

SB

53

<TARGET><BILL>SB 53</BILL><SUBJECT>SB
53</SUBJECT><COMM>HF IN29</COMM></TARGET>

Fiscal Note

State of Alaska
2016 Legislative Session

Bill Version: SB 53
Fiscal Note Number: _____
() Publish Date: _____

Identifier: SB053HCS(L&C)-DCCED-CBPL-03-11-16
Title: ADVANCED PRACTICE REGISTERED NURSES
Sponsor: GIESSEL
Requester: (H) Finance

Department: Department of Commerce, Community and
Economic Development
Appropriation: Corporations, Business and Professional
Licensing
Allocation: Corporations, Business and Professional
Licensing
OMB Component Number: 2360

Expenditures/Revenues

Note: Amounts do not include inflation unless otherwise noted below. (Thousands of Dollars)

	FY2017 Appropriation Requested	Included in Governor's FY2017 Request	Out-Year Cost Estimates					
			FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
OPERATING EXPENDITURES								
Personal Services								
Travel								
Services	7.5							
Commodities								
Capital Outlay								
Grants & Benefits								
Miscellaneous								
Total Operating	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Fund Source (Operating Only)

1156 Rcpt Svcs	7.5							
Total	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Positions

Full-time								
Part-time								
Temporary								

Change in Revenues	7.5							
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Estimated SUPPLEMENTAL (FY2016) cost: 0.0 *(separate supplemental appropriation required)*
(discuss reasons and fund source(s) in analysis section)

Estimated CAPITAL (FY2017) cost: 0.0 *(separate capital appropriation required)*
(discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency? Yes
If yes, by what date are the regulations to be adopted, amended or repealed? 01/01/17

Why this fiscal note differs from previous version:

This CS provides an effective date of July 1, 2016 which changes the date regulations must be adopted, amended, or repealed. Note has been updated accordingly.

Prepared By: <u>Janey Hovenden</u>	Phone: <u>(907)465-2536</u>
Division: <u>Corporations, Business and Professional Licensing</u>	Date: <u>03/11/2016 03:30 PM</u>
Approved By: <u>Catherine Reardon, Director</u>	Date: <u>03/11/16</u>
Agency: <u>Division of Administrative Services, DCCED</u>	

FISCAL NOTE ANALYSIS

STATE OF ALASKA
2016 LEGISLATIVE SESSION

BILL NO. HCS SB 53(L&C)

Analysis

SB 53 was requested by advanced practice registered nurses (APRN) in Alaska through the APRN Alliance to reduce confusion about titling for consumers and payers. It brings Alaska into alignment with the APRN Consensus Model, a national best practices act.

It is anticipated that the Board of Nursing, Medical Board, and Board of Professional Counselors would each need to replace outdated terminology in their regulations to conform to this statutory change. The division estimates that the cost to each of these licensing programs would be \$2.5 per program for attorney review, regulations specialist time, printing, and postage to affected licensees. As required by AS 08.01.065, the cost of promulgating regulations will be recovered through license fee receipts.

If the bill becomes law, the division will require \$7.5 to cover legal costs to amend regulations, printing, and postage.

Professional licensing programs at CBPL are funded by Receipt Supported Services fund source 1156 Rcpt Svcs (DGF). Licensing fees for each program are set per AS 08.01.065 so the total amount of revenue collected approximately equals the occupation's actual regulatory costs.

Fiscal Note

State of Alaska
2016 Legislative Session

Bill Version:	HCS SB 53(L&C)
Fiscal Note Number:	3
(H) Publish Date:	1/27/2016

Identifier: SB053-DCCED-CBPL-01-22-16
 Title: ADVANCED PRACTICE REGISTERED NURSES
 Sponsor: GIESSEL
 Requester: (H) LABOR & COMMERCE

Department: Department of Commerce, Community and Economic Development
 Appropriation: Corporations, Business and Professional Licensing
 Allocation: Corporations, Business and Professional Licensing
 OMB Component Number: 2360

Expenditures/Revenues

Note: Amounts do not include inflation unless otherwise noted below. (Thousands of Dollars)

	FY2017 Appropriation Requested	Included in Governor's FY2017 Request	Out-Year Cost Estimates					
			FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
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Total	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Positions

Full-time								
Part-time								
Temporary								

Change in Revenues	7.5							
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Estimated SUPPLEMENTAL (FY2016) cost: 0.0 *(separate supplemental appropriation required)*
(discuss reasons and fund source(s) in analysis section)

Estimated CAPITAL (FY2017) cost: 0.0 *(separate capital appropriation required)*
(discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency? **Yes**
 If yes, by what date are the regulations to be adopted, amended or repealed? **07/01/16**

Why this fiscal note differs from previous version:

The division has identified areas where regulations would not be required and has reduced the note accordingly.

Prepared By: Janey Hovenden
 Division: Corporations, Business and Professional Licensing
 Approved By: Catherine Reardon, Director
 Agency: Division of Administrative Services, DCCED

Phone: (907)465-2536
 Date: 01/22/2016 12:13 PM
 Date: 01/22/16

FISCAL NOTE ANALYSIS

STATE OF ALASKA
2016 LEGISLATIVE SESSION

Analysis

SB 53 was requested by advanced practice registered nurses (APRN) in Alaska through the APRN Alliance to reduce confusion about titling for consumers and payers. It brings Alaska into alignment with the APRN Consensus Model, a national best practices act.

It is anticipated that the Board of Nursing, Medical Board, and Board of Professional Counselors would each need to replace outdated terminology in their regulations to conform to this statutory change. The division estimates that the cost to each of these licensing programs would be \$2.5 per program for attorney review, regulations specialist time, printing, and postage to affected licensees. As required by AS 08.01.065, the cost of promulgating regulations will be recovered through license fee receipts.

If the bill becomes law, the division will require \$7.5 to cover legal costs to amend regulations, printing, and postage.

Professional licensing programs at CBPL are funded by Receipt Supported Services fund source 1156 Rcpt Svcs (DGF). Licensing fees for each program are set per AS 08.01.065 so the total amount of revenue collected approximately equals the occupation's actual regulatory costs.

ALASKA STATE LEGISLATURE

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North to the Future

Senator Cathy Giessel Senate District N

CSSB 53(L&C) vsn P Sponsor Statement Advanced Practice Registered Nurse (APRN)

Senate Bill 53 updates Alaska's 34-year old statutory title from "Advanced Nurse Practitioner" (ANP) and "Nurse Anesthetist" (NA) to now be called "Advanced Practice Registered Nurse" (APRN).

WHY?

- Making this change will bring us into alignment with a national movement called the APRN Consensus Model that standardizes titles for Advanced Practice Nurses.
- ANP and NA are outdated titles. As more states adopt the consensus model, those titles will become even more outdated.
- The Advanced Nurse Practitioner title does not reflect the title or education of Certified Nurse Midwives (CNM) or Clinical Nurse Specialists (CNS) so its use can be confusing outside of Alaska.
- The APRN title is now used by many insurance companies, Medicare and also the Veterans Administration. Its use should eliminate denials of reimbursements based on confusion about the service provider.
- The use of the APRN title will increase clarity of practice roles across state lines.

Nothing in this bill changes certification or licensing requirements currently in place, nor does it affect the scope of practice of nursing professionals. This merely incorporates the ANP and the NA titles, including the CNS and CNM, under the new designation Advanced Practice Registered Nurse.

[Senator Cathy Giessel@akleg.gov](mailto:Senator_Cathy_Giessel@akleg.gov)

ALASKA STATE LEGISLATURE

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North to the Future

Senator Cathy Giessel
Senate District N

Sectional Analysis CSSB 53(L&C) vsn P

Note: the only change from original version N to P is the effective date.

Section 1 amends AS 08.02.010 by adding advanced practice registered nurses to the list of professions required to use their professional titles or initials on stationery, signs, or other advertising.

Sections 2 - 4 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse" and make other related technical amendments.

Section 5 amends AS 08.68.100(a) by requiring that the Board of Nursing's regulations pertaining to advanced practice registered nursing include the practices of advanced practice registered nurses who practice as certified registered nurse anesthetists, certified clinical nurse specialists, certified nurse practitioners, or certified nurse midwives and makes conforming amendments

Section 6 amends AS 08.68.160 by adding advanced practice registered nursing to the licenses issued under AS 08.68 and changes the term "professional nursing" to "registered nursing."

Section 7 adds a new subsection to AS 08.68.170 that sets out the qualifications for an advanced practice registered nursing license.

Section 8 repeals and reenacts AS 08.68.190 concerning license examinations and adds an APRN examination to the licensing examinations conducted under AS 08.68.

Section 9 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 10 amends AS 08.68.220 by adding a paragraph requiring the Department of Commerce, Community and Economic Development to set fees related to advanced practice registered nursing and deletes "vocational" nursing.

Section 11 amends AS 08.68.230(a) by removing "licensed professional nurse" from the titles authorized for persons licensed under AS 08.68.

Section 12 amends AS 08.68.230 by adding new subsections authorizing the use of the titles "advanced practice registered nurse", "certified registered nurse anesthetist", "**certified clinical nurse specialist**", "**certified nurse practitioner**", or "**certified nurse midwife**" and associated initials.

Section 13 amends AS 08.68.265 to add advanced practice registered nurses to the persons authorized to supervise a practical nurse.

Section 14 makes impersonation of an APRN as a grounds for denial, suspension, or revocation of a nursing license.

Section 15 requires institutions that are applying for accreditation of advanced practice registered nurse training to provide certain information to the Board of Nursing.

Section 16 adds impersonation of an APRN as a grounds for denial, suspension, or revocation of a certificate to practice as a nurse aide.

Sections 17 - 19 add APRN to the licenses issued by the board, and changes the term "professional nursing" to "registered nursing" in AS 08.68.360 - 08.68.390, which declare the unlicensed practice of nursing a public nuisance and provide for injunctive relief.

Section 20 adds APRN to the licensees who may delegate certain nursing duties.

Section 21 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse" and makes a related technical change.

Section 22 defines the practice of advanced practice registered nursing.

Sections 23 - 25 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse" and make other related technical amendments.

Section 26 adds APRNs to persons who are considered justified in conduct that would otherwise be considered the use of force when delivering emergency medical care.

Sections 27 and 28 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 29 adds APRNs to those licensees immune from civil liability for an act or omission in delivering patient care services while escorting an injured or sick person whose life is in danger in a conveyance that is not an ambulance.

Section 30 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 31 adds APRNs to those practitioners authorized to draw blood for tests of persons charged with sex offenses.

Sections 32 and 33 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 34 clarifies that nurse-midwives and direct entry midwives are certified.

Sections 35 - 38 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse" and make other related technical amendments.

Section 39 changes the term "registered professional nursing" to "registered nursing."

Section 40 clarifies that nurse-midwives must be certified to be a provider under AS 21.87. (relates to hospitals)

Section 41 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Sections 42 -43 clarifies that nurse-midwives are certified and makes other technical amendments.

Sections 44 - 46 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 47 adds APRNs to the definition of health care provider in statutory provisions concerning prisons.

Section 48 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 49 adds APRNs to licensees with particular training who may assess a child with respect to the waiver under a statutory provision concerning home and community based medical assistance.

Section 50 is a conforming amendment that changes a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse" and makes a related technical change.

Section 51 adds APRNs to practitioners who are not liable for providing information to the Department of Health and Social Services for the purpose of providing services to certain children and makes a related technical change.

Sections 52 - 54 add APRNs to practitioners who may under statutory provisions concerning mental health commitment, determine if a person may be administered psychotropic medication without the person's consent, and add APRNs with particular training to the definition of mental health professional for those statutory provisions.

Section 55 adds APRNs to practitioners who may review a health care plan for an assisted living home resident.

Sections 56 - 59 are conforming amendments that change a statutory reference from "advanced nurse practitioner" to "advance practice registered nurse."

Section 60 repeals specific statutes. 08.68.850(7) Nurse anesthetists

21.87.330(4) nurse midwife/hospital services statute

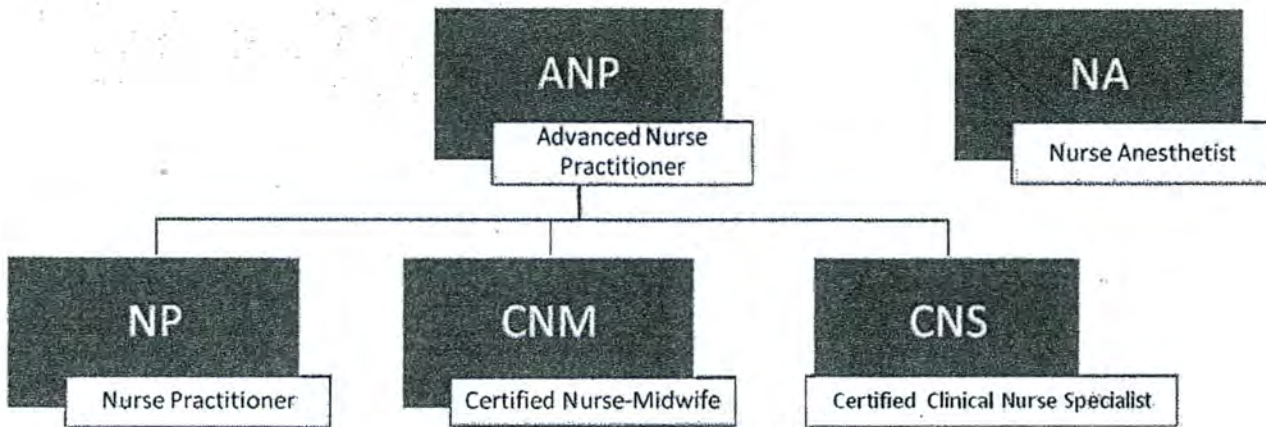
47.07.900(14) nurse midwife / public welfare statute

Section 61 sets July 1, 2016, as the effective date for the bill.

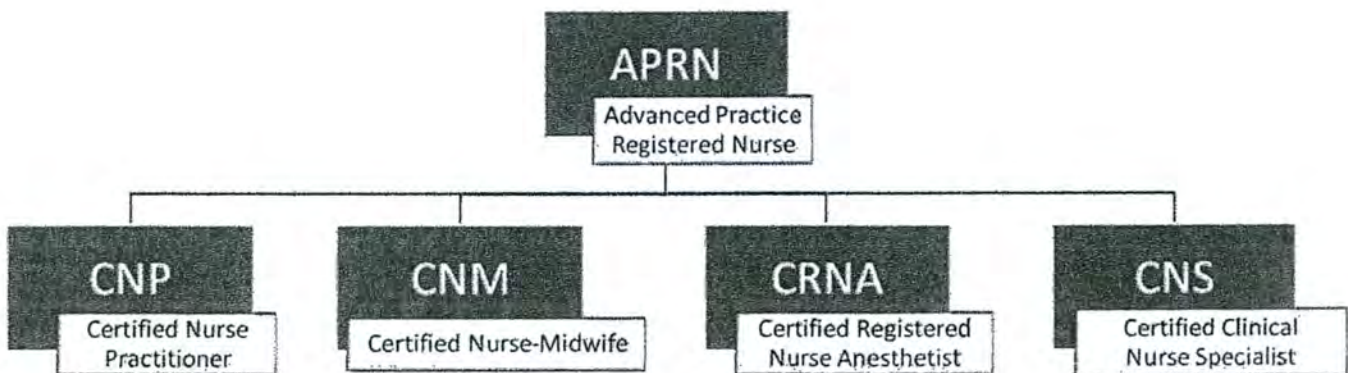


APRN
ALLIANCE

Current Alaska Statute



Proposed Statute Change



**LIST OF THE 11 STATES THAT HAVE FULLY IMPLEMENTED THE APRN
CONSENSUS MODEL:**

Connecticut
Hawaii
Idaho
Minnesota
Montana
Nevada
New Mexico
North Dakota
Rhode Island
Utah
Vermont

**NEXT GROUP OF 12 STATES WHICH ARE ALMOST THERE, BUT ARE SHORT
FOR SOME REASON.**

IN SOME CASES, THESE STATES ONLY NEED TO ADOPT THE APRN TITLE.

Arkansas
Iowa
Kentucky
Maine
Nebraska
New Hampshire
Oklahoma
Oregon
Washington
Washington, D.C.
West Virginia
Wyoming

**Information gathered from the National Council of State Boards of Nursing
website – Senator Giessel's office**

States' Progress on Implementation of APRN Consensus Model

States with full implementation = 13:

Connecticut Rhode Island Delaware Vermont Minnesota North Dakota
Montana Idaho Oregon Nevada New Mexico Hawaii Utah

States with >50% implementation = 29:

Maine New Hampshire West Virginia Kentucky Iowa Nebraska
Wyoming Arkansas Oklahoma Washington Massachusetts
Maryland Virginia North Carolina South Carolina Georgia
Mississippi Louisiana Texas Ohio Wisconsin Illinois
Missouri Kansas Colorado South Dakota Arizona California
Alaska (District of Columbia) (Guam) (American Samoa) (Virgin Islands)

States with <50% implementation = 8

New York New Jersey Pennsylvania Tennessee Alabama Florida
Michigan Indiana

Listing from the National Council of State Boards of Nursing, December 2015

Senator Giessel's office

Adopt the APRN Consensus Model Requirements

If all states adopt the regulatory requirements for licensure, accreditation, certification and education for APRNs, as outlined in the Consensus Model, the benefits will be far-reaching for health care professionals, regulators and consumers.

The Benefits of Adopting the APRN Consensus Model Requirements

For Consumers

Clearly understand the role of APRNs, know that there is a competent individual managing your care and that the practice of APRN is regulated consistently for public protection.

For Employers and Other Health Care Workers

Clearly understand the preparation, training and scope of practice of APRNs you are working with.

For Current APRNs

Have confidence in knowing that you will meet licensure requirements to practice and that your role and scope of practice will not change if you need to relocate.

For Future APRNs

Have confidence that your education program is accredited and that you are receiving the appropriate education and training for preparation and entry into advanced practice nursing.

For Boards of Nursing

Fulfill your public protection role and have confidence that licensed APRNs entering your state are competent, having met uniform requirements for licensure from other states.

For Legislators

Be accountable to your constituents that an APRN regulatory model is being employed in recognition of public protection.

This information taken from the National Council of State Boards of Nursing website.



THE STATE
of **ALASKA**

GOVERNOR BILL WALKER

Department of Commerce, Community,
and Economic Development

BOARD OF NURSING

550 West 7th Avenue, Suite 1500
Anchorage, AK 99501-3567
Main: 907.269.8161
Fax: 907.269.8196

March 6, 2015

Senator Cathy Giessel
State Capital Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel:

I am writing to you both as the Chair of the Board of Nursing and as a practicing Advanced Nurse Practitioner. The Board of Nursing supports SB 53, "an act related to advanced practice registered nursing." This bill updates a 34 year old Alaska statute. If passed, the old title "advanced nurse practitioner" (ANP) will be updated with the title "advanced practice registered nurse" (APRN). This change will align Alaska statutes with a nationwide movement called "The APRN Consensus Model."

Under current Alaska law, "advanced nurse practitioner (ANP)" is broadly defined. The specific roles that are included as "advanced nurse practitioner" are not delineated. In regulation, nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists are included under the broad term "advanced nurse practitioner". Nurse anesthetists are identified in a separate regulation. The APRN Consensus Model includes all four advanced practice specialties under the umbrella title "APRN."

The APRN Consensus Model, promulgated by the National Council of State Boards of Nursing and more than 50 other national nursing organizations, education accreditation organizations, and certifying bodies seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will reduce confusion on the part of patients and families, and will expedite insurance reimbursement by eliminating confusion about service providers. It will also allow APRNs from other states to more easily obtain AK licensure, and vice versa.

Speaking for myself, I have served on the Board of Nursing for 7 years. This experience has provided me an opportunity to attend National Council of State Boards of Nursing (NCSBN) meetings and conferences. At these meetings, nurse practitioners from the states and territories express agreement that a consistent title would help lessen confusion in the role and function of a nurse practitioner.

The Board of Nursing understands that SB 53 does not change the ANP scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,

Denise C Valentine ANP-C

Denise C. Valentine, ANP, Chair

Alaska Board of Nursing

denisecvalentine@gmail.com

March 3, 2015

Sen. Cathy Giessel
Alaska State Capitol, Room 427
Juneau, AK 99801

RE: Senate Bill 53 – Related to Advanced Practice Registered Nursing - SUPPORT

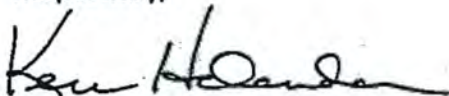
Dear Sen. Giessel,

On behalf of AARP Alaska's 86,000 members, we appreciate your leadership in sponsoring SB 53, and we offer our support. As the profession of nursing evolves, so does the need for updated nomenclature, and SB 53 accomplishes that by combining nurse practitioners, certified nurse-midwives, certified clinical nurse specialists, and nurse anesthetists into a single category, Advance Practice Registered Nurse (APRN).

Since its inception, AARP Alaska has been co-lead of the Alaska Nurse Action Coalition, which was formed through a national initiative of AARP and the Robert Wood Johnson Foundation to focus on recommendations contained in the 2010 Institute of Medicine report on nursing. As a participant with nurses from around the state, representing the gamut of practice settings and specialties, I have been gratified by the opportunity to collaborate on ways to expand opportunities for professional growth and leadership, promotion of best practices, and the development of a virtual Alaska Center on Nursing Excellence (ACONE <http://akcenterofnursing.org>).

The combination of all advance practice nurses under one title, APRN, will provide uniformity in licensure, accreditation, certification and education. It will also simplify third party reimbursement by clarifying the service provider. SB 53 does not alter scope of practice, but simply calls the high quality and professional care provided by the new name of Advance Practice Registered Nurse (APRN). We are pleased to offer our support and best wishes for passage and enactment of SB 53.

Respectfully,



Ken Helander
Advocacy Director

Khelander@aarp.org
907-762-3314

Margaret Rader CNM
PO Box 82205
Fairbanks, Alaska 99708

February 23, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel:

I am writing in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,

Margaret Rader ANP CNM
907 455 6357 (home)
907 750 6338 (cell)
email: margaret.rader@tananachiefs.org

Amy Myers
8661 Brookridge Drive
Anchorage, AK 99504

February 24, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel:

I am writing in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

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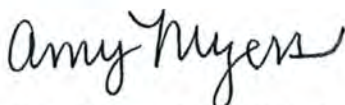
The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

I started the CNS journey back in 2009 when I became interested in becoming an advanced nurse. I had been a nurse for over 22 years and I knew I wanted to be in an advanced role. Being a CNS provides me with a way to still be clinical and work on improving quality care and outcomes. I remember going to the Board of Nursing with the Director of Nursing Practice during my school rotations and did not think it would be possible that a CNS would have title protection. Now that we do, coming in line with The Consensus Model would better align all of the advanced practice nurses into the role that we were trained to function with the rest of the nation. Your consideration and support is greatly appreciated.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,



Amy Myers, MSN, RN, ACNS-BC, CNS-CP, CAPA, CGRN
907-339-2423
Abmyers5633@yahoo.com

18575 Seward Highway
Anchorage, AK 99516

March 15, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel:

I am writing in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

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Thank you very much for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,

Andrea M. Hiles

Andrea M. Hiles, ANP, CNM
CNM Specialist
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(907) 729-8669
Andrea.m.hiles@gmail.com
ahiles@scf.cc

3104 Brookside Drive
Anchorage, AK 99514
lhartz@ak.net
c. 907-227-5253

February 26, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

Dear Senator Giessel:

Thank you for sponsoring SB 53, "an act related to advanced practice registered nursing." The bill will update the Advanced Nurse Practitioner (ANP) title, first adopted in 1980, to Advanced Practice Registered Nurse (APRN) making it consistent with the APRN title now used in the majority of states.

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists with nurse anesthetists as a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa which will increase access to care for Alaskans.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this important issue.

Sincerely,

Lynn Hartz MSN, FNP-BC
Member Alaska Nurse Practitioner Association
Member APRN Alliance
Past member Alaska State Board of Nursing 1983-1984 and 1999-2003



February 26, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

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Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

As an advanced nurse practitioner (Certified Nurse-Midwife and Family Nurse Practitioner) who is also a health-related business owner, I value the opportunity to create state language that is consistent with emerging national standards for advanced nursing practice. FASDx Services LLC is the referral/coordination hub for the Anchorage Fetal Alcohol Spectrum Disorders (FASD) Diagnostic Team.

Other health professionals and consumers may find the new language more recognizable (i.e. with the RN in the acronym) as relating to nursing practice. We've come a long way since the 1960's when the nurse practitioner role was first developed, and, as one of the early ANPs in Alaska (my ANP # is 108), I have watched as the increasing varieties of educational titles/initials have grown to further confuse folks who are not in our field.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN...and it will be consistent with the rest of the U.S.

Thank you very much for your advocacy for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,



Marilyn Pierce-Bulger, ANP
FASDx Services LLC
741 Sesame Street Suite 1B
Anchorage, AK 99503-6657
907/865-3279 phone 907/865-7979 fax
marilyn timer@fasdxservices.com

March 6, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

Dear Senator Giessel:

We are writing as the State-Co Leads for the Alaska Nursing Action Coalition to thank you for sponsoring SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

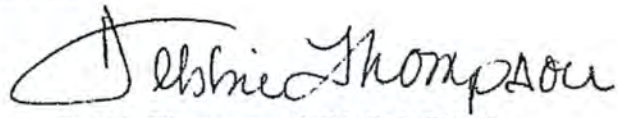
The Alaska Nursing Action Coalition is a nurse-led organization formed in 2012 to advocate for nurses and coordinate the work of Alaska nurses as we look for ways to improve the health of all Alaskans. One of the strategies we support is clearing up the confusion that surrounds nursing titles, even among nurses. The use of the APRN designation will align Alaskan Advanced Practice Register Nurse titles with national recommendations and trends, helping to create more efficient and effective collaboration between health care providers, patients and families, and other entities and organizations charged with caring for the health of our communities.

Thank you very much for your advocacy on this important issue.

Sincerely,



Pat Dooley, BSN, RN, CHPN, MHA



Debbie Thompson, BSN, RN, CNOR

Co-Leads for the Alaska Nursing Action Coalition

March 6, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

Dear Senator Giessel:

We are writing to express our support for SB 53, "an act related to advanced practice registered nursing." This bill updates the 34-year-old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain Alaska licensure, and vice versa.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this important issue.

Sincerely,



Becky Hultberg
President/CEO



APRN ALLIANCE

February 22, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

Dear Senator Giessel:

We are writing to thank you for sponsoring SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this important issue.

Sincerely,

A handwritten signature in black ink that reads "Laura Sarcone CNM". The signature is fluid and cursive.

Laura Sarcone CNM
Co-chair APRN Alliance

A handwritten signature in black ink that reads "Chris Logan CRNA". The signature is fluid and cursive.

Chris Logan CRNA
Co-chair APRN Alliance

Alaska Nurse Practitioner Association



A Meeting Place for Nurse Practitioners in the Last Frontier

February 23, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel.

I am writing on behalf of the Alaska Nurse Practitioner Association in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

SB 53 does not change scope of practice. ANPs, including CNMs, and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this important issue.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracey Wiese".

Tracey Wiese, ANP
President

AKANA

ALASKA ASSOCIATION OF NURSE ANESTHETISTS

C/O ALASKA NURSES ASSOCIATION - 3701 E. TUDOR RD., SUITE 208 - ANCHORAGE, AK 99507

February 22, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

Dear Senator Giessel.

I am writing on behalf of the Alaska Association of Nurse Anesthetists in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) and nurse anesthetist (NA) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The national Consensus Model creates an umbrella title for advanced practice nurses and brings all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

Alaska is home to approximately 110 CRNAs. When SB 53 becomes law we will continue to provide the same quality anesthesia care to Alaskan patients, just as we have for decades.

SB 53 does not change scope of practice. Nurse practitioners and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this important issue.

Sincerely,



Jeff Worrell, LtC USAF (retired)
CRNA, MSN

President- Alaska Association of Nurse Anesthetists



March 6, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel:

I am writing in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

SB 53 does not change scope of practice. ANPs and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: APRN.

Thank you very much for your advocacy on this issue. Please feel free to contact me if you have questions or concerns.

Sincerely,

A handwritten signature in cursive script that reads "Daniel Nelson".

Daniel Nelson
President, Alaska Pharmacists Association
460 Snowy Owl Lane
Fairbanks, AK 99712
907-347-7220



Alaska Nurses Association
3701 E. Tudor Road, Suite 208
Anchorage, Alaska 99507
(907) 274-0827
www.aknurse.org

March 9, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, Alaska 99801

Dear Senator Giessel,

We are writing on behalf of the Alaska Nurses Association in strong support of SB 53: "An Act related to Advanced Practice Registered Nursing." This bill will update the 34-year-old title "advanced nurse practitioner" or "ANP" to "advanced practice registered nurse" or "APRN" and aligns Alaska statute with a national movement called "The Consensus Model."

Under current Alaska law, the title "ANP" includes nurse practitioners, certified nurse-midwives, and certified clinical nurse specialists. Nurse anesthetists are currently a separate category of clinician. The Consensus Model includes all four advanced practice nursing specialties under the title of "APRN."

The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion over service providers. This uniformity will also boost patient understanding of the APRN role, allowing patients to better participate in their healthcare. It will also allow APRNs from other states to more easily obtain Alaska nursing licensure, and vice versa. Uniformity in licensing means more healthcare providers for Alaska, and increased access for patient care.

SB 53 does not change scope of practice. Alaska's advanced practice registered nurses will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years; they will just have a new name: APRN.

Once again, we sincerely thank you for your advocacy on this important issue.
Sincerely,

Donna Phillips, BSN, RN
Labor Council Chair
Alaska Nurses Association

Jane Erickson, RN, CCRN
Vice President, Board of Directors
Alaska Nurses Association

Arlene Briscoe, RN-BC
Legislative Chair
Alaska Nurses Association



Alaska Affiliate of the ACNM
P.O. Box 230231
Anchorage, AK 99523-0231
www.alaskamidwives.org

February 23, 2015

Senator Cathy Giessel
State Capitol Room 427
Juneau, AK 99801

RE: SB 53

Dear Senator Giessel.

I am writing on behalf of the Alaska Affiliate of the American College of Nurse-Midwives in support of SB 53, "an act related to advanced practice registered nursing." This bill updates the 34 year old title "advanced nurse practitioner" (ANP) to "advanced practice registered nurse" (APRN) and aligns Alaska statute with a nationwide movement called "The Consensus Model."

Under current Alaska law the title "ANP" includes nurse practitioners, certified nurse-midwives (CNMs), and certified clinical nurse specialists. Nurse anesthetists are a separate category of clinician. The Consensus Model includes all four specialties under the title "APRN."

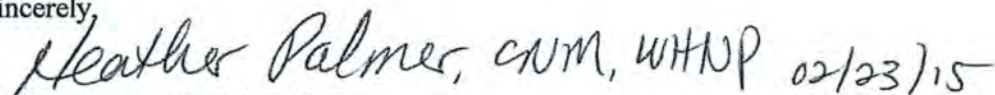
The Consensus Model, promulgated by the National Council of State Boards of Nursing, seeks uniformity in APRN licensure, accreditation, certification, and education. Uniformity will expedite insurance reimbursement by eliminating confusion about service provider; it will allow APRNs from other states to more easily obtain AK licensure, and vice versa.

Alaska is home to approximately 70 CNMs. In 2013, CNMs attended 31% of vaginal births in the state. When SB 53 becomes law we will continue to launch healthy Alaskan families, just as we have for 34 years.

SB 53 does not change scope of practice. ANPs, including CNMs, and nurse anesthetists will continue to provide the same high quality, safe, accessible care they have provided to Alaskans across the state for 34 years. They will just have a new name: Advanced Practice Registered Nurse (APRN).

Thank you very much for your advocacy on this important issue.

Sincerely,


Heather Palmer, CNM, WHNP
President, Alaska Affiliate of the American College of Nurse-Midwives