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## CITY OF PHILADELPHIA

OFFICE OF HEALTH AND OPPORTUNITY Municipal Services Building 1401 JFK Boulevard, Room 600 Philadelphia, Pennsylvania 19102 Tel (215) 686-9009 DONALD F. SCHWARZ, MD, MPH
Deputy Mayor, Health & Opportunity
Health Commissioner

December 7<sup>th</sup>, 2008

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

Re: No. 16A-5124 CRNP General Revisions

Dear Ms. Steffanic:

I am writing to provide public comment to the above-referenced proposed rulemaking regarding regulations for Certified, Registered Nurse Practitioners in Pennsylvania.

I want to begin by making it clear that for the City of Philadelphia's Department of Public Health, our highest priorities need to be the health and safety of Philadelphia's citizenry. I am very sensitive to the political climate in which the new rules have been proposed, and wish to state at the outset that for the Department, our primary concern with the existing regulations centers on restrictions in Pennsylvania which constrain the ability of qualified practitioners to provide high-quality primary care to those who lack care in the City. More so than in other states, in Pennsylvania current legislation and regulation constrains nurse practitioners from independent practice in underserved communities. It is my belief that this set of constraints in Pennsylvania neither provides relevant safeguards for the public nor promotes public health. In particular, in Delaware while collaborative agreements are in place between nurse practitioners and physicians, both statute and regulation support more independence in the practice of CRNPs. In Maryland nurse practitioners have written agreements with collaborating physicians, but then perform independently a series of functions that are still deemed dependent in Pennsylvania. New Jersey allows full prescribing authority without limits on Schedule II-IV medications as long as the prescription is in conformance with jointly developed protocols. Ohio has expanded the independent practice of CRNPs in the realm of primary care.

Given both the existing need in urban and rural communities in the Commonwealth for better access to primary care and the likely worsening of medical underservice with the worsening global economy, we support the expansion of practice by primary care nurse practitioners, both with regard to prescriptive authority and in practice independence.

We appreciate the Board of Nursing's work in this area.

Sincerely,

Donald F. Schwarz, MD, MPH