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TO: Representative Mike Endsley and Members of the Committee on Aging and Long-Term Care
FROM: Gina Dennik-Champion, MSN, RN, MSHA
Wisconsin Nurses Association Executive Director
DATE: October 16, 2013
RE: Support of AB 292 with Assembly Amendment 1 - therapeutic alternate drug selections in nursing homes, performance of patient services by a pharmacist, and the practice of pharmacy.

On behalf of the Wisconsin Nurses Association, I would like to thank Chairperson Endsley and the members of the Committee on Aging and Long-Term Care for holding a public hearing on AB 292, which addresses therapeutic alternate drug selections in nursing homes, performance of patient services by a pharmacist, and the practice of pharmacy.

My name is Gina Dennik-Champion. I am a registered nurse and serve as the Executive Director of the Wisconsin Nurses Association (WNA). WNA is the professional association for Wisconsin's 80,000 registered nurses. Prior to my current employment, I was a nursing home administrator and director of nursing for a 200 bed long-term care facility for approximately 15 years. I personally understand the nature of this issue. I am here today to share with you WNA's support of AB 292 with the inclusion of Assembly Amendment 1.

Our members support the concepts in AB 292 that allow for the use of therapeutic alternate drug selection in nursing homes. When a public hearing was held on the Senate version of this bill (SB 251), WNA registered in opposition to the bill. However, thanks to amendments from Senator Gudex and Representative Endsley (Amendment 1), we now would like to offer our support, providing those amendments are part of the final version of the bill. Representative Endsley's amendment addresses our concern regarding the proposed language on page 3, Section 3, lines 10-12 that allows an advanced practice nurse prescriber, or APNP, the use of therapeutic alternate drug selection. The language interferes with the routine procedure of a physician admitting patients/residents into a nursing home. Currently, the patient's attending physician is informed of the policies and corresponding regulations that support quality care and is asked to support these policies via authorization. The same process and authority should be addressed by the patients attending physician when it comes to authorizing the use of therapeutic alternate drug selection. If AB 292 passes with lines 10-12 on page 3, it would allow for other physicians and non-physicians to override the attending physician's authorization of the substitution of medications. Having multiple practitioners sign off on the use of substitute medications could disrupt the continuum of care and create unintended discrepancies. For example, one practitioner may authorize certain substitution of a medication, while another practitioner may not. WNA believes that as long as the Federal law requires that only physicians can admit patients to a nursing home and

that they are responsible for the overall medical plan of care, then he or she should be the only one authorizing the use of therapeutic alternate drug selection.

Another concern regarding AB 292's original language in Section 3, lines 10-12, is that it is inconsistent with Wisconsin State Statute 450.13(5)(b). This statute permits an APNP, in a hospital setting, to have a written agreement to collaborate with a physician when approving the use of therapeutic alternate drug selection. (Refer to the reference section below.) It creates a different condition for the APNP. It requires a written collaboration agreement with all attending physicians of the patients. This creates a very different situation for the APNP, the patient's attending physician, and their clinic. Documentation of these multiple APNP/attending physician agreements would need to be on file in the nursing home, pharmacy, clinic, and in the personal file of the physician and APNP.

WNA would like to thank you, Chairperson Endsley, for sponsoring this legislation. It will make a difference for nursing homes and their patients. We appreciate the time and energy put forth by key stakeholders to address this issue. WNA fully supports AB 292 if the language we are concerned about is addressed to our satisfaction.

Thank you again Chairperson Endsley for holding this public hearing on AB 292.

Reference related to the *use of therapeutic alternate drug selection*

AB 292 (without amendment 1) – Proposed requirement for nursing homes Page 3, Section 3, Lines 10-12 states; *"The patient's advanced practice nurse prescriber, if the advanced practice nurse prescriber has entered into a written agreement to collaborate with the patient's personal attending physician"*

Current Statute: requirements for hospitals 450.13(5)(b) states; *"The patient's advanced practice nurse prescriber, if the advanced practice nurse prescriber has entered into a written agreement to collaborate with a physician."*