

# Advanced Registered Nurse Practitioner Care

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Official Newsletter of ARNPs United

March, 1997

## Legislative Update: Prescriptive Authority

by Tracy Lin, ARNP, Legislative Chair and  
Gail Toraason McGaffick, JD, ARNPs United Lobbyist

Where are we? With the deadline looming for committee action on bills, Senate Bill 5232 (completion of prescriptive authority) passed out of the Senate Health and Long-Term Care Committee with time to spare. In order to move the bill out of committee we needed to make several amendments to the bill. Unfortunately, even with significant concessions on the part of ARNPs United, the Washington State Medical Association remains opposed.

Fortunately, Senator Deccio saw the wisdom of our proposal and was instrumental in the bill moving forward. SB 5232 is now before Senate Ways and Means, because implementation will require a surcharge on the license of all ARNPs of approximately \$25 per license renewal period.

What does the new version of "Substitute" SB 5232 look like? Gail and her partner in this work, Sharon Case, the lobbyist for AAPPN, have dubbed our new substitute bill the "United Nations Act." You'll understand why in a few sentences.

You may recall that the original version of SB 5232 had the Nursing Care Quality Assurance Commission seeking input from an advisory committee composed of ARNPs, MDs, and a pharmacist. The role of the advisory committee was to monitor implementation of the act. In addition, there were no limits in SB 5232 on ARNPs prescribing Schedules II through IV.

WSMA countered with a proposal that would have the Medical Care Quality Assurance Commission (MCQAC) oversee protocols developed by physicians and ARNPs, that would require physician supervision, with no role for the NCQAC. To say we were at an impasse would be an understatement. We're sure it feels like *deja vu* to those of you who have followed this issue over the past ten years.

ARNPs United countered with a proposal which would create a "United Nations" approach to this issue. The NCQAC, MCQAC, and the Board of Osteopathic Medicine and Surgery are directed to jointly adopt virtually identical rules that would create parameters for ARNPs entering into "collaborative agreements" with physicians to prescribe Schedules II through IV controlled substances.

The other portion of this issue that resembles the United Nations, is that each group has its own cultural sensitivity. WSMA does not like the word "consulting", our preferred word. ARNPs United does not like the words "protocols" or "supervision", two of WSMA's fa-

vorite words. This is why the words "collaboration agreement" were selected. We believe that these words are broad enough to allow the our "United Professions" to develop a workable proposal.

The reality of this issue is that both nurse practitioners and physicians have a problem. The current set of informal procedures that have allowed nurse practitioner patients' to have timely access to Schedule II through IV controlled substances are coming under more scrutiny from the NCQAC, and we predict for the MDs, soon the MCQAC. Therefore, without some resolution, some of your patients will not receive the level of care they have need.

We really believe that WSMA wants to pass some legislation to solve this dilemma. However, what we're dealing with is the fear of WSMA that physicians are becoming obsolete; and our legislation looks like one more nail in their coffin. This level of fear makes it much more challenging to negotiate an acceptable solution. Why is negotiation with WSMA so important, you might ask? Very simply, they have a lot of political clout in Olympia. How can we balance that? That's where you come in.

Here's what you need to do. Call your legislators and urge their support for Substitute Senate Bill 5232. The legislative Hotline Number is 800.562.6000. Also, please continue to have your physician colleagues send letters to their legislators, as well. This is making a tremendous difference. Thanks for your ongoing help in our advocacy efforts.

## More Legislative Update

by Tracy Lin, ARNP, Legislative Chair and  
Gail Toraason McGaffick, JD, ARNPs United Lobbyist

In addition to completion of prescriptive authority, ARNPs United is also tracking a wide variety of other legislation. Here are the highlights. If one of these issues is of interest, we encourage you to obtain a copy of the bill from the Legislative Bill Room at 360.786.7573, or via the internet at <http://www.leg.wa.gov>.

**Substitute House Bill 2018** Representative Dyer's health care reform legislation. This is a very controversial proposal for stabilizing the individual insurance market. Changes are made to the state's pre-existing condition laws to restrict people from going in and out of the health care market depending on when they need health insurance. The extent to which this is occurring and its impact on the cost of rates is the subject of considerable debate.

In addition, the legislation directs the Health Care Authority, instead of the Insurance Commissioner, to review national standards (NCQA, URAC) on utiliza-

tion review, grievance procedures, and network adequacy and if determined adequate to "deem" that health carriers that have these accreditations meet the requirements of this bill.

Due to the long-standing polarity between the Insurance Commission and insurers, this bill transfers or limits some portions of the Insurance Commissioner's power. As a result, the Insurance Commissioner is opposed to this legislation, and the insurance industry is supportive.

**House Bill 2223** This legislation, introduced in late February, severely limits the application of any category of provider to the Basic Health Plan "look-a-like" market. Currently, insurers are required to offer consumers a plan equivalent to the BHP. ARNPs United has a position in opposition to this legislation.

**House Bill 1620** This legislation abolishes the corporate practice of medicine. This means that health care professionals, with the exception of dentists, may join together with others to form whatever type of corporate or other authorized business entity they want. This is really the brave new world and would put Washington in the forefront of major change in this area.

**HB 1952** This legislation would repeal certificate of need for hospitals and ambulatory surgery centers (ASCs). In addition, it would require licensure for ACSs. What was once considered agreed upon legislation between the Washington State Hospital Association (WSHA) and the WSMA is now the subject of considerable controversy. While this bill will pass the House, it is expected to have significant problems in the Senate.

**SB 5625** This is legislation introduced by Senator Franklin and others at the request of WSNA. It contains important clinical sovereignty language for all providers, as well as additional disclosure requirements. ARNPs United signed in to support this legisla-

tion. Because of significant concerns raised by the WSHA and the insurance industry, we do not expect this bill to pass this year.

**SHB 1057** Limiting public disclosure of complaints filed under the Uniform Disciplinary Act

**SHB 1191** Providing for review

of mandated health insurance benefits

**HB 1498** Limiting access to records for utilization review of services provided by mental health practitioners

**HB 1536** Modifying regulation of respiratory care practitioners

**HB 1798** Licensing orthotists and prosthetists

**HB 1820** Concerning health care liability reform

**HB 1920** Regulating clinical laboratory science practitioners

**HB 1996** Providing for referrals to physical therapists from ARNPs

**HB 2001** Including medical rehabilitation services in the Basic Health Plan

**SB 5082** Revising procedures for mental health and chemical dependency treatment for minors

**SSB 5178** Adopting the Diabetes Cost Reduction Act

**SB 5298** Prohibiting health insurance discrimination on the basis of genetic information

**SB 5528** Protecting children and vulnerable adults by using background checks

**SB 5665** Providing requirements for mental health utilization review

**Presidents Corner**

by Ted Ritter

I was fortunate enough to be selected as a Leadership Fellow to the ACNP summit February 20, 1997. There we learned negotiation tactics and conflict resolution, how to forge better ties with industry, media skills and the realities of dealing with politicians. It was one of the best days I have ever spent as a professional and I want to thank the Board for selecting me. I was also the State Representative to the Summit. It was a very enriching experience and also an eye opening one.

While I admit that we have had some recent problems with Prescriptive Authority and other issues, we have the great fortune to be independent practitioners and independent prescribers. Illinois' Nurse Practice Act has sunsetted. They are fighting for their very survival.

The College has made their number one priority for 1997 the issue of direct reimbursement of NPs by Medicare. A number of states pledged monetary support. I pledged that we would help as much as possible but that we were not currently able to provide financial support. They asked that we provide a smoked salmon to the cause. I told them that if California loaned us the money we would.

On another issue, I am disappointed to say that we never heard from WSNA about our affiliation agreement. I can only assume that they feel it is their best interest at this time to not have an operational contract with ARNPs United. Their lobbyist however has been helping with our prescriptive authority struggle. I still

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hold WSNA in the highest regard and would encourage all of us to support them as best we can.

Finally, we have made some movement with prescriptive authority. We have agreed to a collaborative agreement with rules to be determined by an ad hoc committee composed of WSNQAC and WSMQAC. There will be more forthcoming. The bill is not all of what we wanted but it is all we could negotiate at this time around. As our lobbyists keep telling me, there are political realities. We will continue to pursue complete independence over the years.

### Classified Ads

#### Psychotherapist

Established group private practice in South Everett, WA seeks a licensed psychotherapist. Areas of specialization needed are children, adolescents, families, eating disorders and/or chemical dependency. Full or part-time affiliation or office leasing available. Contact David Rasmussen, PsyD at 206.347.7275 or send vitae to Evergreen Park Professionals, 127 E Intercity, Suite A, Everett, WA 98208-2751.

#### Psychiatric ARNP

Small progressive mental health center in Port Townsend, WA is seeking an experienced ARNP with prescriptive authority to provide medication services. Weekly psychiatric consultation, team-centered clinical staff, catchment area of 25,000, direct input to policy formation. Position available immediately. Full-time with benefits. EOE. Salary: DOE. Contact: Chip Barker, Jefferson Community Counseling Center, 802 Sheridan, Port Townsend, WA 98368, phone: 360.385.0321 or E-mail: barker@olympen.com.

#### NP for Clinical Faculty

Saint Martin's College, Lacey, WA, is seeking one part-time adjunct clinical faculty for the MSN Family Nurse Practitioner (FNP) program. Washington State RN and ARNP licenses required. Salary is dependent upon qualifications and experience. Please call Dr. Maura Egan, MSN Director at 360.438.4376.

#### Adult NP/PA

Providence Health System, Everett, WA (PHS), is seeking a PA-C or ARNP to work on call in our chemical dependency program. Requires strong general medicine skills and an interest in treating chemical dependency. Experience in chemical dependency preferred. Will work on call for weekend coverage, approximately one weekend per month. We offer a competitive salary, continued education and a progressive wellness program. For health reasons, PHS chooses to hire non-tobacco users only. Please send resume to: Providence Health System, Human Resource Dept, PO Box 1147, 13th and Colby, Everett, WA 98206, phone: 206.261.4460 or 800.932.5627.

#### Adult • Urgent Care • Family NP

Kaiser Permanente has the following excellent full-time and part-time opportunities in Primary Care/Urgent Care for certified nurse practitioners at our medical offices in Portland and Salem, OR and Vancouver and Longview, WA: Internal Medicine in SE Portland, Adult or Family Practice in Salem, Family Practice in Vancouver and Longview. Candidates must be licensed or eligible for licensure with prescriptive privileges in Oregon and/or Washington. In addition to a collegial and professionally stimulating practice, we offer a competitive salary comprehensive flexible benefit package which includes family medical/dental, life and disability insurance, a generous pension program, TSA, allowance for CME and more. Please send resume to Judy Parmenter, Professional Staff Recruiter, Kaiser Permanente, 500 NE Multnomah, Suite 100, Portland, OR 97232-2099. Call 800.813.3762. EOE.

#### Emergency Room NP

Rural Central Washington, year-round outdoor recreational opportunities. Experienced emergency nurse practitioner to staff weekend emergency room hours (on-site sleeping quarters provided). Require-

ments: WA license, ACLS certification. Salary: \$70-75K, percentage of collections/billing. Contact: Kittitas County Hospital District #2, Attn: Commissioners or Administrator, 505 Power Street, Cle Elum, WA 98922. Phone: 509.674.5950. Fax: 509.674.7626.

#### Pediatric • Family ARNP

Pediatric and Family ARNP needed by growing clinic, should have ability to work alone at times and possess good diagnostic skills. Clinic is friendly, casual with competitive benefits. Flexible hours. Full-time or part-time. Clinic is open 8 am to 8 pm. Contact: Auburn Children's Clinic, 25 Second St NW, Auburn, WA 98001, phone: 206.939.6541 and ask for Cheryl McGill or Dr Thompson.

### Continuing Education

#### Clinical Pharmacology Series 1997

This series of six one-day courses (8 contact hours each session) is designed as a pharmacology update for nurse practitioners working in a variety of specialties. The dates and courses are:

- ◆ Pediatric Drug Therapy, 03/19/97
- ◆ Geriatric Drug Therapy, 04/16/97
- ◆ Adult Drug Therapy, 05/08/97
- ◆ Women's Health Drug Therapy, 05/22/97
- ◆ Neuropsychotropic Drug Therapy 06/13/97

Location: Hyatt Regency, Bellevue, WA for the Neonatal Drug Therapy (02/13/97) course only, all other courses will be held at the Shoreline Conference Center, Seattle, WA. Contact Continuing Nursing Education, University of Washington, PO Box 357260, Seattle, WA 98195, phone: 206.543.1047.

#### Suturing and Laceration Management Workshop

March 28-29, 1997 at Bellevue Community College Upper Campus, Bellevue, WA. This workshop enables the clinician to assess and manage wounds as presented in the office or clinic. Fee \$160. Call Bellevue Community College CNE at 206.641.2012 for more information.

#### Clinical Delegation: The Art and the Science

April 4, 1997. Location: St Martin's College, Lacey, WA. Time: 8 am - 5 pm. Fee: \$85 which includes lunch. 7.5 CE hours. This conference will focus on building and strengthening skills for clinical delegation. Significant time will be spent assisting individuals in assessing, monitoring and evaluating the caregivers performing the delegated tasks. Topics include: The law, nurse delegation & expanded nurse delegation (ESSHB 1908), risks and liabilities associated with delegation, relationship building, developing trust, effective communication, giving and receiving feedback - developing and coaching others, accountability, and practice delegation sessions. To register, contact the St Martin's College Department of Nursing at 360.438.4376.

#### Vulvar & Vaginal Lesion ID & Biopsy Course/IUD Insertion

April 10, 1997. Location: Seattle, WA. 4.0 hours (P) and 4.8 contact hours and IUD insertion 4.0 hrs (P) and 4.8 contact hours (pharm hrs available). Each course 1/2 day. CME Solutions, LLC for information or to register, contact Karen Taylor, 206.865.9005, fax: 206.865.0616.

#### Endometrial Biopsy

April 11, 1997. Location: Seattle, WA. 8.0 hours (P) and 9.8 contact hours (pharm hours available). CME Solutions, LLC for information or to register, contact Karen Taylor, 206.865.9005, fax: 206.865.0616.

#### Casting and Splinting Workshop

May 17, 1997. Location: Seattle Pacific University. Provides participants with didactic information on the assessment and management of fractures and a practice session for cast and splint application. \$70.00. For information, call Donna Allis at 206.281.2649.

#### Pharmacotherapeutics for ARNPs

May 30, 1997. Location: LaQuinta Inn, 1425 27th St E, Tacoma, WA. A variety of pharmacotherapeutic topics of interest to all ARNP specialties will be presented in general and concurrent sessions. Contact Pacific Lutheran University CCNL, phone: 206.535.7683, fax: 206.535.7590 or E-mail: <ccnl@plu.edu>.

#### Gynecology Review

June 5-6, 1997. Location: Seattle, WA. 14.5 hours (P) and 14.8 contact hours (pharm hours available). CME Solutions, LLC for information or

to register, contact Karen Taylor, 206.865.9005, fax: 206.865.0616.

**2nd Annual Primary Care Mental Health Symposium:  
"Psychiatric Issues in Primary Care"**

June 6-7, 1997. Location: Meydenbauer Center, Bellevue, WA. Topics include psychiatric diagnostics, pharmacology, diagnostic dilemmas, counseling techniques, pain management, special issues in adolescent psychiatry, "doctor"/patient relationships in primary care and more. Target audience: ARNPs, primary care physicians, PAs. Approval pending through WSNA for 14.9 contact hours (including 4.0 pharmacology hours). Primary speakers: John Wynn, MD and David Tauben, MD. For more information or to request a brochure, contact: Orca Healthcare Resources, phone: 206.328.9416, fax: 206.328.9217.

**Reproductive Health '97**

November 13-16, 1997. Hyatt Regency Phoenix, Phoenix, AZ. This meeting will be held in conjunction with Planned Parenthood Federation of America and cosponsored by the National Assoc of Nurse Practitioners in Reproductive Health. Lecture style sessions focus on recent advances in cancer prevention & detection, changes in diagnosis of STDs, issues surrounding primary care, new developments in medical abortion & contraception & other issues related to reproductive health. For more information, contact Amy McCormick at 202.466.3825.

**Adolescent Reproductive Health '97**

November 21-23, 1997. Location: Ritz-Carlton Tysons Corner, McLean, VA. Lecture style sessions focus on the health care needs of teens, adolescent health care challenges, adolescent sexuality, long-acting contraceptives, teens and media, and teens and AIDS. For more information, contact Amy McCormick at 202.466.3825.

**4 Graduate and Post Graduate Options at Seattle Pacific Univ**

1. Master's of Science in Nursing, Advanced Clinical Practice, 2. MSN including NP pathways (Adult/Gerontology & Family), 3. Post Master's NP certification courses, 4. FNP Modules for ARNPs - Master prepared. Earn your Master's of Science in Nursing degree at Seattle Pacific University in our evening and weekend program. The newly designed MSN/NP curriculum has condensed to 59 quarter credits totally. In seven quarters, evenings and weekends, you can obtain the MSN/NP degree. Part-time students also have reduced credit requirements and flexible patterns for completion. The MSN-Advanced Clinical Practice Program (45 quarter credits) is a full (one year) or part-time (two year) sequence of courses 1-2 nights a week and 3 Saturdays per quarter. Flexible packaging of courses and individual tailoring of your MSN degree are only a few of the benefits of SPU's Master's of Science in Nursing. For more information, and individualized responses, visit our web site at: <http://paul.spu.edu/health-sciences/msn.html>; call 206.281.2888 or 800.899.1769, write 3307 Third Ave West, Seattle, WA 98119 or E-mail us at: [msninfo@spu.edu](mailto:msninfo@spu.edu)

**Ad Information**

**Copy deadline is the second Tuesday of the month prior to publication.** Ads may be accepted later than this on a space available basis. Position Available Ads & Continuing Education Announcements of less than 66 words are \$45, of 66 to 130 words are \$75 and greater than 130 words are \$105. Position Available Ads are priced per insertion. Continuing Education Announcements are per offering for up to three (3) consecutive insertions. New Product Announcements per product for one insertion of 130 words or less are \$75. Ad Inserts are \$540 for one issue. All ads are subject to space limitations and editing. Call for detailed rate information. Mail copy to *ARNP Care*, 212 Railroad Ave N, Kent, WA 98032. Phone 206.852.9042. Fax 206.480.0002. E-mail [care@nurse.net](mailto:care@nurse.net)

**Please Join Us**

You may believe that because this newsletter arrives every month you are a member of ARNPs United. That is wrong. Since 1989 *ARNP Care* has been sent to every ARNP in Washington regardless of membership status. This is in imminent danger of stopping due to a lack of funds. Remember the number of members is what makes an organization strong and credible with the legislature and others. So join us today. Individual memberships are \$150 per year. Lifetime memberships are \$1000. Student currently enrolled in a ARNP program may join for \$50 per year. Make your check out to ARNPs United and mail it to: ARNPs United, 212 Railroad Ave N, Kent WA 98032.

**We Regret To Inform You That You Are NOT An ARNPs United Member**

**Member Thank You!**

**Thank you** for being one of the ARNPs in this state who have joined ARNPs United. Without your support it would not have been possible to have hired a lobbyist and had such a successful legislative session in 1995. It is also clear that without your support the organization would not have been capable of moving forward in developing a solid framework to build on the grassroots efforts of the ARNPs in this state. ARNPs who are not members of ARNPs United have received *ARNP Care* printed on lavender paper to let them know they are not members.

## **Time to get signatures for patient choice initiative**

The Coalition for Patient Choice, an alliance of health care providers and patients in Washington state, in February kicked off a signature drive for a new patient choice initiative, I-673.

The initiative, which includes nurse practitioners and eight other categories of health care providers, is a follow-up measure to Initiative 192, which garnered approximately 189,000 signatures. That amount exceeded the 181,000 minimum required to deliver an initiative to the Secretary of State's Office in Olympia, but did not provide enough of a cushion to overcome the inevitable number of invalid signatures.

The Coalition for Patient Choice decided to file a new initiative, similar to I-192, but with some important differences. Like Initiative 192, I-673 will protect patients' rights to choose their own health care provider. But the initiative also includes two new provisions: First, it would require that health insurance companies provide full disclosure on rules that govern a patient's health care, including any limitations on referrals or other restrictions. Second, it would require health plans to let patients know how much of health care premiums and investment income are spent on executive salaries, administration and profits, and how much actually goes to providing the patient's health care.

Unlike I-192, which was an initiative to the state Legislature, I-673 will go directly to the Nov. 4 general election ballot if enough signatures are gathered by the July 3, 1997 deadline.

In addition, I-673 adds nurse practitioners to the list of health care providers represented. The additional eight categories of providers are doctors of medicine, pharmacy, psychology, osteopathic medicine and surgery, podiatric medicine and surgery, chiropractic, naturopathy and optometry.

## **Tips for gathering I-673 signatures**

1. Display in your office and encourage your patients to sign.
2. Send petitions home with your patients, so they can take them to work, school, meetings, etc. The Coalition for Patient Choice has created "patient check-out sheets" so patients can record how many petitions they take and when they plan to return them, along with a phone number so you can follow up. A copy of this form is inserted in the newsletter.
3. Visit retail outlets with whom you do business and ask them to display the petition. Come back regularly to replenish the supply. If they don't want to have the petition on display, maybe they will let you set up a table or stand outside to collect signatures on a weekend.
4. Take the petitions to meetings of groups to which you belong, such as Kiwanis, Rotary, Chamber of Commerce, church bible studies, PTA, intramural sports teams.
5. Make arrangements with large retail outlets in your area to gather signatures. Some ideas: WalMart, Costco. In the Seattle area, PCC Natural Food Markets are open to having signature gatherers there at any time, as long as no one else is collecting for another initiative. Costco requires that you apply for a permit at each location, and some restrictions apply. Teresa Wippel (206.775.8720) is coordinating all Costco permits and will handle that process for you.

ARNP United has endorsed I-673, and nurse practitioners statewide are encouraged to collect as many signatures as possible before the July 3 deadline. The goal is to obtain a total of 230,000 signatures, well over the minimum requirement of approximately 179,000 so that there is a cushion to cover the average 15 percent “invalid” rate.

Copies of the petition are inserted in this issue of the newsletter. You can make additional copies by taking them to your local copy store, but **they must be copied exactly the same size — 11 X 17 inches — front and back, or they will be invalid.** The Coalition for Patient Choice will also mail additional copies to you: Call the coalition at 800.906.4406 and leave your name and address.

Have copies of the petition in your office for patients to sign. You can also take the petitions to your church, your PTA or other meeting or gathering. Visit your local health food store, athletic club, pharmacy or anywhere else you shop or do business. Encourage your patients to take petitions with them and collect signatures as well.

Many health care providers, family, friends and patients have also volunteered to gather signatures in high-traffic locations, including Costco stores, WalMarts, the post office and PCC Natural Food Markets. See the related story for additional suggestions on signature-gathering opportunities.

The Coalition for Patient Choice needs donations to fund the signature-gathering campaign. Regular monthly pledge donations of \$100, \$50 or \$25 through November 1997 would be most helpful, but any amount is appreciated. Pledge donation forms are also included in this newsletter.

Please mail the petitions as you fill them: Fold them as noted or place them in a separate envelope and mail to: The Coalition for Patient Choice, P. O. Box 13280, Mill Creek, WA 98082. Specific questions can be directed to Teresa Wippel, I-673 campaign coordinator, at 206.775.8720.

6. Local post offices can be good locations during busy times. Check with your local postmaster for permission first.
7. Little League/high school/college sporting events draw big crowds.
8. Washington State Ferries are productive locations. You can either canvass auto traffic lines or actually ride on ferries to gather signatures. (Permission of the ferry supervisor on duty is required, so ask first.)