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July 12, 2016

Director, Regulations Management (02REG)
Department of Veterans Affairs
810 Vermont Avenue NW, Room 1068
Washington, DC 20420

RE: Comment in response to RIN 2900–AP44–Advanced Practice Registered Nurses

For years, AARP has strongly supported efforts to improve consumers' access to health care by removing barriers to services provided by nurse practitioners, certified registered nurse anesthetists (CRNAs), certified nurse-midwives, and clinical nurse specialists. We are very pleased that the [Veterans Health Administration's \(VHA\) proposed rule](#) to remove such barriers has been published in the *Federal Register* and is now posted for public comment. On behalf of our nearly 38 million members, including 3.5 million veterans, we urge you to promptly finalize this proposed rule as a means of improving access to and choice of *all four* types of advanced practice registered nurses (APRNs).

Given the health care provider shortages that exist, we need all health professionals practicing to the top of their license. Our nation's cadre of veterans is growing and aging, and they rely on the VHA for timely, efficient, and high-quality care. Numerous studies have documented a growing shortage of physicians available to care for all Americans ([Association of American Medical Colleges, 2012](#)). Other studies have documented the ability of advanced practice nurses to provide high-quality care ([Newhouse et al., 2011](#)).

Allowing all four categories of APRNs to practice to the full extent of their education and training is in keeping with the recommendations of the Institute of Medicine in its [landmark 2010 report](#) *The Future of Nursing: Leading Change, Advancing Health*. The *Federal Register* refers directly to the report's finding that "[p]roducing a health care system that delivers the right care—quality care that is patient centered, accessible, evidence based, and sustainable—at the right time will require transforming the work environment, scope of practice, education, and numbers and composition of America's nurses." This transformation will serve to enhance, rather than replace, the work done by physicians at the VA. According to the proposed rule, "APRNs would not be

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authorized to replace or act as physicians or to provide any health care services that are beyond their clinical education, training, and national certification.”

Full practice authority for APRNs is aligned with the National Council of State Boards of Nursing’s Consensus Model for APRN Regulation, which, as the proposed rule states, “VA finds to be the criteria most widely accepted by State boards of nursing and the nursing community as necessary to practice as an APRN.” Removal of barriers to APRN practice was also recommended in the recently released independent assessment of VHA health care delivery prepared by the [RAND Corporation](#) pursuant to the Veterans Access, Choice and Accountability Act of 2014. This change would also align VHA policy with the models already employed by our U.S. Armed Forces, Indian Health Service, and Public Health Service systems.

The VA’s preamble to the proposed rule says: “Many external stakeholders expressed general support for VA’s positions taken in this proposed rule, particularly with respect to full practice authority of APRNs in primary health care. However, we also received comments opposing full practice authority for CRNAs when providing anesthetics.” AARP wants to be clear that it strongly supports full practice authority for all four categories of APRNs. Just as there is a crucial need for improved access to primary care for all consumers, there is a great need for improved access to pain care and pain management among veterans. For example, the Independent Assessment of the VHA mandated by Congress identified delays in cardiovascular surgery tied to lack of anesthesia support and slow production of colonoscopy services compared with care in the private sector.

While some may try to create the false impression of a turf war between health professionals, the evidence is clear that the reforms included in the proposed rule will improve needed access and are therefore in the public’s interest. Improving access to all four types of advanced practice registered nurses (APRNs) will maintain quality and improve the efficient delivery of health care. AARP strongly urges the VHA to promptly finalize the proposed rule so that its benefits can be quickly realized.

Thank you for the opportunity to comment on the proposed rule.

Sincerely,



David Certner
Legislative Counsel and Legislative Policy Director
AARP