

2729

November 9, 2008

RECEIVED

2008 NOV 18 PM 1:42

Ann Steffanic  
Board Administrator  
Pennsylvania State Board of Nursing  
P.O. Box 2649  
Harrisburg, PA 17105-2649

INDEPENDENT REGULATORY  
REVIEW COMMISSION

Dr. Ms. Ann Steffanic:

I am writing in regards to the recent evaluation in the state regulations for Nurse Practitioners. In particular, I would like to give some personal experience to support the following changes:

1. Allow 30-day prescriptions for Schedule II controlled substances
2. Allow 90-day prescriptions for Schedule III and IV drugs

I am an oncology nurse practitioner and work in the area of radiation oncology. On Fridays I see patients independently. My primary function is to treat and educate my patients on the side effects experienced during radiation. Many of my patients experience pain. They are even referred for radiation treatments to treat pain. Unfortunately, the effects of radiation are not immediate and patients are supported with narcotics. Furthermore, radiation in itself can also cause pain during treatments (typically 6 weeks long) and lasting 3-4 weeks after the completion of actual radiation treatments. Therefore, pain medications are required for more than a 72-hour period.

Majority of the patients I treat are in a lower income class. I would say approximately 40% of the patients I write a prescription for are forced to pay \$40 or more for only 3 days of medication, instead of a 30 day amount. This may not seem like a large amount, but let us look at the cost my patient Mr, J, a head and neck cancer patient that received concurrent chemoradiation, paid for treatment. Remember his sole income was his disability check.

- Daily co-payment for radiation  $\$35 \times 6 \text{ weeks} = \$1050$
- Salagen for xerostomia = \$40
- Neurontin for pain =  $\$40 \times 1 \text{ refill} = \$80$
- **Oxyfast for pain =  $\$40 \times 2 \text{ refills (2 required due to my 72-hour limit)} = \$120$**
- Viscous Lidocaine for pain = \$40
- Zofran for nausea = \$60
- Compazine for nausea = \$40
- Tube Feeding = \$120
- Other Medications for other health issues = \$200

**TOTAL = \$1750** out-of-pocket cost for 6 weeks of treatment. This total does not include the 1-2 month recovery required after this treatment.

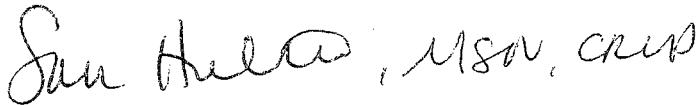
Forty dollars can make a big difference if you are paying these expenses on a very limited income. Mr. J is not the only patient that experiences these costs. The only other option to save the co-payment is for me to contact the patient's medical oncologist to write a script and have the patient pick it up. This could mean that the patient drives 30 minutes to 1 hour for a prescription that I would be capable of providing.

I believe my patients deserve better. By passing new regulations for nurse practitioner prescription authority I can provide other patients like Mr. J more efficient and cost effective care.

I am excited and honored to be a nurse practitioner in the state of Pennsylvania. However, I think it is time for this state to realize what other states have recognized; nurse practitioners can prescribe Schedule II drugs for 30-days and Schedule III and IV drugs for 90 days safely and to the benefit of the patient.

Thank you for your time and consideration.

Sincerely,

A handwritten signature in cursive script that reads "Sara Hollstein, MSN, CRNP".

Sara Hollstein, MSN, CRNP  
Penn Radiation Oncology at Phoenixville Hospital  
University of Pennsylvania Health System