



Three Rivers Chapter
Pittsburgh, PA

2729

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November 20, 2008

To: Ann Steffanic
Board Administrator
Pennsylvania State Board of Nursing
Re: 16A-5124 CRNP General Revisions

INDEPENDENT REGULATORY
REVIEW COMMISSION

2008 DEC - 1 PM 1:34

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Dear Ms Steffanic and Board of Nursing Members:

On behalf of the Three Rivers NAPNAP Chapter, we would like to offer a public response to the recently proposed CRNP regulations in the Pennsylvania Bulletin. Our membership is made up of 80 Pediatric and Family Nurse Practitioners who provide health care to children and adolescents in a variety of settings in Allegheny, Westmoreland and Butler Counties. Our members provide high quality, cost effective health care to children and adolescents in hospitals, outpatient specialty clinics, primary care practices as well as in schools, mental health facilities and health departments.

We are writing to request your support for the proposed CRNP regulations. One of the major issues for our members is the inability to prescribe Schedule II drugs for more than 72 hours. Many of our members assess, diagnose, and treat children and adolescents who have Attention Deficit Hyperactivity Disorder (ADHD) and other mental health issues that are treated with Schedule II drugs such as methylphenidate and dextroamphetamine. Currently CRNP's can prescribe schedule II drugs for a 72 hour time frame. The proposed regulations would increase this time frame to 30 days. This will allow the CRNP to assist patients and their families by meeting their patients' needs and increase access to ongoing care.

Currently CRNP's can prescribe scheduled III drugs for 30 days. Proposed regulations will allow CRNP's to again meet the client's needs for health care allowing them to prescribe up to a 90 day supply. This will allow patients with insurance to participate in their required mail order prescription program for chronic medications. This saves the patient and 3rd party payer's money in co-pays, and unneeded office appointments.

We are also requesting your support for the removal of the 4:1 physician to CRNP ratio. Practitioners who function in federally qualified health professional shortage areas, rural health centers, and primary care offices are affected by this antiquated regulation. Another consideration is the fact that the prescriptive collaborative agreement requires a back up physician. This proves to be more challenging and may impede/inhibit patient care. As CRNP's do not require supervision or physician presence to practice, it does not make good sense to limit access to care.

Three Rivers NAPNAP members strongly encourage you to support passage of support of the proposed Pennsylvania State Board of Nursing Rules and Regulations.

Sincerely,

Shenoa Bernstein, MSN, CRNP
President Three Rivers NAPNAP