

**PRESENTATION OF THE
BOARD OF NURSING**

TO THE HOUSE COMMITTEE ON
CONSUMER PROTECTION & COMMERCE

TWENTY-NINTH LEGISLATURE
Regular Session of 2017

Tuesday, February 28, 2017
2:00 p.m.

TESTIMONY ON HOUSE BILL NO. 912, H.D. 1, RELATING TO NURSING.

TO THE HONORABLE ANGUS L.K. MCKELVEY, CHAIR,
AND MEMBERS OF THE COMMITTEE:

My name is Lee Ann Teshima, Executive Officer for the Board of Nursing (“Board”). I appreciate the opportunity to testify on House Bill No. 912, H.D. 1, Relating to Nursing, which would allow an advanced practice registered nurse (“APRN”) who holds a national certification in a psychiatric specialization, to offer care and services to minors and patients in assisted community treatment programs similar to care and services offered by physicians and other health care service providers.

The Board supports this bill and requests an effective date of “upon approval”. This bill would recognize qualified APRNs to provide primary medical care services to adolescents. For licensure, APRNs must complete a graduate-level degree in nursing practice and maintain national certification in their practice specialty. Continuing education is required for both prescriptive authority and the maintenance of national certification.

Testimony on House Bill No. 912, H.D. 1
Tuesday, February 28, 2017
Page 2

Removing “barriers” by recognizing that APRNs are qualified to provide health care services in addition to physicians and other health care providers is vital to ensuring that residents of this State are able to receive the health care they deserve.

Thank you for the opportunity to testify in support of House Bill No. 912, H.D. 1, with a requested amendment to the effective date.

**Written Testimony Presented Before the
House Committee on Consumer Protection & Commerce
February 28, 2017 at 2:00 PM**

**by
Laura Westphal, RN, MBA, CPHQ**

AONE Hawaii

HB912, HD1 RELATING TO NURSING

Dear Chair McKelvey, Vice Chair Ichiyama, and members of the House Committee on Consumer Protection & Commerce. Thank you for hearing testimony for HB912, HD1 Relating to Nursing. **American Organization of Nurse Executives Hawaii (AONE)** would like to testify in strong support with amendments of this measure.

This bill identifies two areas in the Hawai'i Revised Statutes (HRS) and proposed amendments that add Advanced Practice Registered Nurses (APRNs) to achieve improved access to safe, quality care.

Assisted Community Treatment, H.R.S 334-121, 122, 123, 126, 127, 129 and 131

The sections relating to the Assisted Community Treatment (ACT) program proposes to add APRNs with prescriptive authority into the list of expert witnesses and specialists who participate in the ACT program for severely mentally ill patients. These statutes, developed in 2013 by Act 221, S.B. 310 C.D. 1, established an assisted community treatment program in lieu of the involuntary outpatient treatment program for severely mentally ill individuals who meet specified criteria.

APRNs, including Clinical Nurse Specialists and Certified Nurse Practitioners may specialize in psychiatric mental health. Working within their scope as determined by Chapter 457 Nurse Practice Act, other statutes in the Hawai'i Revised Statutes, and within their national board certification, nurses with a psychiatric health specialty and hold prescriptive authority are highly qualified to assess, diagnose, treat, and prescribe to patients with mental health conditions. Nursing specialization continues to evolve and new specializations recognized. New specialties in APRN nursing were launched in 2012 and 2014 by nationally accredited certification bodies; each new specialization requires its own standards for education, clinical training, and has its own national board examination.

***AONE Hawaii** requests that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. Further, **AONE Hawaii** requests that this bill be allowed to flex in the future and not require frequent legislative updates. Language pertaining to APRN*

specialization defers to the Hawai'i Board of Nursing (HBON) to regulate which specializations meet the qualifications needed to be a licensed APRN in the state.

The Hawai'i State Health Innovation Plan¹ (HSHIP) identifies that there is a shortage of Behavioral Health Specialists. This plan further identifies the term "behavioral health specialist" to include professionals who are able to bill for their mental health and substance abuse treatment services, such as psychologists, social workers, marriage and family therapists, CSACs, Physician Assistants and APRNs.

To align the ACT program statutes with the HSHIP plan to improve access to care, and to enable currently practicing APRNs to deliver care to their full scope of practice, the amendments propose to add APRNs with prescriptive authority to the qualified providers who serve as expert witnesses and to develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists to the people of Hawai'i the most in need of this care.

Adolescent consent to Behavioral Health Services, H.R.S 577-29, and Legal Capacity of Minor Regarding Medical Care 577A-2, 3 and 4

These sections relate to adolescents' ability to consent to medical and health care services to a qualified health provider. In HRS 577D-1, Primary Medical Services for Minors Without Support, the statute identifies that minors aged 14-17 years and without support may receive primary medical care and services² from "'Licensed health care practitioner" includes dentists licensed under chapter 448, physicians licensed under chapter 453, physician assistants licensed under chapter 453, and advanced practice registered nurses licensed under chapter 457."

The amendments to Chapter 577 in this bill propose to include behavioral health services as defined in HRS 577-29 and family planning services and medical care and services, as defined in HRS 577A-2, 3 and 4 such that adolescents aged 14-17 may consent to and receive care by qualified APRNs.

¹ <https://governor.hawaii.gov/wp-content/uploads/2015/06/Hawaii-State-Health-System-Innovation-Plan-Appendices-June-2016.pdf>

² **[§577D-1] Definitions.** "Primary medical care and services" means health services that include screening, counseling, immunizations, medication, and treatment of illnesses and medical conditions customarily provided by licensed health care practitioners in an outpatient setting. As used in this chapter, "primary medical care and services" does not include invasive care, such as surgery, that goes beyond standard injections, laceration care, or treatment of simple abscesses.

The Department of Health 2015 Strategic Plan³ notes that improving access to care and family planning services may greatly decrease unintended pregnancies, which are associated with early tobacco exposure, alcohol and other substances, late prenatal care, preterm birth, and other negative birth outcomes. Additionally, the Hawai'i State Health Innovation Plan (HSHIP) released in 2016 identified women of childbearing age and adolescents age 12-17 as primary targets to receive enhanced behavioral health interventions by qualified health providers.

The HSHIP reports a projected shortage of 1,600 physicians and a shortage of General and Family Practice Physicians by 34.6%, statewide. APRNs have nearly doubled in in-state number from 535 APRNs in 2005 to 958 in 2015. APRN education and certification may include adolescent care as well as family planning services, medical care and services, and psychiatric mental health services. APRNs with specialties in these areas and populations are well prepared to provide safe, quality care for these populations. Simultaneously, by allowing adolescents to consent to this care by APRNs, APRNs may support the State's drive to improve family planning and behavioral health access to care and early intervention, as well as improve overall access to care to vulnerable populations.

A similar request to further define the APRNs in Section 557-29 related to psychiatric specialty is presented at this time. AONE Hawaii respectfully requests your consideration of adding the requirement that the APRN must hold a psychiatric specialty. AONE Hawaii also asks that this section's reference to APRN specialty defers to the HBON for the qualification of which APRN specialties those may be as APRN specializations continue to evolve and be developed.

Thank you for our longstanding support for APRNs and ensuring access to care for Hawai'i's people. **AONE Hawaii** respectfully requests the favorable vote with amendments on this measure.

Proposed amendments attached.

³ <https://health.hawaii.gov/opppd/files/2013/04/Hawaii-Department-of-Health-Strategic-Plan-2015-2018-081616.pdf>

Page 2, lines 10-11

(2) The person is unlikely to live safely in the community without available supervision based on the professional opinion of a psychiatrist[;] or advanced practice registered nurse who holds a national certification in a psychiatric specialization; ~~and~~

Page 4, line 2

""Advanced practice registered nurse" or "APRN" means a registered nurse licensed to practice in this State who has met the qualifications set forth in chapter 457 and this part, and who because of advanced education and specialized clinical training, is authorized to assess, screen, diagnose, order, utilize, or perform medical, therapeutic, preventive, or corrective measures and holds a national certification in a psychiatric specialization.

Page 10, line 14

(6) An advanced practice registered nurse licensed pursuant to chapter 457 and holds a national certification in a psychiatric specialization.

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 24, 2017 1:14 PM
To: CPCtestimony
Cc: wailua@aya.yale.edu
Subject: Submitted testimony for HB912 on Feb 28, 2017 14:00PM

HB912

Submitted on: 2/24/2017

Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman	Hawaii Assoc. of Professional Nurses	Support	No

Comments: Advance practice registered nurses, APRNs, including Clinical Nurse Specialists and Certified Nurse Practitioners may specialize in psychiatric mental health. Working within their scope as determined by HAR 457, the Nurse Practice Act, other statutes in the Hawai'i Revised Statutes, and within their national board certification, APRNs are highly qualified to assess, diagnose, treat, and prescribe to patients with mental health conditions. In many cases, the SPMI population is being treated by psychiatric APRNs as their primary care providers, and these are the providers who would be making continuous assessments and decisions as to the level of psychiatric care needed by their patients. These are the providers who should be communicating and collaborating with the judicial system in determining if these patients can be treated successfully as outpatients in the community. HAPN strongly supports this bill and humbly requests your committee's support to pass the bill out of committee to the full chamber. Mahalo for your enduring support of nursing and of the right of our citizens to access to care by APRNs. Warmest Aloha, Wailua Brandman APRN FAANP, Chair, HAPN Legislative Committee

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**Written Testimony Presented Before the
House Committee on Consumer Protection & Commerce
February 28, 2017 at 2:00 PM
by
Laura Reichhardt, NP-C, APRN, Director
Hawai'i State Center for Nursing
University of Hawai'i at Mānoa**

HB912, HD1 RELATING TO NURSING

Dear Chair McKelvey, Vice Chair Ichiyama, and members of the House Committee on Consumer Protection & Commerce. Thank you for hearing testimony for HB912, HD1 Relating to Nursing. I am the Director of the Hawai'i State Center of Nursing and would like to testify in strong support with amendments of this measure.

This bill identifies two areas in the Hawai'i Revised Statutes (HRS) and proposed amendments that add Advanced Practice Registered Nurses (APRNs) to achieve improved access to safe, quality care.

Assisted Community Treatment, H.R.S 334-121, 122, 123, 126, 127, 129 and 131

The sections relating to the Assisted Community Treatment (ACT) program proposes to add APRNs with prescriptive authority into the list of expert witnesses and specialists who participate in the ACT program for severely mentally ill patients. These statutes, developed in 2013 by Act 221, S.B. 310 C.D. 1, established an assisted community treatment program in lieu of the involuntary outpatient treatment program for severely mentally ill individuals who meet specified criteria.

APRNs, including Clinical Nurse Specialists and Certified Nurse Practitioners may specialize in psychiatric mental health. Working within their scope as determined by Chapter 457 Nurse Practice Act, other statutes in the Hawai'i Revised Statutes, and within their national board certification, nurses with a psychiatric health specialty and hold prescriptive authority are highly qualified to assess, diagnose, treat, and prescribe to patients with mental health conditions. Nursing specialization continues to evolve and new specializations recognized. New specialties in APRN nursing were launched in 2012 and 2014 by nationally accredited certification bodies; each new specialization requires its own standards for education, clinical training, and has its own national board examination.

The HSCN requests that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. Further, the HSCN requests that this bill be allowed to flex in the future and not require frequent legislative updates. Language pertaining to APRN specialization defers to the Hawai'i Board of Nursing (HBON) to regulate which specializations meet the qualifications needed to be a licensed APRN in the state.

The Hawai'i State Health Innovation Plan¹ (HSHIP) identifies that there is a shortage of Behavioral Health Specialists. This plan further identifies the term "behavioral health specialist" to include professionals who are able to bill for their mental health and substance abuse treatment services, such as psychologists, social workers, marriage and family therapists, CSACs, Physician Assistants and APRNs.

To align the ACT program statutes with the HSHIP plan to improve access to care, and to enable currently practicing APRNs to deliver care to their full scope of practice, the amendments propose to add APRNs with prescriptive authority to the qualified providers who serve as expert witnesses and to develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists to the people of Hawai'i the most in need of this care.

Adolescent consent to Behavioral Health Services, H.R.S 577-29, and Legal Capacity of Minor Regarding Medical Care 577A-2, 3 and 4

These sections relate to adolescents' ability to consent to medical and health care services to a qualified health provider. In HRS 577D-1, Primary Medical Services for Minors Without Support, the statute identifies that minors aged 14-17 years and without support may receive primary medical care and services² from "'Licensed health care practitioner" includes dentists licensed under chapter 448, physicians licensed under chapter 453, physician assistants licensed under chapter 453, and advanced practice registered nurses licensed under chapter 457."

¹ <https://governor.hawaii.gov/wp-content/uploads/2015/06/Hawaii-State-Health-System-Innovation-Plan-Appendices-June-2016.pdf>

² **[§577D-1] Definitions.** "Primary medical care and services" means health services that include screening, counseling, immunizations, medication, and treatment of illnesses and medical conditions customarily provided by licensed health care practitioners in an outpatient setting. As used in this chapter, "primary medical care and services" does not include invasive care, such as surgery, that goes beyond standard injections, laceration care, or treatment of simple abscesses.

The amendments to Chapter 577 in this bill propose to include behavioral health services as defined in HRS 577-29 and family planning services and medical care and services, as defined in HRS 577A-2, 3 and 4 such that adolescents aged 14-17 may consent to and receive care by qualified APRNs.

The Department of Health 2015 Strategic Plan³ notes that improving access to care and family planning services may greatly decrease unintended pregnancies, which are associated with early tobacco exposure, alcohol and other substances, late prenatal care, preterm birth, and other negative birth outcomes. Additionally, the Hawai'i State Health Innovation Plan (HSHIP) released in 2016 identified women of childbearing age and adolescents age 12-17 as primary targets to receive enhanced behavioral health interventions by qualified health providers.

The HSHIP reports a projected shortage of 1,600 physicians and a shortage of General and Family Practice Physicians by 34.6%, statewide. APRNs have nearly doubled in in-state number from 535 APRNs in 2005 to 958 in 2015. APRN education and certification may include adolescent care as well as family planning services, medical care and services, and psychiatric mental health services. APRNs with specialties in these areas and populations are well prepared to provide safe, quality care for these populations. Simultaneously, by allowing adolescents to consent to this care by APRNs, APRNs may support the State's drive to improve family planning and behavioral health access to care and early intervention, as well as improve overall access to care to vulnerable populations.

A similar request to further define the APRNs in Section 557-29 related to psychiatric specialty is presented at this time. The HSCN respectfully requests your consideration of adding the requirement that the APRN must hold a psychiatric specialty. The HSCN also asks that this section's reference to APRN specialty defers to the HBON for the qualification of which APRN specialties those may be as APRN specializations continue to evolve and be developed.

Thank you for our longstanding support for APRNs and ensuring access to care for Hawai'i's people. The Hawai'i State Center for Nursing respectfully requests the favorable vote with amendments on this measure.

Proposed amendments attached.

³ <https://health.hawaii.gov/opppd/files/2013/04/Hawaii-Department-of-Health-Strategic-Plan-2015-2018-081616.pdf>

Page 2, lines 10-11

(2) The person is unlikely to live safely in the community without available supervision based on the professional opinion of a psychiatrist[;] or advanced practice registered nurse who holds a national certification in a psychiatric specialization; [~~and~~]

Page 4, line 2

""Advanced practice registered nurse" or "APRN" means a registered nurse licensed to practice in this State who has met the qualifications set forth in chapter 457 and this part, and who because of advanced education and specialized clinical training, is authorized to assess, screen, diagnose, order, utilize, or perform medical, therapeutic, preventive, or corrective measures and holds a national certification in a psychiatric specialization.

Page 10, line 14

(6) An advanced practice registered nurse licensed pursuant to chapter 457 and holds a national certification in a psychiatric specialization.

February 28, 2017 at 2:00PM
Conference Room 329

House Committee on Consumer Protection & Commerce

To: Representative Angus L.K. McKelvey, Chair
Representative Linda Ichiyama, Vice Chair

From: Michael Robinson
Vice President – Government Relations & Community Affairs

**Re: Testimony in Support – HB912 HD1, Relating to Advanced Practice
Registered Nurses**

My name is Michael Robinson, Vice President, Government Relations and Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

I write in support of HB912 HD1 which allows advanced practice registered nurses (APRN) to offer care and services to minors and patients in assisted community treatment programs similar to care and services offered by physicians and other health service providers.

Advanced practice registered nurses act are qualified to provide primary medical care services. Removing barriers to practice for APRNs will result in improved access to safe, timely, and quality health care for people in Hawai'i.

Thank you for the opportunity to testify in support of HB912 HD1.

LATE

TO: Chair Rep. McKelvey, Vice Chair Rep. Ichiyama, and members, Committee on Consumer Protection and Commerce

FR: Marya Grambs, Co-Chair, Mental Health Task Force and Chair, Assisted Community Treatment (ACT) Working Group

RE: HB 912 HD1, Relating to Nursing; IN STRONG SUPPORT WITH COMMENTS

HEARING: 2:00 pm room 329

Thank you for the opportunity to testify in STRONG SUPPORT WITH COMMENTS. HB912 Sections 1-8 of this bill concern the Assisted Community Treatment (ACT) law. This law is designed to assist those members of our community who have severe mental illness and/or substance use disorder, are not able to live safely in the community, and cycle in and out of the Emergency Room, psychiatric hospital, and jail. The ACT law requires a psychiatrist to assess the individual and develop and oversee a treatment plan if the Order is granted. The purpose of this bill is to expand the type of health professional that can prepare, submit, and oversee an order for Assisted Community Treatment.

To date there has been no successful ACT order granted for the population described. One of the reasons is the severe lack of psychiatrists available to file and oversee ACT orders. This bill with the proposed amendments seeks to reduce that roadblock by enabling Advance Practice Nurse Practitioners with prescriptive authority and psychiatric specialization to file such an order and manage its implementation. This will significantly increase the pool of health professionals available to be involved in ACT orders, and make it more possible for community agencies and other interested parties to do be successful in obtaining the orders.

This bill is an outcome of dozens of advocates, community mental health agencies, mental health professionals, and family members who have been participating in the Mental Health Task Force (chaired by Rep. Belatti) as well as in the ACT Working Group, which I convene. We have been discussing the critically needed changes in the ACT law so it could be properly implemented.

We request that bill be amended as follows:

SECTION 3. Section 334-122, Hawaii Revised Statutes, is amended by adding two new definitions to be appropriately inserted and to read as follows:

““Advanced practice registered nurse” means a registered nurse licensed to practice in this State who has met the qualifications set forth in chapter 457 and this part; because of advanced education and specialized clinical training, is authorized to assess, screen, diagnose, order, utilize, or perform medical, therapeutic, preventive, or corrective measures; has prescriptive authority; and holds a national certification in a psychiatric specialization.

Thank you for the opportunity to submit this testimony.

LATE

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 28, 2017 7:41 AM
To: CPCtestimony
Cc: hlusk@chowproject.org
Subject: Submitted testimony for HB912 on Feb 28, 2017 14:00PM

HB912

Submitted on: 2/28/2017
Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Heather Lusk	The CHOW Project	Support	No

Comments: Thank you for the opportunity to testify in support of this measure. The purpose of Sections 1-8 of this bill is to expand the type of health professional that can prepare, submit and oversee an order for Assisted Community Treatment (ACT). The ACT law is designed to assist members of our community have severe mental illness and/or substance use disorder and are unable to live safely in the community. These are the individuals who cycle in and out of the Emergency Room, psychiatric hospital, and jail and may live in degrading circumstances on the street. However, the nature of their illness is such that they do not know they are ill, and therefore they refuse treatment. Moreover, research shows that the longer a person goes untreated, the more the disease progresses and the less favorable is the prognosis. ACT requires a psychiatrist to assess the individual and develop and oversee a treatment plan if the Order is granted. The severe lack of psychiatrists is a roadblock to implementation of the law. This bill seeks to reduce that barrier by enabling Advance Practice Nurse Practitioners with prescriptive authority and psychiatric specialization to file ACT Orders. This will significantly increase the pool of health professionals available to be involved in such orders, and make it more possible for community agencies and other interested parties to file.

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Cc: lenora@hawaii.edu
Subject: Submitted testimony for HB912 on Feb 28, 2017 14:00PM

HB912

Submitted on: 2/24/2017

Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Lenora Lorenzo	Individual	Support	No

Comments: Aloha, I agree with the amendment to clarify the APRN be certified in mental health. This is more consistent with the needs of this population for mental health services. Mahalo for your support of this bill to increase access to care for our ohana.

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**Written Testimony Presented Before the
House Committee on Consumer Protection & Commerce
February 28, 2017 at 2:00 PM
By
Susan Lee BSN, RN, WCC**

HB912, HD1 RELATING TO NURSING

Dear Chair McKelvey, Vice Chair Ichiyama, and members of the House Committee on Consumer Protection & Commerce. Thank you for hearing testimony for HB912, HD1 Relating to Nursing. **Susan Lee** would like to testify in strong support with amendments of this measure.

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Susan Lee requests that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. Further, Susan Lee requests that this bill be allowed to flex in the future and not require frequent legislative updates. Language pertaining to APRN specialization defers to the Hawai'i Board of Nursing (HBON) to regulate which specializations meet the qualifications needed to be a licensed APRN in the state.

The Hawai'i State Health Innovation Plan¹ (HSHIP) identifies that there is a shortage of Behavioral Health Specialists. This plan further identifies the term "behavioral health specialist" to include professionals who are able to bill for their mental health and substance abuse treatment services, such as psychologists, social workers, marriage and family therapists, CSACs, Physician Assistants and APRNs.

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early tobacco exposure, alcohol and other substances, late prenatal care, preterm birth, and other negative birth outcomes. Additionally, the Hawai'i State Health Innovation Plan (HSHIP) released in 2016 identified women of childbearing age and adolescents age 12-17 as primary targets to receive enhanced behavioral health interventions by qualified health providers.

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*A similar request to further define the APRNs in Section 557-29 related to psychiatric specialty is presented at this time. **Susan Lee** respectfully requests your consideration of adding the requirement that the APRN must hold a psychiatric specialty. **Susan Lee** also asks that this section's reference to APRN specialty defers to the HBON for the qualification of which APRN specialties those may be as APRN specializations continue to evolve and be developed.*

Thank you for our longstanding support for APRNs and ensuring access to care for Hawai'i's people. **Susan Lee** respectfully requests the favorable vote with amendments on this measure.

Proposed amendments attached.

Page 2, lines 10-11

(2) The person is unlikely to live safely in the community without available supervision based on the professional opinion of a psychiatrist[;] or advanced practice registered nurse who holds a national certification in a psychiatric specialization; ~~and~~

Page 4, line 2

""Advanced practice registered nurse" or "APRN" means a registered nurse licensed to practice in this State who has met the qualifications set forth in chapter 457 and this part, and who because of advanced education and specialized clinical training, is authorized to assess, screen, diagnose, order, utilize, or perform medical, therapeutic, preventive, or corrective measures and holds a national certification in a psychiatric specialization.

Page 10, line 14

(6) An advanced practice registered nurse licensed pursuant to chapter 457 and holds a national certification in a psychiatric specialization.

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 24, 2017 10:31 AM
To: CPCtestimony
Cc: kfdavis@hawaii.edu
Subject: *Submitted testimony for HB912 on Feb 28, 2017 14:00PM*

HB912

Submitted on: 2/24/2017

Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Katherine Finn Davis	Individual	Support	No

Comments:

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Cc: nuyolks@gmail.com
Subject: Submitted testimony for HB912 on Feb 28, 2017 14:00PM

HB912

Submitted on: 2/24/2017

Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kathleen Yokouchi	Individual	Support	No

Comments: Extremely strong support!!! Kathy Yokouchi

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LATE

Written Testimony Presented Before the
House Committee on Consumer Protection & Commerce

February 28, 2017 2:00 PM
by
Dr. Linda Beechinor, APRN, FNP-BC

HB912 HD1 RELATING TO NURSING

Chair McKelvey, Vice Chair Ichiyama, and members of the House Committee on Consumer Protection and Commerce thank you for this opportunity to provide testimony in strong support for HB912 HD1, Relating to Nursing.

This House bill would allow advanced practice registered nurses (APRN) to offer care and services to minors and patients in assisted community treatment (ACT) programs, similar to care and services offered by physicians and other health care service providers. This measure would expand access to services for ACT clients where there currently exists a serious need and a lack of providers.

I am a family nurse practitioner, practicing in Honolulu for the past 20 years. I have worked with an adolescent, runaway/homeless population. Currently I am working with a mostly homeless and mentally ill population in the city and county of Honolulu, for the purposes of addressing their immediate mental and physical needs, while linking them with resources to provide for their longer-term needs. I am practicing within my scope of practice as a family nurse practitioner, similar to a physician in a family practice. The ACT program however requires specialization of physicians in psychiatry to provide these needed services, so it would make sense that an APRN also be specialized in psychiatry/mental health in order to provide the same services.

Earlier testimony challenged the need for the specialized APRN to also have prescriptive authority for this position. I strongly support prescriptive authority as a necessary component of any provider's skill set in providing services within an ACT program. Prescriptive authority is an obvious need in providing services to this target population, whether the provider is a physician or an APRN.

I respectfully request that HB912 HD1 be passed. Thank you for your continued support of all healthcare providers to practice to the full scope of their education and credentials. The community benefits from your efforts to improve access to the highest quality and safest healthcare services, rightfully deserved by all.

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**Written Testimony Presented Before the
House Committee on Consumer Protection & Commerce
February 28, 2017 at 2:00 PM
by Beth Hoban, RN, MAOM
HB912, HD1 RELATING TO NURSING**

LATE

Dear Chair McKelvey, Vice Chair Ichiyama, and Members of the House Committee on Consumer Protection & Commerce:

Thank you for hearing testimony for HB912, HD1 Relating to Nursing. I, Beth Hoban, a Registered Nurse and President of Prime Care Services Hawaii would like to testify in strong support with amendments of this measure. Prime Care Services Hawaii is a licensed, Medicare-certified home healthcare agency dedicated to provide home healthcare services on Oahu.

This bill identifies two areas in the Hawai'i Revised Statutes (HRS) and proposed amendments that add Advanced Practice Registered Nurses (APRNs) to achieve improved access to safe, quality care.

Assisted Community Treatment, H.R.S 334-121, 122, 123, 126, 127, 129 and 131

The sections relating to the Assisted Community Treatment (ACT) program proposes to add APRNs with prescriptive authority into the list of expert witnesses and specialists who participate in the ACT program for severely mentally ill patients. These statutes, developed in 2013 by Act 221, S.B. 310 C.D. 1, established an assisted community treatment program in lieu of the involuntary outpatient treatment program for severely mentally ill individuals who meet specified criteria.

APRNs, including Clinical Nurse Specialists and Certified Nurse Practitioners may specialize in psychiatric mental health. Working within their scope as determined by Chapter 457 Nurse Practice Act, other statutes in the Hawai'i Revised Statutes, and within their national board certification, nurses with a psychiatric health specialty and hold prescriptive authority are highly qualified to assess, diagnose, treat, and prescribe to patients with mental health conditions. Nursing specialization continues to evolve and new specializations recognized. New specialties in APRN nursing were launched in 2012 and 2014 by nationally accredited certification bodies; each new specialization requires its own standards for education, clinical training, and has its own national board examination.

As a Registered Nurse and Business Owner, many of our patient have behavioral problems. I would like to request that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. In addition, I would also request that this bill be allowed to flex in the future and not require frequent legislative updates. Language pertaining to APRN specialization defers to the Hawai'i Board of Nursing (HBON) to regulate which specializations meet the qualifications needed to be a licensed APRN in the state. The Hawai'i State Health Innovation Plan¹ (HSHIP) identifies that there is a shortage of Behavioral Health Specialists. This plan further identifies the term "behavioral health specialist" to include professionals who are able to bill for their mental health and substance abuse treatment services, such as psychologists, social workers, marriage and family therapists, CSACs, Physician Assistants and APRNs.

To align the ACT program statutes with the HSHIP plan to improve access to care, and to enable currently practicing APRNs to deliver care to their full scope of practice, the amendments propose to add APRNs with prescriptive authority to the qualified providers who serve as expert witnesses and to develop treatment plans for these individuals.

¹ <https://governor.hawaii.gov/wp-content/uploads/2015/06/Hawaii-State-Health-System-Innovation-Plan-Appendices-June-2016.pdf>

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The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists to the people of Hawai'i the most in need of this care.

Adolescent consent to Behavioral Health Services, H.R.S 577-29, and Legal Capacity of Minor Regarding Medical Care 577A-2, 3 and 4

These sections relate to adolescents' ability to consent to medical and health care services to a qualified health provider. In HRS 577D-1, Primary Medical Services for Minors Without Support, the statute identifies that minors aged 14-17 years and without support may receive primary medical care and services² from "Licensed health care practitioner" includes dentists licensed under chapter 448, physicians licensed under chapter 453, physician assistants licensed under chapter 453, and advanced practice registered nurses licensed under chapter 457."

The amendments to Chapter 577 in this bill propose to include behavioral health services as defined in HRS 577-29 and family planning services and medical care and services, as defined in HRS 577A-2, 3 and 4 such that adolescents aged 14-17 may consent to and receive care by qualified APRNs.

The Department of Health 2015 Strategic Plan³ notes that improving access to care and family planning services may greatly decrease unintended pregnancies, which are associated with early tobacco exposure, alcohol and other substances, late prenatal care, preterm birth, and other negative birth outcomes. Additionally, the Hawai'i State Health Innovation Plan (HSHIP) released in 2016 identified women of childbearing age and adolescents age 12-17 as primary targets to receive enhanced behavioral health interventions by qualified health providers.

The HSHIP reports a projected shortage of 1,600 physicians and a shortage of General and Family Practice Physicians by 34.6%, statewide. APRNs have nearly doubled in in-state number from 535 APRNs in 2005 to 958 in 2015. APRN education and certification may include adolescent care as well as family planning services, medical care and services, and psychiatric mental health services. APRNs with specialties in these areas and populations are well prepared to provide safe, quality care for these populations. Simultaneously, by allowing adolescents to consent to this care by APRNs, APRNs may support the State's drive to improve family planning and behavioral health access to care and early intervention, as well as improve overall access to care to vulnerable populations.

Thank you for our longstanding support for APRNs and ensuring access to care for Hawai'i's people. I, Beth Hoban, respectfully requests the favorable vote with amendments on this measure.

² **[\$577D-1] Definitions.** "Primary medical care and services" means health services that include screening, counseling, immunizations, medication, and treatment of illnesses and medical conditions customarily provided by licensed health care practitioners in an outpatient setting. As used in this chapter, "primary medical care and services" does not include invasive care, such as surgery, that goes beyond standard injections, laceration care, or treatment of simple abscesses.

³ <https://health.hawaii.gov/opppd/files/2013/04/Hawaii-Department-of-Health-Strategic-Plan-2015-2018-081616.pdf>

LATE

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 27, 2017 2:44 PM
To: CPCtestimony
Cc: brendonf@hawaii.edu
Subject: Submitted testimony for HB912 on Feb 28, 2017 14:00PM

HB912

Submitted on: 2/27/2017
Testimony for CPC on Feb 28, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Brendon Friedman	Individual	Support	No

Comments: In Strong Support

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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