

Wisconsin Nurses Association
2009 Reference Report #2

Subject: Assuring an Active Provider Role for Advanced Practice Nurses in
Medical Homes
Introduced By: Advanced Practice Nurse Forum, a Special Interest Group of WNA
Core Issue: Nurses Workplace Health, Rights and Safety and Patient Safety and
Advocacy

Summary: The “*medical home*” concept rewards primary care providers (PCPs) for providing ongoing care and coordination of care, particularly for complex patients. These services are extremely valuable in keeping costs down, by avoiding complications and the unnecessary use of specialists. Yet primary care services are widely recognized to be both time-intensive and undervalued, contributing to a shortage of PCPs, particularly among physicians.

Many advanced practice nurses (APNs) serve as PCPs, and their background and nursing perspective often lead them to excel in this role, as recognized by patients and many other health care providers. As providers of high quality, safe, coordinated care, APNs meet the National Committee for Quality Assurance (NCQA) standards for a *medical home*. In rural and underserved areas, APNs may be the only PCPs available. Unfortunately, their valuable contributions to primary care have not been fully acknowledged, both within the states and at the federal level, particularly when “primary care” and “*medical home*” are defined in terms of physicians only.

In the Medicare Improvement and Extension Act of 2006, Congress created the Medicare Medical Home Demonstration Project, the first attempt to create *medical homes* at the federal level. Unfortunately, the 2006 Act’s definition of a “*medical home*” for primary care was limited strictly to a “board certified physician,” thus excluding APNs -- and other health care providers who currently provide primary care. While the Medicare demonstration project is somewhat narrow in its scope, the American Nurses Association and WNA are very concerned that its definition of *medical home* could become the rule for all of Medicare, and then all of health care.

A congressional bill, **H.R.2350 - Preserving Patient Access to Primary Care Act of 2009** was introduced in May 2009. The purpose of the bill is to amend the Public Health Service Act and the Social Security Act to increase the number of primary care physicians and primary care providers and to improve patient access to primary care services, and for other purposes. Part of this legislation includes amending the SSA title XVIII to extend coverage to APNs in patient-centered medical home services. This legislation has not had a public hearing.

In Wisconsin, we are seeing an increase in applications to the Federal Government to become designated as a *Patient-Centered Medical Home*. The role of the APN in the success of this delivery model cannot be understated. Greater transparency regarding the role and responsibility of the APN providing the care should be acknowledged and required.

Recommendations: That the Wisconsin Nurses Association:

1. Work with the Wisconsin Nurses Association APN Forum Special Interest Group, ANA and other national nursing organizations to promote legislation, regulation and/or demonstration projects that address patient-centered primary care that:
 - A. Is based on the Institute of Medicine's definition of primary care. (The provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community).
 - B. Is designed to allow all licensed primary care providers to serve in this role.
 - C. Gives special attention to the support of safety net providers who provide care for patients who would not otherwise have access to care.
 - D. Includes advanced practice nurses in the design and development of such programs.
 - E. Includes Advanced Practice Nurses in this and all other model of primary and chronic care if such models are to be successfully implemented in the health care system of this country.
2. Provide a report of progress at 2010 WNA Annual Meeting.

Implementation Strategy and Fiscal Note

Activity	Responsible	Cost	Timeframe
1. Meeting with APN Forum to develop strategy for advancing this reference.	1. WNA APN Board representative and Board of Directors and Public Policy Council.	No cost. This can be part of APN Forum Officer Meeting.	January 31, 2010
2. Implement strategy	2. WNA APN Board representative and Board of Directors and Public Policy Council.	To be determined	October 1, 2010

WNA Goals

Goal 1. Collectively and collaboratively advocate for access to comprehensive quality health care services for all people; and

Goal 2. Assure that the registered nurse is an essential provider in all practice settings through education, research, workplace advocacy, legislation and regulation.