



American Association of
NURSE PRACTITIONERS®

Improve Medicare Patient Access to Cardiac and Pulmonary Rehabilitation

ACTION NEEDED: Cosponsor S. 1986/H.R. 1956, the *Increasing Access to Quality Cardiac Rehabilitation Care Act of 2021*, which would: 1) expedite the Bipartisan Budget Act's (BBA's) authorization for nurse practitioners (NPs) to supervise cardiac and pulmonary rehabilitation care by moving the implementation date from 2024 to 2022, and 2) authorize NPs to order this lifesaving care starting in 2022.

Background: In an effort to increase Medicare patients' access to cardiac and pulmonary rehabilitation, Congress passed the BBA in 2018, which authorized NPs to supervise cardiac and pulmonary rehabilitation beginning in 2024. However, further modernization of Medicare is still needed so that NPs can also order these services for their patients. Removal of this outdated barrier will allow Medicare patients to have timely access to these lifesaving programs. While an NP may be the primary care provider for a patient and be most familiar with the patient's health care needs, under current law, the NP must refer the patient to a physician to order these services, and a physician must also supervise these services until the BBA authorization for NPs supervision begins in 2024.

Cardiac rehabilitation and pulmonary rehabilitation are programs designed to improve a patient's physical, psychological, and social functioning after a qualifying diagnosis or procedure, such as a heart attack or coronary artery bypass surgery. According to the Centers for Disease Control, heart disease kills over 610,000 Americans each year, approximately one in four deaths. Yet, while studies show that these programs can reduce deaths and hospital readmissions, only about 20 percent of qualifying patients receive cardiac rehabilitation. Participation rates are even lower for female and minority patients and those who live outside metropolitan areas or in lower income urban areas. Further, only 3 percent of Medicare patients with Chronic Obstructive Pulmonary Disease (COPD) receive pulmonary rehabilitation.

NPs are clinically trained to provide high-quality and timely care to cardiac and pulmonary patients. NPs also routinely serve as frontline providers in critical care environments, including critical access hospital emergency departments, hospitals and hospital clinics, emergency rooms, intensive care units, cardiac catheterization laboratories, health centers, urgent care centers and many other sites. Authorizing NPs to order and supervise these safe and effective services will allow them to be involved in their patients' cardiac and pulmonary rehabilitation care from start to finish, creating greater continuity of care and access for patients.

Request: AANP calls on Members of Congress to cosponsor S. 1986/H.R. 1956, the *Increasing Access to Quality Cardiac Rehabilitation Care Act of 2021*, to expedite the BBA's authorization for NPs to provide supervision beginning in 2022 and authorize NPs to order cardiac and pulmonary rehabilitation services beginning in 2022.