



Attn: Seema Verma, Administrator
Centers for Medicare and Medicaid Services (CMS)

Sent via email to: PatientsOverPaperwork@cms.hhs.gov

Dear Secretary Azar & Administrator Verma,

As one of the over 270,000 licensed nurse practitioners (NP) across the country, and President of the Gerontological Advanced Practice Nurses Association (GAPNA), the premier organization representing the interests of nurse practitioners and all providers who work with older adults, I am writing in response to CMS' request for feedback on Scope of Practice. I applaud Section 5 of the President's Executive Order 13890 entitled Protecting and Improving Medicare for our Nation's Seniors. As our health care system continues to evolve, we must continue to modernize Medicare regulations to remove outdated barriers to practice that restrict seniors' access to high-quality health care. I, along with the members of GAPNA strongly agree with the recent Executive Order that regulations should be implemented to remove these outdated barriers, ensuring all health care providers are practicing at the top of their license. I appreciate the work that CMS has already done to remove federal barriers to practice and I respectfully request that CMS take swift action to further implement the intent of Section 5 of the Executive Order in its annual rulemaking process.

Nurse practitioners are advanced practice registered nurses who are prepared at the masters or doctoral level to provide primary, acute, chronic and specialty care to patients of all ages and walks of life. Daily practice includes, assessment; ordering, performing, supervising and interpreting diagnostic and laboratory tests; making diagnoses; initiating and managing treatment including prescribing medication and non-pharmacologic treatments; coordinating care; counseling; and educating patients and their families and communities.

NPs hold prescriptive authority in all 50 states, the District of Columbia and all territories of the United States. NPs practice in nearly every health care setting including long-term care facilities, hospitals, Veterans Affairs and Indian Health Care facilities, emergency rooms, urgent care sites, private physician or NP practices (both managed and owned by NPs), nursing homes, schools, colleges, retail clinics, public health departments, nurse managed clinics, homeless clinics, and home health. Over 82% of NPs are accepting new Medicare patients and 80.2% are accepting new Medicaid patients. In 2017 over 130,000 NPs billed the Medicare program making NPs the largest and fastest growing Medicare provider specialty and approximately one third of all Medicare patients received care from a nurse practitioner. NPs complete more than one billion patient visits annually. NPs have a particularly large impact on primary care as approximately 73% of all NP graduates deliver primary care, and NPs comprise approximately one quarter of our primary care workforce, with that percentage growing annually. Additionally, NPs comprise a larger percentage of our health care workforce in rural and underserved communities.

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The Executive Order supports seniors' access to care and choice of provider by removing barriers to practice, and I appreciate the focus that CMS has placed on implementing this provision of the Executive Order. Accordingly, the following barriers to care should be removed in order to increase access to care for Medicare patients and authorize NPs to practice to the full extent of their education and clinical training within the Medicare program:

- Authorize NPs to certify and recertify their patients' need for home health care
- Authorize NPs to certify their patients' need for therapeutic shoes for treatment of their diabetes
- Authorize NPs to order and supervise cardiac and pulmonary rehabilitation
- Update Medicare facility conditions of participation to authorize NPs to practice to the full extent of their education and clinical training in all settings. This includes updating the skilled nursing facility conditions of participation to authorize NPs to admit patients and perform the admitting assessment and all required monthly/bimonthly patient assessments
- Authorize NPs to certify that patients are terminally ill and in need of hospice care
- Authorize NPs to refer their patients for medical nutrition therapy
- Consistent with Section 5(c) of the Executive Order, end reimbursement disparities and ensure that nurse practitioners are appropriately reimbursed based on the work performed rather than their occupation across all HHS programs

Thank you for your consideration of these comments and commitment to removing barriers to practice for nurse practitioners and our patients.

Sincerely,

A handwritten signature in dark ink, appearing to read "Dr. Deborah Dunn".

Dr. Deborah Dunn, EdD, MSN, GNP-BC, ACNS-BC GS-C
2019-2020 GAPNA President

The Gerontological Advanced Practice Nurses Association (GAPNA) is the premier organization that represents the interests of nurse practitioners and all providers who work with older adults. Since its founding in 1981, GAPNA's central mission is to advance excellence in the care of older adults. Our members are active in a variety of settings across the health care continuum including primary, acute, post-acute, home care, and long-term care. GAPNA provides opportunities for education, leadership, research, advocacy, networking, and advancement of evidence-based care for older adults.

cc: The Honorable Alex M. Azar II, Secretary United States Department of Health and Human Services