



**American Association of
NURSE PRACTITIONERS®**

Federal Legislative Policy Priorities

Decades of research from organizations such as the National Academy of Medicine, American Enterprise Institute and the Brookings Institute have shown that nurse practitioners (NPs) are essential to meeting the nation's health care needs, including increasing access to care and reducing health inequalities, and that federal statutory and regulatory barriers should be removed to authorize them to practice to the full extent of their education and clinical preparation. The American Association of Nurse Practitioners® (AANP) urges the 117th Congress to remove federal barriers that limit patient access to high quality, cost-effective health care and to ensure that no additional barriers are enacted.

- **Authorize NPs to Order Cardiac & Pulmonary Rehabilitation Services for Medicare Patients.**
In 2018, Congress passed legislation which authorized NPs to supervise cardiac and pulmonary rehabilitation starting in 2024. However, NPs are still not authorized to order cardiac and pulmonary rehabilitation for their Medicare patients. NPs are fully qualified based on their education and clinical training to order and supervise these services, yet this barrier to care harms patients by causing unnecessary delays in treatment. **AANP calls on Congress to pass S. 1986/H.R. 1956 to authorize NPs to order and supervise cardiac and pulmonary rehabilitation beginning in 2021.**
- **Ensure Patients with Diabetes Have Timely Access to Therapeutic Shoes.**
NPs provide the full range of care to patients with diabetes, but federal law requires that the NP must send a patient who needs therapeutic shoes to a physician to certify that need. Additionally, according to current statute, the certifying physician must be the provider treating the patient's diabetic condition going forward. Delays in treatment, caused by this burdensome statute, jeopardize the health of the patient and cause the Medicare program to incur additional costs by requiring the participation of an additional provider. **AANP calls on Congress to pass S. 800/H.R. 4870 to authorize NPs to certify their diabetic patients' need for therapeutic shoes.**
- **Authorize the assignment of NP patients to Medicare Shared Savings Program (MSSP) Accountable Care Organizations (ACOs).**
NPs are recognized in the MSSP as "ACO professionals", yet federal law limits NPs and their patients from being full participants in the program by requiring that a patient receive one primary care service from a primary care physician in order for the patient to count towards the shared savings. A recent CMS regulation created a "voluntary alignment" pathway where patients can choose an NP as their primary care provider in an MSSP ACO and be assigned to the ACO without the one primary care visit from a primary care physician per year requirement. However, federal law still contains the physician visit requirement when patients are assigned to an MSSP ACO based on their claims data. **AANP calls on Congress to pass legislation to improve the way beneficiaries are assigned under the MSSP.**
- **Provide Federal Employees Timely Access to Health Care for Workplace Injuries**
NPs are included in the definition of an "acceptable medical source" by the Social Security Administration for the purposes of certifying that an individual has a medically determinable impairment. In the majority of states, NPs are authorized to provide the diagnosis and care for a workplace related injury. However, the Federal Employees' Compensation Act (FECA) places an additional burden on federal employees who are injured during the course of their employment. FECA requires that only a physician can make the diagnosis, certify the injury and extent of the disability and oversee the patient's treatment and care. This barrier deprives the nearly two million federal employees from receiving health care from their provider of choice and can hinder timely access to care as well as continuity of care. **AANP calls on Congress to pass legislation to authorize NPs to provide care under the Federal Employees' Compensation Act.**
- **Provide Increased and Stable Funding for Nurse Education Programs.**
NPs are essential to meeting the increased demand for health care in our nation. It is critical for Congress to provide increased and stable funding to maintain nurse education programs. Funding must be sufficient to enable these programs to sustain current NP education and faculty preparation programs, support education of advanced practice nurses and fund clinical training programs. **AANP calls on Congress to increase funding for nursing education programs.**

- **Authorize NPs to Certify Medicare Patients for Hospice Care.**

NPs serve as attending providers, establish and review care plans and perform face-to-face assessments for hospice patients. However, they are still not authorized to certify patient eligibility for hospice care. Instead, they must find a physician to certify eligibility at an additional cost. A statutory change is needed to authorize NPs to certify hospice eligibility for a patient. **AANP calls on Congress to pass legislation to authorize hospice care programs to accept certification of eligibility orders from nurse practitioners for Medicare beneficiaries.**

- **Authorize NPs to Perform Admitting Examinations and All Required Patient Assessments in Skilled Nursing Facilities (SNFs).**

Medicare regulations for SNFs do not authorize NPs to perform admitting examinations for SNF patients. Currently, NPs are only authorized to perform alternating required monthly/bimonthly assessments. **AANP calls on Congress to urge CMS to issue rulemaking to explicitly authorize NPs to perform admitting examinations and all required patient assessments in SNFs.**

- **Substance Use Disorder**

As the 117th Congress works to address substance use disorder (SUD), it is essential that NPs be fully included in these initiatives. NPs across the country are treating patients who suffer from addiction. Given recent legislative advances, NPs are now permanently authorized to prescribe medication assisted treatments (MATs) to those patients. To date, that authorization has created thousands of access points for treatment. As the health care provider of choice for millions of Americans, it is imperative that patients of NPs have access to this medically necessary treatment. We further urge Congress to ensure that patients with pain also have access to appropriate pharmaceutical and non-pharmaceutical treatments.

- **Amend Medicare Conditions of Participation to Require Hospitals to Include NPs for Appointment to Medical Staffs.**

AANP supports reforms to the Medicare Conditions of Participation for hospitals to provide non-discriminatory guidance to hospitals on the evaluation process for NP membership on hospital medical staffs and granting hospital privileges. Uniform procedures for medical staffing and privileging can benefit all health professionals and the patients they serve. These steps will reinforce the efforts by CMS and many hospitals to improve patient care by including NPs in order to provide more timely and appropriate care, while ensuring a fair marketplace for NPs to practice to the full extent of their education and clinical preparation.

- **Maintain Increased Patient Access to Telehealth Services**

Increased flexibility to provide telehealth to patients has been an essential component of providing care during COVID-19 and will continue to be integral to clinicians after the Public Health Emergency. Specific telehealth provisions that we support are removing geographic limitations and originating site restrictions, increased coverage and reimbursement for audio-only telehealth services, and the expansion of telehealth to previously uncovered services and visits when the clinician determines that it is clinically appropriate. These flexibilities have enabled NPs to reach patients who otherwise may have been unable to receive medically necessary health care, particularly in rural and underserved communities.

- **Health Care Priorities**

As the 117th Congress examines health care legislation, AANP urges that any legislation be provider neutral and inclusive of NPs. AANP requests that any legislation considered by Congress ensures patients have access to health care with affordable coverage options regardless of pre-existing conditions, upholds the principles of Essential Health Benefits, protects patient access to health care delivered by the provider of their choice, preserves patient access to Medicaid, improves Medicare's efficiency by removing barriers to practice and eliminating duplication of provider efforts, and maintains the nation's commitment to improving its health care workforce. AANP supports legislation and regulatory changes which remove barriers to practice so that NPs can practice to their full scope, ensuring that patients have access to these much-needed high quality, cost effective, health care services. AANP continues to support legislative and regulatory changes to increase access to care for those suffering from substance use disorder. As our country continues to navigate the COVID-19 pandemic, we will continue to advocate for policies that ensure access to care is preserved, health care providers are protected, patients have access to vaccines, therapeutics and testing and regulatory waivers enacted during the public health emergency are made permanent. Advocating for policies, including those noted above, that ensure we are prepared for any future disasters or pandemics is extremely important to ensure continued patient access to care.

AANP firmly believes in the principal that providers should be reimbursed equitably when they provide the same services as other providers, and there should not be reimbursement differentials based on a provider's licensure. Further, as Medicare implements value-based payments, AANP urges Congress and Executive agencies to fully include NPs in these new payment models. NPs are a critical part of the solution to our nation's health care needs, and AANP looks forward to serving as a resource to create legislative and regulatory pathways for patients to have greater access to care.