December 1, 2022

Chiquita Brooks-LaSure, MPP
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attn: CMS-0058-NC
P.O. Box 8013
7500 Security Blvd.
Baltimore, MD 21244


Dear Administrator Brooks-LaSure:

On behalf of the undersigned organizations representing Advanced Practice Registered Nurses (APRNs) and advanced practice nursing education, we appreciate the opportunity to comment on this request for information; National Directory of Healthcare Providers & Services (87 Fed.Reg. 61018, October 7, 2022).

The APRN Workgroup is comprised of organizations representing Advanced Nursing Education, Certified Nurse-Midwives (CNMs), Clinical Nurse Specialists (CNSs), Certified Registered Nurse Anesthetists (CRNAs), and Nurse Practitioners (NPs). As of 2020, over 233,000 APRNs were treating Medicare patients, making it essential that the Centers for Medicare & Medicaid Services (CMS) remove barriers to care and not implement policies that impose additional barriers to care for APRNs and the patients they serve. America’s growing numbers of highly educated APRNs advance healthcare access, quality improvement and cost-effective healthcare delivery across all settings, regions and populations, particularly among the rural and medically underserved.

We appreciate CMS’ interests in designing a national directory of healthcare providers and services so that patients can get accurate information regarding providers. As more than 40 percent of Medicare beneficiaries receive their care from APRNs, we believe it is crucial that CMS include all types of APRNs in this directory and to fully recognize and account for all the services that each type of APRN provides. Furthermore, the action of including APRNs in the directory is in line with CMS’s strategic plan to advance health equity as it helps ensures access to needed healthcare services. More than 57 million Americans live in rural areas, and many APRNs treat patients in rural and underserved areas where there are no or limited physician counterparts available. According to MedPAC, APRNs and PAs comprise over 50% of the primary care workforce.
We also believe it is imperative that CMS ensure that this directory does not inadvertently discriminate against APRNs or patients who choose APRNs for their care. We note and appreciate that CMS has an interest in streamlining data and providing information in an easy-to-use format for consumers so that they can locate providers that meet their individual needs and preferences. As noted in this RFI, provider directories are an essential source of information for patients to choose in-network clinicians, and it is imperative that these directories are fully inclusive of APRNs and is accurately reflecting the care they provide and the populations they serve. In doing so, CMS should uphold principles of not discriminating against provider types based on licensure and should ensure that patients can find and locate an APRN just as easily as they can to find a physician. Furthermore, the information displayed for APRNs should be equivalent to that displayed for physicians including recognizing nursing board certifications if they include medical board certifications.

We appreciate the opportunity to provide our recommendations on this request for information. Should you have any questions, you can reach out to Romy Gelb-Zimmer, Senior Associate Director of Federal Regulatory and Payment Policy at rgelb-zimmer@aana.com or (202) 484-8400. Thank you for your consideration and we look forward to hearing from you.

Sincerely,

American Academy of Nursing, AAN
American Association of Colleges of Nursing, AACN
American Association of Nurse Anesthesiology, 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
National Organization of Nurse Practitioner Faculties, NONPF