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Nurse practitioners: Rx for change?

### Registered nurse practitioners push for prescription power

#### Qualified nurses want the right to prescribe painkillers and other controlled substances

By Fernando Quintero

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Every year for the past 16 years, the Florida Nurses Association has lobbied unsuccessfully to allow its most highly trained colleagues the right to prescribe painkillers and other controlled substances.

When the new legislative session starts in March, the nurses once again will wage their war against the Florida Medical Association -- the group that represents doctors and is opposed to changing the law.

But this time, the nurses will have a battlefield advantage. They will be armed with a 2008 state Senate report that recommends giving qualified registered nurse practitioners authority to write prescriptions for controlled substances. The number of states that prohibit such authority has shrunk to just two: Florida and Alabama. Plus, the current effort to reform health care has placed an emphasis on greater access to care.

And conspicuously absent from the fight this spring will be the Florida Medical Association's most powerful lobbyist, Alan Mendelsohn.

On Sept. 30, the former treasurer of the association's political committee and chief fundraiser for more than a decade was indicted on federal corruption charges.

Although Mendelsohn never registered as a lobbyist, the Hollywood ophthalmologist lavished campaign money on state leaders and then later sought their votes in Tallahassee.

"Not having Mendelsohn there changes the odds extensively," said Sen. Mike Bennett, the Republican representative from Bradenton who will introduce a bill in March to allow nurses greater prescriptive power. "I don't believe you'll have anyone up there as passionate as Mendelsohn, but I'm not sure his reasons were in the best interest of the FMA."

An advertisement for Cymbalta (duloxetine HCl) extended-release capsules. The ad features a woman's face on the left. On the right, it says "Get customized resources that can help." and "Take the First Step". Below that, it states "Cymbalta is indicated for the treatment of depression." and lists links for "Prescribing Information", "Medication Guide", and "Safety Information and Boxed Warning". At the bottom, it says "with my healthcare provider:" and "Before starting Cymbalta, talk with your healthcare provider:" followed by a list of medical conditions: "about all of your medical conditions, including kidney or liver problems, glaucoma, diabetes, seizures, or if you have bipolar disorder. Cymbalta may worsen a type of glaucoma or the control of blood sugar in some patients with diabetes."

Bennett said he thinks his bill will get overwhelming bipartisan support.

"I think there's a realization that in this state, the nurses are truly not allowed to fully practice," Bennett said.

"They've taken their courses. They come down here from other states to provide medical care with one hand tied behind their back," he said. "If we want to bring down the cost of health care and find new ways to deliver care, these nurses are qualified. They're compassionate."

### **A young profession**

The advanced-practice nursing profession is a relatively new one, which began in the 1960s in response to a nationwide physician shortage. The requirements to be recognized as an advanced nurse practitioner have been enhanced significantly since that time and include advanced graduate-school education. Advanced nurse practitioners are nationally board certified to serve as primary and acute health-care providers in a broad range of areas.

As of September 2008, of the 202,137 registered nurses in Florida, 13,206 had advanced nurse practitioner ranking. Women comprise nearly 90 percent of the state's registered nursing work force.

The Florida Medical Association has maintained that giving nurses prescriptive authority will put patients at risk because they lack adequate training to diagnose and prescribe more serious addictive medications known as scheduled drugs.

"I don't think anyone is going to argue that a doctor has more training than a nurse practitioner," said Lynne Takacs, the medical association's spokeswoman. "Controlled substances have high potential of abuse. We believe a limited number of qualified professionals should prescribe them."

Nurses have countered that their advanced registered practitioners, who have advanced clinical training including specialization in pharmacology, are qualified to prescribe needed medications.

"The argument that advanced nurse practitioners do not have adequate training has been proven false in 48 other states in the nation where nurses are allowed to prescribe certain controlled substances," said Susan Lynch, a Sanford advanced nurse practitioner and vice president of legislative affairs for the Florida Nurse Practitioner Network.

The Florida Medical Association contends that increasing the number of prescribers of controlled substances will lead to further abuse of prescription drugs by unscrupulous consumers who would then illegally sell them on the black market.

Takacs said Florida leads the nation in deaths from controlled substances and that stricter controls were needed to keep prescriptions from getting into the wrong hands.

Lynch responded by saying there is no proof advanced practice nurses are more susceptible to "doctor shopping" by consumers who would abuse drugs or resell them illegally.

### **Doctor shortage?**

Lynch and other nurses say giving them greater authority to prescribe drugs would increase access to needed health-care services, especially in areas of the state where there are doctor shortages.

"The bottom line is there simply aren't enough primary-care providers in Florida. There are plenty of nurse practitioners who can help fill the gap," said Allison Carvajal, a Florida Nurses Association lobbyist. "The problem for doctors opposed to us is competition. I think their biggest fear is that nurse practitioners are going to hang a sign and have a stand-alone office."

Takacs said there is no indication that patients who need controlled substances have problems getting them.

The nurses agreed they only had anecdotal proof but that such evidence was mounting fast.

Take Mary Smith of Sanford, a former home health aide who has had a number of health problems, including a debilitating back injury and hyperinsulinemia, a condition that leaves excess levels of circulating insulin in her blood.

Smith doesn't work because of her condition and because she takes round-the-clock care of her husband, who is on kidney dialysis. So she sees a nurse practitioner at a local clinic, which accepts low-income patients on a sliding-fee scale.

Most recently, Smith suffered from painful shingles.

"I had no relief because my nurse practitioner couldn't prescribe me what I needed. I couldn't afford to see a doctor so he could prescribe pain medication," said Smith, 40. "I could have gone to the emergency room, but I can't spend hours waiting for an ER doctor who would probably be suspicious of me asking for pain meds."

Sen. Dave Aronberg, a Greenacres Democrat who was supportive of legislation passed last year to create a controlled-substance database that will help prevent doctor shopping, said such legislation would help lessen suspicion and remove barriers for those like Smith who have a legitimate need for pain medication.

He said although the new database will work in the nurses' favor next legislative session, the fact that next year is an election year would work against them because it's unlikely major legislation would get passed.

"There are a lot of competing factors," Aronberg said. "But considering everything going for them and against them, I think the spotlight on health-care reform will be the best thing going for them."

Sen. Andy Gardiner, R-Orlando, agreed.

"What's happening on the federal level probably is the biggest wild card," he said. "With the federal government pursuing socialized medicine and expanding everything health-care related, you need to expand getting more people into the health-care profession. Until that happens, the nurses are going to have a pretty good argument for expanding their scope of practice."

Fernando Quintero can be reached at [fquintero@orlandosentinel.com](mailto:fquintero@orlandosentinel.com) or 407-650-6333.

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