

April 8, 2013

Submitted via www.regulations.gov

Marilyn Tavenner
Acting Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attn: CMS-3267-P
P.O. Box 8010
7500 Security Boulevard
Baltimore, MD 21244-8010

RE: CMS-3267-P – Medicare and Medicaid Programs; Part II—Regulatory Provisions to Promote Program Efficiency, Transparency, and Burden Reduction; Proposed Rule (78 Fed.Reg. 9216 (February 7, 2013))

Dear Ms. Tavenner:

On behalf of the undersigned organizations, we are pleased to provide comments on this proposed rule, Medicare Program and Medicaid Programs; Part II—Regulatory Provisions to Promote Program Efficiency, Transparency, and Burden Reduction; Proposed Rule (78 Fed.Reg. 9216, February 7, 2013).

We appreciate the Centers for Medicare & Medicaid Services' (CMS) commitment to reducing regulatory burdens for hospitals and critical access hospitals. In doing so, CMS also has made an effort to expand the role of Advance Practice Registered Nurses (APRNs), which include Certified Nurse-Midwives (CNMs), Certified Registered Nurse Anesthetists (CRNAs), Nurse Practitioners (NPs), and Clinical Nurse Specialists (CNSs). APRNs play a significant role in ensuring patient access to high quality healthcare that is cost-effective, and practice without physician supervision in many states. However, federal policy barriers to APRN practice continue to exist, impairing access to services, impeding patient choice, and raising healthcare costs.

Remove Costly and Unnecessary Physician Supervision Requirements

We applaud the Agency for soliciting suggestions for reform candidates from the entire body of Medicare Conditions of Participation. We recommend that the Medicare agency eliminate requirements for physician supervision of APRNs. Given the growing population of persons in the United States requiring healthcare, particularly among Medicare eligible populations, physician supervision requirements stand in the way of deploying the vast workforce contained with the supply of APRNs. Unnecessary requirements for physician supervision of APRNs contribute to duplication and waste in the healthcare delivery system. There is no evidence that supervision requirements contribute to higher quality, lower cost, or greater value or access to healthcare. On the contrary, ample evidence points to the value provided by APRNs.

Our request corresponds with a recommendation from the Institute of Medicine's (IOM) report titled *The Future of Nursing: Leading Change, Advancing Health*, which outlines several paths by which patient access to care may be expanded, quality preserved or improved, and costs controlled through greater use of APRNs.¹ The IOM report specifically recommends that, "advanced practice registered nurses should be able to practice to the full extent of their education and training."²

We thank you for the opportunity to comment on the proposed rule. Should you have any questions regarding these matters, please feel free to contact the AANA Senior Director of Federal Government Affairs, Frank Purcell, at 202.484.8400, fpurcell@aanadc.com.

Sincerely,

American Association of Colleges of Nursing, AACN Colleges
 American Association of Critical-Care Nurses, AACN Critical Care
 American Association of Nurse Anesthetists, AANA
 American Association of Nurse Practitioners, AANP
 American College of Nurse-Midwives, ACNM
 American Nurses Association, ANA
 American Organization of Nurse Executives, AONE
 American Pediatric Surgical Nurses Association, ASPSA
 American Society for Pain Management Nursing, ASPMN
 Association of Community Health Nursing Educators, ACHNE
 Association of Nurses in AIDS Care, ANAC
 Association of Public Health Nurses, APHN
 Association of Women's Health, Obstetrical and Neonatal Nurses, AWHONN
 Dermatology Nurses Association, DNA
 Gerontological Advanced Practice Nurses Association, GAPNA
 Hospice and Palliative Nurses Association, HPNA
 Infusion Nurses Society, INS
 International Nurses Society on Addictions, IntNSA
 International Society of Psychiatric Nurses, ISPN
 National Association of Clinical Nurse Specialists, NACNS

¹ IOM (Institute of Medicine). *The Future of Nursing: Leading Change, Advancing Health* (Washington, DC: The National Academies Press, 2011)

² IOM op. cit., p. 9.

National Association of Pediatric Nurse Practitioners, NAPNAP
National League for Nursing, NLN
Nurses Organization of Veterans Affairs, NOVA
Preventive Cardiovascular Nurses Association, PCNA
Public Health Section, American Public Health Association, PHS APHA