March 16, 2018

The Honorable Peter Roskam  
Chairman  
US House Committee on Ways and Means  
Subcommittee on Health  
1102 Longworth HOB  
Washington, DC 20515

Dear Mr. Chairman:

As a workgroup of Advanced Practice Registered Nurse (APRN) organizations, we write to request a meeting to share our specific policy recommendations on improving patient access to APRN care and practice for the House Ways and Means Red Tape Project.

The APRN Workgroup is comprised of organizations representing Certified Nurse-Midwives (CNMs) expert in primary care, maternal and women’s health; Clinical Nurse Specialists (CNSs) offering acute, chronic, specialty and community healthcare services; Certified Registered Nurse Anesthetists (CRNAs) who provide the full range of anesthesia services as well as chronic pain management; and Nurse Practitioners (NPs) delivering primary care, acute, chronic, specialty and community healthcare. Totaling roughly 340,000 healthcare professionals, including two of the ten largest categories of Medicare Part B provider specialties according to Medicare claims data, our primary interests are patient wellness and improving access to safe and cost-effective healthcare services. In every setting and region, for every population particularly among the rural and medically underserved, America’s growing numbers of highly educated APRNs advance healthcare access and quality improvement in the United States and promote cost-effective healthcare delivery.

APRNs are defined in federal law as Certified Nurse-Midwives, Certified Registered Nurse Anesthetists, Clinical Nurse Specialists, and Nurse Practitioners (P.L. 114-148, Sec. 5509). Consistent with the National Academy of Medicine\(^1\) recommendations for patient access to high quality, cost-effective healthcare in the 21st Century, that APRNs should be allowed to practice to the full extent of their scope, skills and training, we recommend:

- Adopting reforms that promote quality and patient access to care by eliminating unnecessary and costly supervision requirements,
- Reforming policy definitions of the word “physician” so that patients have access to the services of qualified APRNs as a benefit through their public and private health plans, and
- Modernizing policy surrounding facility and health plan credentialing and privileging of qualified APRNs and other providers, again to ensure patient access to high quality healthcare.

We appreciate your consideration of our views on these topics and request a meeting with you and/or your staff to further discuss these recommendations. If you have any questions, please contact Ralph Kohl at 202-741-9080 or via email at rkohl@aanadc.com.

Sincerely,

American Association of Colleges of Nursing (AACN)
American Association of Nurse Anesthetists (AANA)
American Association of Nurse Practitioners (AANP)
American College of Nurse-Midwives (ACNM)
American Nurses Association (ANA)
Gerontological Advanced Practice Nurses Association (GAPNA)
National Association of Clinical Nurse Specialists (NACNS)
National Association of Nurse Practitioners in Women's Health (NPWH)
National Association of Pediatric Nurse Practitioners (NAPNAP)
National League for Nursing (NLN)