

SEWICKLEY MEDICAL ONCOLOGY AND HEMATOLOGY GROUP

UPMC CANCER CENTERS

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November 20, 2008

CRNP General Revisions 16A-5124
Attn: Ann Stefanick, Board Administrator
State Board of Nursing
P. O. Box 2649
Harrisburg, PA 17105-2649

INDEPENDENT REGULATORY
REVIEW COMMISSION

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Dear Ms. Stefanick:

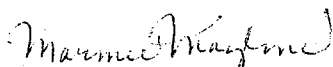
The purpose of this letter is to communicate my support for the proposed CRNP regulations revisions set forth by the Board of Nursing. I currently practice as an oncology nurse practitioner in a community based setting. My passion for the care of oncology patients I feel is echoed by many nurse practitioners across our state of Pennsylvania. The changes proposed will make significant strides in increasing access of care of our patients both in our practice and in many communities throughout our state.

The proposed changes will not only improve access to healthcare for Pennsylvania, but it will remove barriers to practice and be more consistent with the expanded CRNP scope of practice authorized by Act 48. The removal of the 4:1 physician to CRNP ratio under the current regulations has created much difficulty for my colleagues in rural practices and center city clinics. This will become more problematic as the number of new physicians is decreasing. The current regulations regarding Schedule 2, 3, and 4 drugs prescriptions greatly obstruct my care to patients with cancer pain in my oncology practice. The current regulations allowing for a 72 hour prescription for Schedule 2 and 30 days for Schedule 3 and 4 medications are a barrier to the continuity of care and cost effective care that nurse practitioners are able to deliver.

There are many patients in my oncology practice who require the use of pain management for intractable pain as their disease progresses or while undergoing systemic chemotherapy and radiation therapy. In order to adhere to the current regulation, I must seek out a physician in order to provide pain management regimen for these patients. Patients who I see in the office setting many times will reach me at home for symptom management. Keeping patients comfortable at any stage of the cancer experience is extremely important. Financial issues place additional stresses on patients along with the diagnosis of cancer and cancer treatment and extra costs many times are incurred. The requirement for the use of scheduled medications in the oncology patient can be necessary for several months or longer. Many of the patients are only able to realize cost savings by using a mail order program and reducing co-payment cost when it is a 90 day supply. The current regulation does not allow CRNP's to fully manage patient needs either in the cancer treatment phase or hospice phase of their illness.

With the goal of improving access to healthcare for all Pennsylvania residents, I strongly support the approval of these rules and regulations and feel confident that they will provide another step to improving the healthcare of residents in our state of Pennsylvania.

Sincerely,



Marmee Maylone, D.N.P., C.R.N.P., A.O.C.N.P.

MM/jml