Testimony in Support of HB 2066 Updating APRN Statutes House Health and Human Services Committee February 11, 2019

Chairman Landwehr and members of the Health and Human Service Committee:

My name is Elizabeth Gant, a psychiatric nurse practitioner. I am the Medical Director for Southwest Guidance Center in Liberal, Kansas. We are a community Mental Health Center in Southwest Kansas that is responsible for the mental health needs for the population of four counties in rural Kansas. I am the only medication prescriber for our agency. My education includes a Master of Nursing from Kansas University. I have been certified by American Nursing Credentialing Certification as a Psychiatric Mental Health Nurse Practitioner. I have additional training from Neuroscience Education Center and have completed their Masters of Psychopharmacology. I have collaborating agreements with two different psychiatrists. One for my primary practice with Southwest Guidance Center and a similar agreement with the medical director, psychiatrist for Pawnee Mental Health Center in Manhattan, KS for whom I provide telehealth services to Concordia, KS part time.

Here are some important and glaring facts about mental health and practice in southwest Kansas:

- One in four adults and one in five children will have a mental health diagnosis this year. It will often take up to ten years before they seek help due to stigma and provider availability.
- From 2004 to 2013 the rural area experienced a 20 percent increase in suicides while the urban areas showed a 7 % increase.
- According to KDHE in 2014, of the 105 counties in Kansas there are 6 counties rated as
 Urban by population density and they have 198 licensed psychiatrists. The remaining 99
 counties in Kansas have a total of 14 licensed psychiatrists.
- The Community Mental Health Centers of Kansas that are based west of Barton County have
 5 psychiatrists and 8 psychiatric mental health nurse practitioners (PMHNP) to serve half of the state.
- In rural western Kansas, it is not uncommon to wait 1-2 months for a mental health assessment and treatment appointment.

In 2018 I had over 2000 medication check appointments and 200 psychiatric initial evaluations scheduled. Some of the clients will drive more than 60 miles in order to see me. The citizens in rural Kansas have limited access to providers and value the contributions that Nurse Practitioners provide. Some Community Mental Health Centers have been trying to recruit psychiatrists for more than 2 years without success. I have mentored nurse practitioner students and am in the role of trying to hire an additional provider for our agency. I have been told by soon to graduate nursing students that they plan to seek licensing in one of the neighboring states instead of Kansas due to restrictions that they would face to their practice.

I worry about the consequences to my patients, should something happen with the collaborating psychiatrists and our agreements. In Kansas should something happen to Dr. Alonzo, I would no longer be able to provide medication management services for my clients until a new agreement was reached with a new psychiatrist. Due to the limited number of licensed psychiatrists in

the state this could take an unacceptably tragic length of time to establish. My clients could not refill their medications because the physician-signed agreement would be voided, the pharmacy could not refill medication previously ordered per the agreement. Under current regulation requirements, for me as a provider I could not care for my patients and their needs because the physician-signed agreement would no longer exist. In mental health, medication consistency is a necessity; there are detrimental effects to suddenly stopping medications. Again, due to limited number of psychiatric providers in the rural area there would be delay before any other provider could see my clients and they might be forced into the already overloaded Emergency Medical System for care.

For mental health care, passing HB 2066 would provide consistent reliable nurse practitioner-directed medication management for Kansans. Also, Kansas could be the attractive state for nurse practitioners to establish a practice rather than our neighboring states with full practice authority. As a psychiatric mental health nurse practitioner, working in Liberal, Kansas, I really could use your support in passing HB 2066. Let me do my job and provide the unique care that some patients need.

I urge you to support HB 2066. I appreciate your time and consideration, thank you for your service to our state. Please feel free to contact me with any questions or comments.

Respectfully,

Elizabeth Gant APRN, MSN-BC

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