



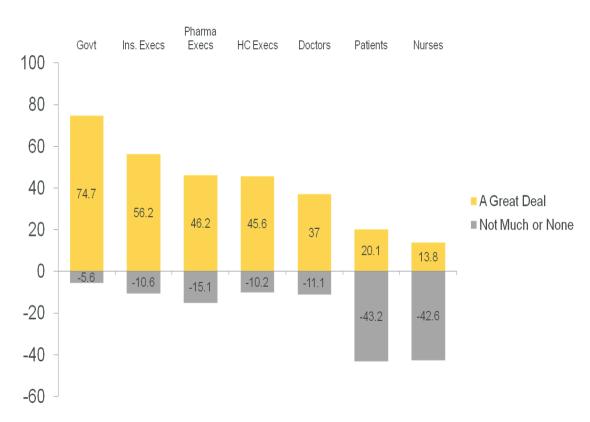
## Increasing Access & Quality APRN Health Policy Issues

Mary Boland, Dean UH Manoa Nursing Kathy Yokouchi, Policy Analyst HI State Center for Nursing

**UH Health Policy Group November 15, 2011** 

## Who Will Influence Health Reform in the United States in the Next 5-10 Years?\*

**Question Wording:** Thinking about the next five to ten years, how much influence do you think each of the following professions or groups of people will have in health reform in the United States?



<sup>\*</sup>Gallop Poll conducted for RWJ Foundation, 2011

### Affordable Care Act

- Bending and Bundling
- Delivery system game changers
- Shifting financial risk



http://www.healthcare.gov/

# Consumer Protections or Insurance industry game-changers

- ✓ Premium rate reviews
- ✓ Eliminate pre-existing conditions
- ✓ No lifetime limits
- ✓ Dependent coverage till age 26
- √ Standard and transparent benefits/pricing
- √ 32 million more insured by 2019
  - ✓ Individual mandate
- ✓ Prevention care- no cost to consumers

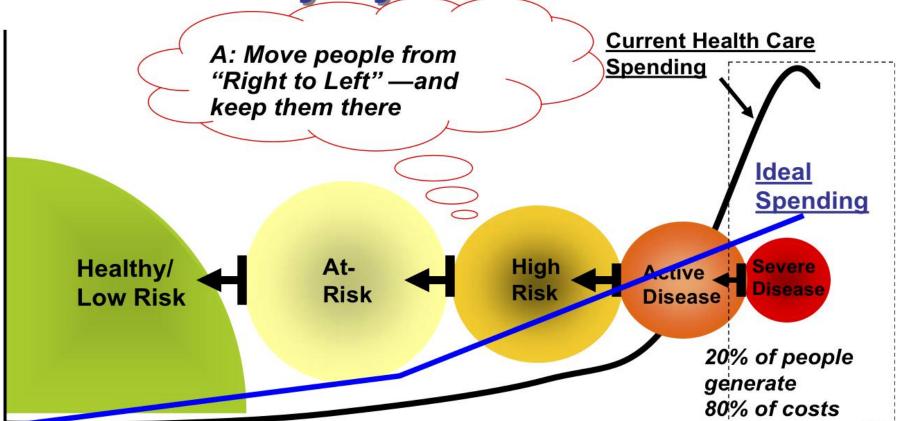


http://www.healthcare.gov

## ACA bundling...

- Incentivizes Evidence-Based Practice
- Requires Transition Care
- Incremental efforts over a decade
- Shifts the financial risk to the health care system
- Completely alters the power relationships
- "Chipping away" at key features

## What should a "value based" Health Care Delivery System Do?



A value-based health care system

Cauran L

## Role of State

- Create it, Sell it, Fund it
- CMS pressure for Medicaid and Medicare services and cost
- Engage the consumers
- Engage the providers
- Decide what works

## Role of State Gov is HUGE

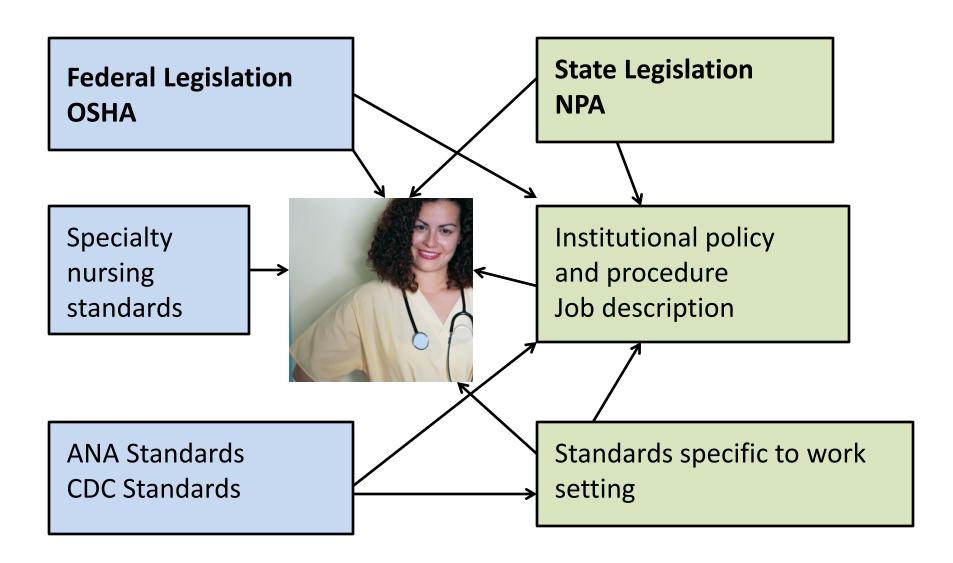
- Through licensing, the state defines
  - Who can do what to whom, in what settings, and under what conditions AKA professional scope of practice (SoP)
- Practice regulation impacts
  - composition AND productivity of the health workforce
  - Cost of care by controlling access

## Relationship among the Nurse Practice Act, Administrative Rules, and Position/advisory Statements

NPA Broad to specific **Administrative Rules Position Advisory** Statement Statement Source: North Carolina Concept-Based Learning Editorial Board, Nursing: a

Conceptual-Based Approach to Learning, 2011, Volume 2, p. 2407.

#### Impact of Laws and Standards on the Nurse



Source: North Carolina Concept-Based Learning Editorial Board, Nursing: a Conceptual-Based Approach to Learning, 2011, Volume 2, p. 2409.

## Prescription for Pennsylvania - Removed SoP restrictions for ALL professionals\*

#### Physician Assistants

Under supervision, authorized to order physical, respiratory, occupational, dietetic therapy and medical equipment; authorized to perform defined patient assessments.

#### Respiratory Care Practitioners

New specialty authorized to provide direct respiratory care to patients referred by doctors, advanced registered nurse practitioners, and physician assistants.

#### Advanced Registered Nurse Practitioners

Under a collaborative practice agreement, authorized to perform the same services as physician assistants and to order home health or hospice care.

#### Physical Therapists

Practice redefined to include evaluation, examination and testing to diagnose and establish a treatment plan; practice in schools and home health settings with indirect supervision.

#### • Public Health Dental Hygiene Practitioners

New specialty authorized to independently perform educational, preventive, therapeutic, and intraoral procedures.

Citizen Advocacy Center <a href="http://www.cacenter.org">http://www.cacenter.org</a>

## Getting from Here to There: Care Providers in Hawaii

- Shifting financial risk shifts role expectations
- Workforce shortages even under the old rules
- Key providers are MDs and RNs
- Multiple calls for "transformation" of education and practice
- Progressive legislature
- Conservative regulatory agencies

## Advanced Practice Registered Nurse (APRN)

- A RN with a minimum of a master's degree and national certification
- Four areas of specialization
  - Nurse Practitioners or NPs provide patient care in primary care and acute settings
  - Certified Nurse Midwives or CNMs provide obstetrical and gynecological care
  - Certified Registered Nurse Anesthetists or CRNAs provide anesthesia care and pain management services in hospitals and surgical centers
  - Clinical Nurse Specialists or CNSs provide clinical expertise to support quality care in hospitals and health systems
- Medicare, HMSA, TRICARE and the Federal Employees Health Benefits Plan reimburse for APRN services. Kaiser was an early adopter of APRN practice

## Anatomy of a Nurse Practice Act \*

- Definition of nursing
- Requirements for licensure
  - -RN
  - APRN
- Penalty for practicing without a license
- Exemptions from licensure
- Licensure across jurisdictions

<sup>\*</sup>Hawaii Nurse Practice Act (HRS Chapter 457) with Hawaii Administrative Rules (HAR Chapter 89)

## **Creating Urgency**

- > 50% state Nurse Practice Acts outdated
- Restrictions thwart innovation and access
  - Lack an evidence base
- Citizen Advocacy Center
  - Changes in SOP are inherent
- National Health Policy Forum
  - Legislatures not appropriate to adjudicate SoP
- IOM Future of Nursing 2010
  - Link funding priorities to states with modernized nurse practice acts.

## Hawaii APRNs may\*:

- Diagnose, prescribe and authorize therapy or referrals of patients within their licensed practice specialty. They may plan and initiate a therapeutic regimen that includes nutritional, diagnostic and support services including home care, hospice, physical and occupational therapy.
- Prescribe, procure, administer and dispense over the counter, legend, and controlled substances.
- Those with prescriptive authority can independently prescribe non-controlled and controlled (Schedules II-V) drugs within the formulary appropriate to their specialty. There is no requirement for a formal collegial or collaborative relationship with a physician. (Act 110, 2011)

<sup>\*2009</sup> Act 169; 2010 Act 57; 2011 Act 110

## Hawai`i State Center for Nursing APRN Subcommittee

- identify barriers which preclude APRNs from practicing to the full extent of their education and training in Hawai'i
- improve understanding and communication among health care providers, regulatory agencies and legislators to eliminate barriers to SOP.

## Areas in which APRN practice barriers exist include, but are not limited, to:

- Health Care settings such as: Broad Service Hospitals; Nursing Facilities (Skilled Nursing/Intermediate Care Facilities); Home Care or Private Duty services; Freestanding Adult Day Health Centers; Home Health Agencies; Adult Day Health Centers
- Community based Foster Homes for children, adults and the developmentally disabled/mentally retarded
- Therapeutic services: Physical Therapy-Medicare Part
   A; Medicaid/Quest Physical and Occupational Therapy

### and...

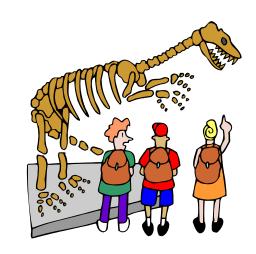
- Mental Health (MH4) designation for admission to hospitals;
- Incapacity determination for designation of surrogate;
- Pharmacist orders;
- Physician Orders for life sustaining treatment;
   Compassionate care only bracelet application
- Medicare nutrition therapy
- Exemption from childhood immunizations

## and...

- Death certificates
- Life jackets for the blind, partially blind, physically handicapped;
- Handicap parking passes (certificate of disability); Motor Vehicle Insurance
- Worker's Compensation
- Juror exclusion



- Decades old, obsolete and restrictive rules and regulations exist which, if repealed or properly amended, will provide access to care as well as, improvement in the quality of health care that will benefit Hawai'i consumers.
- HI BON is under resourced (even by HI standards)



### **HSCN APRN Subcommittee**

- will continue to work with the regulatory agencies that are responsible for implementing the laws which impede or restrict APRNs from practicing to the full extent of their education and training
- wishes to encourage a collaborative/synergistic relationship among the Center for Nursing, the regulatory agencies and other stakeholders so new laws can be properly and timely implemented; and obsolete or restrictive laws can be repealed
- remains open and receptive to all who can help to remove these barriers to APRN practice
- continues to seek venues through which information relating to APRNs can be timely and cost effectively shared

### Resources

- AARP Center to Champion Nursing: Summary of ACA and Nursing Provisions
  - http://championnursing.org/sites/default/files/nursingandhealthreformlawable.pdf
- APRN Consensus Report: LACE
  - <a href="https://www.ncsbn.org/170.htm">https://www.ncsbn.org/170.htm</a>
- Health Affairs
  - http://www.healthaffairs.org/
- The Initiative on the Future of Nursing
  - <a href="http://www.thefutureofnursing.org">http://www.thefutureofnursing.org</a>
- Citizen Advocacy Center: Reforming Scopes of Practice
  - http://www.cacenter.org
- National Health Policy Forum: Tapping the Potential of the Health Care Workforce
  - http://www.nhpf.org/library/background-papers/BP76\_SOP\_o7-o6-2010.pdf