwife "may not" act where the statute states the midwife "shall not" act. The committee requests consistency with the statute to avoid any confusion or misinterpreted intent.
- 4. In §18.6a(d)(1), the Committee questions the use of the word "ready" in the phrase "ready reference file" as it does not add any additional meaning to the phrase. The Committee would also suggest removal of the word "or" in the first sentence. The use of the word "or" suggests that a prescription would not need to be recorded in the patient's records/chart as a manner of habit. The Committee is under the belief that all drugs should be recorded in the patient's chart, regardless of whether or not they are also kept in a "ready reference file."
- 5. In 18.9(a), the Committee questions the need for the sentence "Failure to notify the Board ... may result in failure to receive pertinent material distributed by the Board." It is an obvious statement, but places no burden or threat of punishment on the midwife and may want to be removed.

- 6. Section 18.9(d) requires the midwife to notify the Board within 30 days of the request to place the midwife's authority on inactive status. The Committee is unclear of the procedure in this section. Wouldn't requesting inactive status give the Board notice of that request?
- 7. The Medical Board oversees physician assistants and CRNPs. In the regulations for both physician assistants (49 Pa. Code § 18.158) and CRNPs (49 Pa. Code § 18.54), the regulation requires the collaborating physician's signature and cites to §16.9. The Committee requests an explanation as to why this was not included for the midwife.
- 8. Further, CRNPs are prohibited from delegating their prescriptive authority assigned by the collaborating physician to another health care provider according to 49 Pa. Code §18.54. The Committee recommends a similar provision in the midwife regulations.
- 9. In the statute at 63 P.S. §35(c)(2)(iv)(A), a nurse-midwife may prescribe a schedule III or IV controlled substance limited to a 30 day dosage, and may only be refilled with the approval of the collaborating physician. The Committee requests that this provision be addressed in the regulations as well.

Sincerely,

P. Michael Sturla

Chairman, House Professional Licensure Committee