

HB

114



Official Business

Alaska State Legislature

HOUSE OF REPRESENTATIVES

REPRESENTATIVE CYNTHIA D. TOOHEY

State Capitol
Juneau, AK 99801-1182

DISTRICT 13

SPONSOR STATEMENT

HOUSE BILL 114

"An Act allowing the Board of Nursing to authorize an advanced nurse practitioner to dispense medical, therapeutic, and corrective measures; and providing for an effective date."

House Bill 114 would clarify in statute an advanced nurse practitioner's authority to dispense medication within the scope of practice.

Dispensing has been a common practice with ANP's for many years. ANP's dispense medications for a variety of reasons. In some cases there is no access to a pharmacy and in other situations, the client may not have the resources to pay for the medications and the service of dispensing the medications better serves the immediate medical needs of that client.

In 1992 an advanced nurse practitioner requested clarification of her authority to dispense medication. The Department of Law advised that a statutory change would be necessary to clarify that authority.

Last year, the results of a survey of ANP's indicated dispensing was an essential function in many situations. The Board of Nursing and the Board of Pharmacy then worked together on the issue. The conclusion was the statutory change was needed.

HB114 is supported by the Board of Pharmacy, the Board of Nursing, the Alaska Nurses Association, The Alaska Association of Advanced Nurse Practitioners and nurse practitioners around the state. It passed the House 39-0. Your support of this bill would be appreciated. It has a zero fiscal note.

POSITION PAPER
HOUSE BILL 114

"An Act allowing the Board of Nursing to authorize an advanced nurse practitioner to dispense medical, therapeutic, and corrective measures."

House Bill No. 114 amends AS 08.68.410(1) by adding a provision to the definition of advanced nurse practitioner that will give these health care providers dispensing privileges.

The Division of Public Health currently employs or contracts for the services of ten advanced nurse practitioners throughout the state to provide family planning services. These services are made available through clinics that provide family planning and disease prevention education, prescribe family planning methods, and treat sexually transmitted diseases. These clinics serve persons who would not otherwise have access to these services. If these practitioners were to be denied the ability to dispense treatments, the result would be a serious impact to this underserved population in their ability to prevent unwanted pregnancies, reduce the complications of untreated sexually transmitted diseases, and stem the spread of these diseases.

The Division also provides grants to 14 rural health clinics throughout the state. These grants subsidize the operation of community clinics that provide primary medical care through the services of a mid-level practitioner (i.e. advanced nurse practitioner or physician's assistant). Eligible clinics are located in communities that are generally too small to support the services of a physician, and whose populations would not otherwise have local access to medical care. The communities receiving these grants, places such as King Cove, Galena, and Pelican, are isolated and often experience difficulties in travel and shipment of goods due to poor weather conditions. If advanced nurse practitioners are not able to dispense medications, the residents of these communities would experience a significant negative impact on their health.

HB 114 does not expand the nurse practitioner's privilege of prescribing medication, but allows them to dispense what they are currently prescribing. Nurse practitioners are required by regulation to have 15 hours of continuing education in pharmacology in order to renew their licenses. This ensures the necessary competency to allow for the action of dispensing medications. To date, the Division of Public Health has had no report of abuse or misuse of prescriptive authority or problems with medications, birth control methods, or treatments of sexually transmitted diseases by advanced nurse practitioner employees. In general, these practitioners have rigorous licensure requirements, and high professional standards.

The Department of Health & Social Services strongly supports the passage of House Bill 114.

POSITION PAPER

STATE OF ALASKA ★ DEPARTMENT OF HEALTH & SOCIAL SERVICES

HB 114
Page 2

Peter Nakamura
Peter M. Nakamura, MD, MPH
Director

2/5/93
Date

Theodore A. Mala, Deputy Com
Theodore A. Mala, MD, MPH
Commissioner

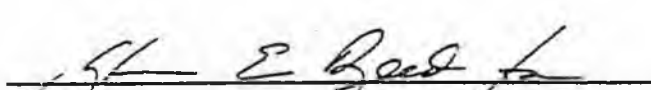
2/5/93
Date

HB 114: "An Act allowing the Board of Nursing to authorize an advanced nurse practitioner to dispense medical, therapeutic, and corrective measures."

This bill is necessary to provide legal authority for advanced nurse practitioners to dispense the medications which they prescribe.

Advanced Nurse Practitioners' (ANPs) dispensing has been occurring statewide since ANPs began practicing in Alaska under regulations established in 1980 by the Board of Nursing. A July 1992 Attorney General opinion stated there is no legal authority which allows ANP dispensing. A survey of ANPs conducted by the Board of Nursing in November 1992 with a 71% response rate, revealed that 55% of ANPs working in Alaska dispense in their practice. The survey further disclosed that 25% of the ANPs were in communities without pharmacies, and 22% were in communities without physicians.

The Boards of Nursing and Pharmacy have collaborated on the statute and regulation changes necessary to grant dispensing authority within the ANP scope of practice, and endorse the statute change. Therefore, the department supports HB 114.



Paul Fuhs, Commissioner
Department of Commerce and Economic
Development

2-5-93

Date

10640 Misty Lane
Juneau, Alaska 99801
February 5, 1993

Representative Cynthia Toohey
Capitol, Room 104
Juneau, AK 99801-1182

RE: House Bill 114

Dear Representative Toohey,

Last year and early this year, a joint subcommittee of the Board of Pharmacy and the Board of Nursing met on several occasions to discuss a statutory change which would give advanced nurse practitioners authority "to dispense medical, therapeutic, and corrective measures under regulations adopted by the board." The joint subcommittee also agreed on regulations, which would be promulgated by the Board of Nursing upon passage of such legislation.

The subcommittee presented its recommendations to the Board of Pharmacy and on January 28, 1993, the Board voted unanimously to support such legislation.

The Board of Pharmacy, therefore, supports House Bill 114.

Sincerely,



Gerald Race, President
Alaska State Board of Pharmacy

STATE OF ALASKA

WALTER J. HICKEL, GOVERNOR

DEPARTMENT OF COMMERCE AND ECONOMIC DEVELOPMENT

DIVISION OF OCCUPATIONAL LICENSING

3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503-5986
PHONE: (907) 561-2878
FAX: (907) 562-5781

Alaska Board of Nursing Position on Advanced Nurse Practitioner Dispensing

The Board of Nursing supports HB 114, an act allowing the Board of Nursing to authorize an advanced nurse practitioner (ANPs) to dispense medical, therapeutic and corrective measures.

The legislation is necessary to provide legal authority for ANPs to dispense the medications which they prescribe. ANP dispensing has been occurring statewide since ANPs began practicing in Alaska under regulations established in 1980 by the Board of Nursing. A July, 1992, Attorney General opinion stated there is no legal authority which allows ANP dispensing.

ANP dispensing occurs around the state. A survey of ANPs done by the Board of Nursing in November, 1992, with a 71% response rate, revealed that 55% of ANPs working in Alaska dispense in their practice. The survey further disclosed that 25% of the ANPs were in communities without pharmacies and 22% were in communities without physicians. This bill is needed to allow ANPs to continue to dispense in their practice so the care in these communities will not be adversely impacted.

The Board of Nursing and the Board of Pharmacy have been working together on the parameters for ANP dispensing. The ANP will be required to dispense in accordance with the practitioner's scope of practice. The parameters will be defined by Board of Nursing regulations.

1492n



Tom Fink,
Mayor

Municipality of Anchorage

Department of Health and Human Services

825 "L" Street
P.O. Box 196650 Anchorage, Alaska 99519-6650



February 8, 1993

Rep Cynthia Toohey
CoChair HESS
Capitol Room 104
State Capitol
Juneau, Alaska 99801-1182

Dear Rep Toohey:

We support HB 114. Ninety percent of our clients are low-income women falling below the poverty guidelines. In taking care of these women who are uninsured or who fall below the poverty guidelines it is vital we be able to dispense medication for the improvement of their health.

Thank you for introduction of this bill. We appreciate all the support that you and the HESS Committee are providing to continue the vital role of the nurse practitioners in providing quality health care to the citizens of Alaska.

Please share this letter with other committee members.

Sincerely,

Lorraine Martin ANP

Lorraine Martin, ANP

Karen Murray ANP

Karen Murray, ANP



ANPA

Alaska Nurse Practitioner Association

February 4, 1993

Cynthia Toohey, Co-Chair
House HESS
State Capitol
Juneau, AK 99801-1182

Dear Rep. Toohey,

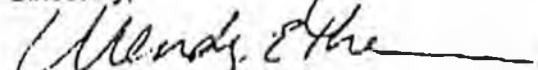
The Alaska Nurse Practitioner Association (ANPA) supports HB114.

This change is necessary for the nurse practitioner to provide complete health care to clients who are unable financially to purchase medications or who live in areas where there are no pharmacies. The change in this statute breaks down those barriers that prevent clients from seeking care and obtaining needed treatment, finances and geography.

Nurse practitioners have had independent practice since 1984 and prescriptive authority since 1985. Since nurse practitioners provide health care to indigent clients and provide care in rural areas, dispensing has been a necessary part of the provision of this care. The addition of the word dispense to the current statute allows nurse practitioners to continue providing health care and meeting the needs of clients.

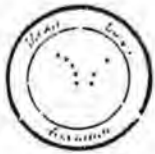
If I or our organization can be of further assistance, please call 561-1925.

Sincerely,



Wendy Thon, ANP
Nurse Practitioner

ANPA
Legislative Affairs
237 E. 3rd
Anchorage, AK 99501



ALASKA NURSES ASSOCIATION

237 E. 3rd Avenue #3
Anchorage, AK 99501-2523
(907) 274-0827
FAX (907) 272-0292

February 8, 1993

Representative Cynthia Toohey
Health, Education, and Social Services
Alaska State Legislature
State Capitol
Juneau, Alaska 99801-1182

Dear Representative Toohey:

The Alaska Nurses Association (AaNA) supports HB 114, an act allowing the Board of Nursing to authorize an advanced nurse practitioner (ANP) to dispense medical, therapeutic, and corrective measures.

Nurses have a long and proud history of supporting issues that would ensure universal access to health care for all, irrespective of geographical location and economic status. Enabling the Board of Nursing to authorize this important action by ANPs is crucial to ensuring access health care services for clients around the state, including the indigent, the non-insured, and rural residents with no access to pharmacies.

AaNA urges the Legislature to pass this bill so that ANPs can continue to provide invaluable service to the communities they serve. Nurses in advanced practice have proven their effectiveness in providing high quality and cost-effective care for consumers -- they need this authorization to ensure that their contributions will continue to benefit all residents of Alaska.

Sincerely,

Patricia A. Hong, MA, RN, CCRN
President

Office Phone: 694-4080



2-3-93

Cynthia Toohey
House HESS
State Capitol
Juneau, Alaska
99801-1182

Dear Cynthia Toohey,

This is a letter to support HB114 to add the word dispense to the Nurse Practitioners statute.

I have been in independent practice for 11 years and not being able to dispense would be a hardship to many of my patients.

I trust you will support HB114 so I can continue caring for patients who choose to have a Nurse Practitioner care for them.

Sincerely,

Lila McEwen, F.N.P.
Family Health Center
16839 Park Place
Eagle River, Alaska
99577

LM/jε

ALASKA STATE

HOSPITAL & NURSING HOME

ASSOCIATION

March 1, 1993

Senator Steve Reiger, Chair
Committee on Health, Education
and Social Services
Alaska State Senate
Capitol Building
Juneau, AK 99801

Re: Support HB 114
Drug Dispensing
by Nurse
Practitioners


Dear Senator Reiger:

ASHNHA, representing community hospitals and nursing homes urges Senate HESS Committee support of HB 114, allowing Advance Nurse Practitioners to dispense medications.

This authority is of particular importance in rural Alaska.

Many thanks,

Sincerely,



Harlan R. Knudson
President/CEO

cc: Representative Cythia Toohey



Yukon-Kuskokwim Health Corporation
Community Health Aide Program

“Fostering Native Self-Determination in Primary Care, Prevention and Health Promotion”

P.O. Box 528 Bethel, Alaska 99559 (907) 543-5075 543-4471

FEB 11 1993

FEB. 8, 1993

Dear Ms. Toohey,

I am writing in support of HB114 to add the word 'dispense' to our statute regarding Nurse Practitioner practice.

I am a Family Nurse Practitioner who worked as a health care provider in an Alaska bush community for 13 months. From Sept. 1991 to Oct. 1992, I was the sole practitioner in Akutan, a small fishing village, which is located 800 miles from Anchorage and 30 miles from Dutch Harbor.

My patient population included non-natives as well as beneficiaries of Alaska Native Medical Center services. Dispensing medication was the only method in which patients received their medications. There were several times when a pharmacy in Anchorage needed to mail medication to Akutan; seven days was a minimum time for mail delivery.

If the ability of dispensing medication was not an option for me in this setting, clearly the quality of care would have been altered. An individual would have access to health care, without the benefit of receiving treatment.

The ability to dispense is critical to function within the scope of practice for Nurse Practitioner's working in rural communities in the State of Alaska.

Sincerely,

Nancy Walsh-Robart

Nancy Walsh-Robart FNP



UNIVERSITY OF ALASKA ANCHORAGE

3211 Providence Drive
Anchorage, Alaska 99508-8175

STUDENT HEALTH CENTER
(907) 786-4040

February 5, 1993

Representative Cynthia Toohey
Room 104
Capital Building
Juneau, Alaska 99801-1182

RE: HB114

Dear Representative Toohey:

On July 31, 1992, the Assistant Attorney General issued an opinion to the Division of Occupational Licensing at the request of the Pharmacy Board advising the an advanced nurse practitioner may not dispense drugs. This response has generated a great deal of concern on the part of nurse practitioners delivering primary care across the State.

Advanced nurse practitioners (ANPs) dispense medications for a variety of reasons. In some cases there is no access to a pharmacy and in other situations the client may have limited resources to pay for the medications and the service of dispensing the medications increases patient compliance.

The University of Alaska Anchorage, Student Health Center has a potential population of 8,000 students eligible for services. The clientele of the Student Health Center frequently have limited financial resources, no health insurance and diminished compliance related to attitude, and time demands. It is of primary concern that the inability to dispense medications will dramatically decrease compliance with medication treatment regimen. Frequently the illness requires prompt medication intervention. The ability to dispense the prescription drugs, explain the rationale for the prescribed treatment, and the directions for taking the medication reinforce the importance of the treatment and consequently foster improved compliance.

Even though the Student Health Center is located within the Municipality of Anchorage and not a rural setting the issue of prompt treatment, compliance and cost effective health care are unchanged. The dispensing of medications onsite contributes to prompt and effective treatment.

Any opportunity to assist patients/students in making educated decisions regarding their health care should not be overlooked. Health care providers should encourage people to be intelligent consumers of health care services.

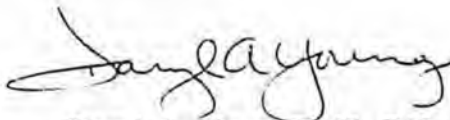
Representative Toohey
February 5, 1993
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Medications dispensed at the Student Health Center are prepackaged unit dose to reduce error. These packages are labeled in accordance with 12.AAC52.120 - Labeling Unit Dose Use and Prepackaged Drugs. It should be noted that we are not compounding any medications.

I applaud your proactive stance regarding the delivery of health care to the variable population in Alaska. I support the recommended statutory changes for nurse practitioners to dispense prescription medications.

Thank you for your assistance in this important health care delivery issue.

Sincerely,

A handwritten signature in cursive script, appearing to read "Daryl A. Young".

Daryl A. Young, MS, RN, CS, FNP
Manager, UAA Student Health Center

cc. Gail M. McGill, Executive Secretary
Board of Nursing

STATE OF ALASKA
DEPARTMENT OF COMMERCE
& ECONOMIC DEVELOPMENT

NOV 17 1992

DIV. OF OCCUPATIONAL LICENSING

Sun November 8, 1992

17:21pm

Dixie L. Light ANP/FNP, M.Sc.N., PhD.
P.O. Box 382
Houston, Alaska 99694
Telephone (907) 892-8804

Gail M. McGill, RN, Executive Secretary
Alaska Board of Nursing
Department of Commerce and Economic Development
7th Floor Frontier Bldg.
3601 C Street, Suite 722
Anchorage, Alaska 99502

RECEIVED

Division of Occupational Licensing

Dear Gail,

I doubt if you remember me with all you have to do but, we met briefly at the 1991 ANP Conference in Anchorage. Looking forward to meeting you again this year at the conference.

Last week I sent you my response to your questionnaire regarding the dispensing of pharmaceuticals. The implications of being unable to provide medications in my small rural practice are fairly alarming.

I serve families along the Parks Highway from just South of Big Lake, the community of Big Lake, Houston, and again along the highway about 15 miles North of Willow, the Hatcher Pass, and fly ins from the Susitna and Yentna rivers. Our practice is small, in 14 months we have opened 480 records or which 30 are summer visitors (removal of fish hooks and small emergencies).

There is a lot of data in my charts and I am kicking myself for not having put it in a data base to be able to draw more meaning that you might find useful. People come to me because:

1. they usually don't have to wait.
2. they learn I and my husband listen (and make sure we make time to do that if it's needed).
3. we accept small portion of the office fee and charges for medications when they are short and need to pay later (about 16% of our clients).
4. they can get some basic prescription medications from us without traveling further from home.
5. 90% of my patient time is spent in health teaching. Patients have learned we will search for the health information we don't have on hand.
6. we always follow up with no charge visits or telephone calls.

Our service is very personal and focused on family needs from the family members' perception expanded by giving them my own perception. Without the availability of medications some of these people will still use our services.

NOV 17 1992

DIV. OF OCCUPATIONAL LICENSING

Many of my clients would still use us if we can't dispense, but:

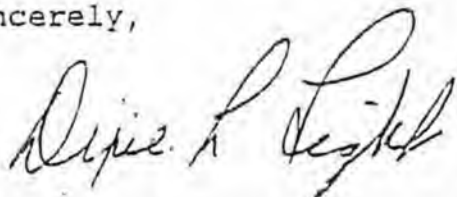
1. some won't fill their prescriptions because they lack ready cash or the other usual reasons people don't pick up or take prescribed medications or actions.
2. a large number will not use us because they would need to drive 20 to Wasilla for the prescription anyway. 80% of our clients are low income or acquire their annual income in summer to be measured out over the next 3 months. Transportation costs are a very large problem.

My husband and I run this practice. At the end of 14 months we bring in just a little more than our costs. I am having a ball working for myself and doing work we both feel is needed. My husband says he loves the work too and he has been a real help to parents with kid questions and problems.

We do not think we can maintain the practice without dispensing medications. There is no pharmacy nearby and we would lose about half of our clients. I am certain that we would have to close. We try to follow sound small business practices. We purchased most of our medical equipment used but in safe and working condition. We might be committing a "good business" error by leniency about payments but people have paid us (better than 99% of the time when they received some cash).

Last winter a man came to us with a severe burn. His wife told me she used all of the family cash reserve to pay the emergency room and ambulance. After my assessment I told the family what still needed to be done. I gave them the truth including the probability of complications. The 2nd degree burns of face, hands, and anterior tibial skin required sterile supplies, 9 dressing changes by me, and in a later stage teaching the couple to change the dressings themselves, services for which I charged \$150. They had no money and we never expected to see any return, but this last week we got a check for everything we charged. Whatever happens I will feel we have made a difference and enjoyed doing it.

Sincerely,



Dixie L. Light PhD, ANP/FNP, MScN.

November 5 - 1992

Nancy Schupp
1953 Kingfisher
Fairbanks, Alaska
99709
479-5207H 452 4768W

RECEIVED
NOV 16 1992
Division of Occupational Licensing

Gail Mc Guill, RN
Executive Secretary
Alaska Board of Nursing
3601 C Street, suite 722
Anchorage, Alaska
99503-5986

Dear Gail,

The following is my testimony concerning the need to continue the practice of the dispensing of medicines to clients:

I strongly believe that it is absolutely necessary to certain populations of this state, that nurses continue to dispense medications and are able to with safety and provision of good patient education at that time. I also believe that anyone who dispenses medication needs to label appropriately.

Alaska is proud of its rural areas and all it stands for. Having provided a full range of health care services to the seven communities in the Yukon-Koyokuk River Subregion for 14 years, following 2 years in a remote corner of Washington State, I am acutely aware of the need for people to have access to medications without extended delays. I have worked with the pharmacists associated with that area to provide medications to individuals safely. I've enjoyed the assistance from the pharmacists in Tanana and Fairbanks in setting up automatic refill programs, prepackaging, storage, and reference advice. We have utilized patient education materials and provided instructions at the time of dispensing medication.

The nearest pharmacy, physician, and hospital had been about 200 miles away in Tanana until it closed. Fairbanks is almost 300 miles away with only airplane travel as the common mode of travel and mail. We commonly used prepackaged and labeled bottles but because of the tremendous variety of acute needs that can develop in a diverse community, we also used stock bottles to pour from into smaller bottles, label and distribute as necessary. We also provided this service for semi-emergent situations to send to individuals in the surrounding villages when a delay caused by waiting for delivery from a Fairbanks would have been detrimental to the patient. This was only done when seemed absolutely necessary.

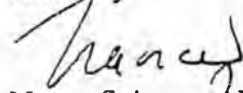
I have seen a variety of time delays in medication reaching a village or subregional community. When it all has worked out and it was obvious that there was an acute need and getting a medication to a patient was much cheaper than the 200+ dollars it can cost

to bring a patient into Fairbanks, we've been able to call the pharmacy, they would fill the prescription in Fairbanks, have a messenger take it to a private air taxi, pay the minimum freight charge, the air taxi in Galena would call the clinic who would need to send a messenger to the air port to pick it up bring it to the clinic and thatn we could pass it on to a patient all in the same day. The above is the best of situations. Smaller village clinics are one more airline step further away. Generally it takes several days to coordinate the deliverance of a medication never mind the expense of phone calls, air frieght or express mail and worker's time. During January of 1989, it was three weeks before a plane was able to fly into the surrounding villages.

A professional nurse, nurse practitioners being some of the most trained, and most committed of them, have been drilled since school how to administer medication safely. The dispensing and labeling is one step further. But nurse practitioners are certainly capable of this step. They are also the best in patient education. I am in full agreement that they need to follow the same laws and guidelines that pharmacists must adhere to during that practice.

I have seen the need for dispersion of drugs by a nurse practitioner thousands of times to prevent prolongation or exacerbation of a patients health problem. I have done it safely thousands of times and the people of those communities have only benefited.

Sincerely


Nancy Schupp, ANP

Marta Poore
P.O. Box 9396
Ketchikan, AK 99901

Cynthia Toohey
House HESS
State Capital Building
Juneau, AK 99801-1182

February 4, 1993

RE: HB 114 adding "dispense" to the statute regarding Advanced Nurse Practitioner practice.

I am an Advanced Nurse Practitioner (ANP) working with a majority of individuals who may be homeless or without access to insurance or medical services. Some are pregnant and have not yet established prenatal care. I see people both in Ketchikan and on Prince of Wales (POW) island. The individuals from POW are limited to expensive air travel or sporadic ferry service to obtain health care. Dispensing medications is crucial for prompt attention to health problems and decreases the delays and frustration of trying to get into town for treatment.

Please support HB 114.

Sincerely,



Marta Poore, Certified Nurse-Midwife
Advanced Nurse Practitioner

cc: Jack Heesch

WALTER J. HICKEL, GOVERNOR

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC HEALTH
SECTION OF NURSING

KETCHIKAN HEALTH CENTER
305 1/2 FIFTH AVENUE
KETCHIKAN, ALASKA 99901-5773
PHONE: (907) 225-4350

January 5, 1993

Cynthia Tooley
House HESS
State Capitol
Juneau, AK 99801

Dear Ms. Tooley,

I am writing to support passage of HB 114 which clarifies the intent of the nurse practitioner statute regarding dispensing of drugs. Nurse Practitioners are an essential part of the health care delivery system in Alaska, providing care primarily to the rural and indigent population in our State.

By statute Nurse Practitioners are already able to prescribe drugs according to their area of specialty. Dispensing allows the Nurse Practitioner the ability to physically give the bottle of pills to the client. The importance of adding this language to the statute is obvious. Having practitioners available to see patients, diagnose their illness but not give them the necessary medication assures an additional barrier to timely, appropriate care.

The need is greatest in those circumstances wherein the Nurse Practitioners are the primary care givers, that is in rural communities where pharmacists are not available to count and distribute medication as well as in indigent care where clients haven't the financial nor transportation resources to access a pharmacy.

HB 114 does not change the scope of practice for the Nurse Practitioner. It does not add additional rights and responsibilities. It changes the language to assure that practitioners' current practice is safeguarded by statute.

Sincerely,



Joan Nugent
Nurse Manager

cc. Jack Heesch
Representative Bill Williams

Phyllis Yetka
P.O. Box 958
Ward Cove, Ak 99928


Feb. 4, 1993

Representative Cynthia Toohey
House HESS
State Capitol
Juneau, AK 99801-1182

Dear Rep. Toohey,

I am writing to voice my support of HB114. I am a pediatric nurse practitioner from Keachikan, Ak. It is imperative that the word "dispense" be added to the State Statute regarding nurse practitioners and how we are able to best serve our patients. Being able to "dispense" medications to those who are in need of help or unable to get to a pharmacy is not only good medicine but it is economically sound. Nurse practitioners can competently provide the quality, cost-effective health care that our patients deserve. The addition of the word "dispense" to HB114 would aid us in our goal.

Thank You.


Phyllis Yetka R.N., C.P.N.P.

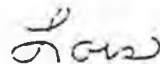
P.O. Box 614
Bethel, Alaska 99559
February 12, 1993

Cynthia Toohey
Committee on Health, Education and Social Services
State Capitol
Juneau, Alaska 99801

Dear Ms. Toohey:

I am writing in support of adding the word dispense to the statute regarding Nurse Practitioner practice, House Bill--114. As a Family Nurse Practitioner practicing in a Bush community it is absolutely critical that I be able to dispense medications. There are no pharmacies in Bethel and health care would be negatively impacted if Nurse Practitioners are not able to dispense medications.

Sincerely,



Lois Rockcastle R.N.C.,
M.S., F.N.P.

Cynthia Jolley
House 1155, St. 1. Capital
Juneau Alaska 99801-1152

Dear Mr. Jolley,

I am writing in support of H. R. 114, an amendment to the Nursing Home, regarding the education of drug by nurse practitioners.

Nurse practitioner have practiced independently with prescriptive authority, for a number of years. They are required to maintain and upgrade their skills, including pharmacology, on an ongoing and constant basis through continuing education and formal courses. Many nurse practitioners work in remote areas which have no pharmacy. I live in one such area. Bethel has one pharmacy associated with the regional hospital, which routinely cares for the native population only, and emergency medication supply (10 days) for non-natives. There is no pharmacy closer than Umanorage (400 air miles) for the non-native population. Besides Bethel, there is a total of 49 villages in the Umanorage delta, none of which have a pharmacy, either for native or non-native persons.

Nurse practitioners frequently travel to their villages to deliver direct primary care. If medication is necessary it cannot be provided except by the cumbersome method of the postal system unless the practitioner is able to acquire the medication at the time of the patient encounter. The alternative use

of the postal system entails a delay of one week at the minimum, three weeks at the usual, and longer dependent on mail pickup schedules and weather conditions. This is clearly an unacceptable delay in the treatment of illnesses. Practitioners need to be able to bring a stock supply with them, or to dispense from a stock supply provided to the village from the Bethel pharmacy. Until such time as pharmacies are based in each village, or pharmacist is able to travel with the health care provider, there is no reasonable alternative available. The ability to dispense medications is crucial to adequate health care delivery in remote areas.

Thank you for your consideration of this matter, and if I can be of further assistance or information, please to contact me without hesitation.

Sincerely yours,
Milma Thaxual, R.N., C. ; F.N.P., C. ; C.S.
Box 559

Bethel Alaska 99559 - 0559
Work Phone : 543 - 2110
Fax number . 543 - 5271

cc JACK HEESCH
Tundra/Anchorage

February 4 1993

Representative Cynthia Johnson
House HB 114
State Capitol
Juneau AK 99801-1182

Dear Ms. Johnson,

I am a nurse practitioner in Bethel, Alaska
to the surrounding villages conducting 3-5
day clinics. I am writing to urge your
support of HB 114.

As a nurse practitioner I have been able to
prescribe medications for clients since 1985.
This bill will allow me to dispense those
medications to the patients in the field when
there are no pharmacists. This would greatly increase
the efficiency & cost effectiveness of our health
care delivery system in rural Alaska.

Thank you,
Cathy Fawcett, ANP
P.O. Box 803
Bethel AK 99559

To: The Honorable Cynthia Tookey

Thank you for introducing HB 114 - Drug Dispensing For
Advanced Nurse Practitioners. Thank you for your support, in
general, of nursing and health care issues.

Valerie Ziemacki RN

Valerie Ziemacki RN
711 Lake St.
Sitka, Ak. 99835
747-3894

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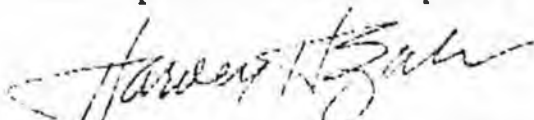
Representative Cynthia Toohay
House of Representatives
Alaska State Legislature

I have been a Family Nurse Practitioner practicing in Alaska for twelve years. More than half of that time was spent in rural areas of the state as the sole health care provider. The ability to provide medications to patients in a timely manner is of most importance. You can make the diagnosis but if you can't treat the patient, what are the outcomes. A good example of this is the infant who at 2:00 am has a bad ear infection. If I am in a rural setting and the nearest pharmacy is 60 miles away, not being able to dispense the appropriate antibiotic is going to cause the child delay in treatment. This delay causes pain for the child, stress on the parents, and has the potential for long term effects.

My current position at the Kodiak Area Native Association, requires my travel to the six villages on Kodiak Island. I may spend as much as two weeks a month providing care to the villages. If I could not dispense medications on site to the patients I see, all medications would have to be sent out from the KANA Pharmacy in Kodiak. This, at the best, would take two days. Unfortunately most of the time it is longer due to weather.

Even when practicing in Anchorage, samples of medications were donated by various drug companies representatives. We dispensed to those individuals who could not afford to have a prescription filled at a pharmacy 2 blocks down the street.

Your support is greatly appreciated for House Bill 114, that would allow advanced nurse practitioners to dispense medications.



Harvey H Baker RN,C ANP
Family Nurse Practitioner
424 Carolyn
Kodiak, AK 99615

Mrs. Mary

Warner

Box 1258

Bethel

AK 99559

543-2554

Date POM Sent 02/05/93

N

Bill Number HB 114 position SUPPORTS Subject

PLEASE SUPPORT HB114 FOR NURSE PRACTITIONERS TO DISPENSE PRESCRIPTIVE MEDICATIONS. AS A NURSE PRACTITIONER WORKING IN RURAL ALASKA, I NEED TO DISPENSE MEDICATIONS TO PATIENTS ENSURING THEIR TREATMENT STARTS PROMPTLY

WITHOUT MAIL OR WEATHER DELAYS. THIS PARTICULARLY AFFECTS INDIGENT OR UNINSURED PATIENTS WITHOUT ANOTHER SOURCE OF HEALTH CARE.

Ms. Lorraine

Martin

12610 Neher Ridge Drive

Anchorage

AK 99516

345-3075

Date POM Sent 02/08/93

N

Bill Number HB 114 position SUPPORTS Subject

I SUPPORT HB 114. 90% OF MY CLIENTS ARE LOW-INCOME WOMEN FALLING BELOW THE POVERTY GUIDELINES. IN TAKING CARE OF THESE WOMEN WHO ARE UNINSURED OR WHO FALL BELOW THE POVERTY GUIDELINES IT IS VITAL I BE ABLE TO DISPENSE

MEDICATION FOR THE IMPROVEMENT OF THEIR HEALTH. LETTER TO FOLLOW.

Ms. Karen
17452 Kahiltna Drive
Eagle River

Murray

AK 99577

694-3140

Date POM Sent 02/08/93

N

Bill Number HB 114 position SUPPORTS Subject

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