

# SB401

Measure Title: RELATING TO NURSING.

Report Title: Advanced Practice Registered Nurses; Health Care Practitioners; Minors; Assisted Community Treatment; Health Services

Description: Allows advanced practice registered nurses 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.

Companion: [HB912](#)

Package: None

Current Referral: CPH

Introducer(s): BAKER, ESPERO, INOUYE, KIDANI, Nishihara

**PRESENTATION OF THE  
BOARD OF NURSING**

TO THE SENATE COMMITTEE ON COMMERCE,  
CONSUMER PROTECTION, AND HEALTH

TWENTY-NINTH LEGISLATURE  
Regular Session of 2017

Wednesday, February 22, 2017  
9:00 a.m.

**TESTIMONY ON SENATE BILL NO. 401, RELATING TO NURSING.**

TO THE HONORABLE ROSALYN H. BAKER, 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 Senate Bill No. 401, Relating to Nursing, which would allow an advanced practice registered nurse (“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 care service providers.

The Board supports this bill which 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.

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.

Testimony on Senate Bill No. 401  
Wednesday, February 22, 2017  
Page 2

Thank you for the opportunity to testify in support of Senate Bill No. 401.



# HAWAII STATE CENTER FOR NURSING

Connecting Nurses. Transforming Healthcare.

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**Written Testimony Presented Before the  
Senate Committee on Commerce, Consumer Protection, and Health  
February 22, 2017 at 9:00 AM**

**by**

**Laura Reichhardt, NP-C, APRN, Director  
Hawai'i State Center for Nursing  
University of Hawai'i at Mānoa**

## **SB 401 RELATING TO NURSING**

Chair Baker, Vice Chair Nishihara, and members of the Senate Committee on Commerce, Consumer Protection, and Health. Thank you for hearing testimony for SB 401 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 propose 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, SB 310 CD 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 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 Plan<sup>1</sup> (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 develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists for the people of Hawai'i who are 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 by 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 services<sup>2</sup> from "'Licensed health care practitioner" to include dentists

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

<sup>2</sup> **[§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.

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 Plan<sup>3</sup> 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 for 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 your 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.

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<sup>3</sup> <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.



## HAWAII GOVERNMENT EMPLOYEES ASSOCIATION

AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

The Twenty-Ninth Legislature, State of Hawaii  
The Senate  
Committee on Commerce, Consumer Protection, and Health

Testimony by  
Hawaii Government Employees Association

February 22, 2017

### S.B. 401 - RELATING TO NURSING

Thank you for hearing testimony for SB 401 Relating to Nursing. The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO strongly supports passage of this measure with amendments.

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.

The Hawaii Government Employees Association supports amendments to this bill pertaining to HRS 334 which specify that the APRN must hold a psychiatric specialization. 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.

A similar request to further define the APRNs in Section 557-29 related to psychiatric specialty is presented at this time. The Hawaii Government Employees Association respectfully requests your consideration of adding the requirement that the APRN must hold a psychiatric specialty. The Hawaii Government Employees Association 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 your longstanding support for APRNs and the opportunity to testify in strong support of this measure.

Respectfully submitted,

Randy Perreira  
Executive Director



TO: Senator Rosalyn Baker, Chair, and Sen. Clarence Nishihara, Vice Chair, and members, Committee on Commerce, Consumer Protection, and Health

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

RE: SB 401 Relating to Nursing; IN STRONG SUPPORT WITH COMMENTS

HEARING: 9:00 February 22, 2017, conference room 229

Thank you for the opportunity to testify in STRONG SUPPORT WITH COMMENTS on SB 401. 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 those members of our community have severe mental illness and/or substance use disorder, so much so that they 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 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 the prognosis is.

ACT requires a psychiatrist to assess the individual, ensure that they meet the criteria for an ACT order, and develop and oversee a treatment plan if the Order is granted.

There has been great difficulty getting ACT orders implemented, and one of the reasons is the severe lack of psychiatrists available for this purpose. 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 oversee 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 file.

Dozens of advocates, community mental health agencies, mental health professionals, and family members have been participating in the Mental Health Task Force (formerly chaired by Sen. Chun Oakland and currently chaired by Rep. Belatti) as well as in the ACT Working Group, which I convene. For the past three years, we have been discussing needed changes in the ACT law so it could be properly implemented.

***Our request is that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization; further, to allow this bill to flex to the future and not require frequent legislative updates, the language pertaining to APRN specialization defers to the Hawai'i Board of Nursing to regulate which specializations meet the qualifications needed to be a licensed APRN in the state.***

Thank you for the opportunity to submit this testimony. Please contact me if you have any questions. [mgrambs@gmail.com](mailto:mgrambs@gmail.com) 808 778 9178

**Written Testimony Presented Before the  
Senate Committee on Commerce, Consumer Protection, and Health  
February 22, 2017 at 9:00 AM**

**by  
Lynn A. Milligan MSN, RN**

**SB 401 RELATING TO NURSING**

Chair Baker, Vice Chair Nishihara, and members of the Senate Committee on Commerce, Consumer Protection, and Health. Thank you for hearing testimony for SB 401 Relating to Nursing. I am **[INDIVIDUAL OR ORGANIZATION]** 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 propose 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, SB 310 CD 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 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 it's own standards for education, clinical training, and has it's own national board examination.

**[INDIVIDUAL OR ORGANIZATION]** *requests that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. Further, [INDIVIDUAL OR ORGANIZATION] 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 Plan<sup>1</sup> (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 develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists for the people of Hawai'i who are 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 by 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 services<sup>2</sup> from "'Licensed health care practitioner" to include 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 Plan<sup>3</sup> 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)

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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 for vulnerable populations.

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Thank you for your longstanding support for APRNs and ensuring access to care for Hawai'i's people. [INDIVIDUAL OR ORGANIZATION] 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.

**Written Testimony Presented Before the  
Senate Committee on Commerce, Consumer Protection, and Health  
February 22, 2017 at 9:00 AM**

**by**

**Dr. Lenora Lorenzo, APRN, BC-FNP, GNP, ADM, FAANP**

**SB 401 RELATING TO NURSING**

Chair Baker, Vice Chair Nishihara, and members of the Senate Committee on Commerce, Consumer Protection, and Health. Thank you for hearing testimony for SB 401 Relating to Nursing. I am Dr. Lenora Lorenzo APRN 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**

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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:** Tuesday, February 21, 2017 6:05 AM  
**To:** CPH Testimony  
**Cc:** teresa.parsons@hawaii.edu  
**Subject:** Submitted testimony for SB401 on Feb 22, 2017 09:00AM

**SB401**

Submitted on: 2/21/2017

Testimony for CPH on Feb 22, 2017 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Teresa Parsons	Individual	Support	No

Comments: Written Testimony Presented Before the Senate Committee on Commerce, Consumer Protection, and Health February 22, 2017 at 9:00 AM by Teresa A. Parsons, MA, MN, APRN-BC SB 401 RELATING TO NURSING Chair Baker, Vice Chair Nishihara, and members of the Senate Committee on Commerce, Consumer Protection, and Health. Mahalo for allowing me to submit testimony for SB 401 Relating to Nursing 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 propose 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, SB 310 CD 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 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. I request the sections of this bill pertaining to HRS 334 specify the APRN must hold a psychiatric specialization. The Hawai'i State Health Innovation Plan (HSHIP) identifies 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 develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists for the people of Hawai'i who are 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 by 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 services from "Licensed health care practitioner" to include 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 Plan 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. APRNs with specialties in pediatric and adolescent health 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 for vulnerable populations. A similar request to further define the APRNs in Section 557-29 related to psychiatric specialty is presented. I respectfully request your consideration of adding the requirement for the APRN to hold a psychiatric specialty, and 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 your longstanding support for APRNs and ensuring access to care for Hawai'i's people. I respectfully request a 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.

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**SB401**

Submitted on: 2/20/2017

Testimony for CPH on Feb 22, 2017 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Kathleen Yokouchi	Individual	Support	No

Comments: In very strong support! Kathy Yokouchi

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**SB401**

Submitted on: 2/20/2017

Testimony for CPH on Feb 22, 2017 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Yvonne Geesey	Individual	Support	No

Comments: please allow APRNs to assist in these matters, mahalo!

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**SB401**

Submitted on: 2/20/2017

Testimony for CPH on Feb 22, 2017 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Karen Tessier	Individual	Support	No

Comments:

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**Written Testimony Presented Before the  
Senate Committee on Commerce, Consumer Protection, and Health  
February 22, 2017 at 9:00 AM**

**By  
Susan Lee BSN, RN, WCC**

**SB 401 RELATING TO NURSING**

Chair Baker, Vice Chair Nishihara, and members of the Senate Committee on Commerce, Consumer Protection, and Health. Thank you for hearing testimony for SB 401 Relating to Nursing. I am **[INDIVIDUAL OR ORGANIZATION]** 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 propose 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, SB 310 CD 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 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 it's own standards for education, clinical training, and has it's own national board examination.

*Susan Lee requests that the sections of this bill pertaining to HRS 334 specify that the APRN must hold a psychiatric specialization. Further, I 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 Plan<sup>1</sup> (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 develop treatment plans for these individuals. The intended outcome of this amendment is to improve timely access to qualified behavioral health specialists for the people of Hawai'i who are 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 by 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 services<sup>2</sup> from "'Licensed health care practitioner" to include 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 Plan<sup>3</sup> 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)

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

<sup>2</sup> **[§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.

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

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 for vulnerable populations.

*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 your 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.

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Testimony for CPH on Feb 22, 2017 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Katherine Finn Davis	Individual	Support	No

Comments:

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