

July 15, 2024

The Hon. Sheldon Whitehouse United States Senate 530 Senate Hart Office Building Washington, D.C. 20510 The Hon. Bill Cassidy, MD United States Senate 455 Dirksen Senate Office Building Washington, D.C. 20510

Dear Senators Whitehouse and Cassidy,

On behalf of the American Nurses Association (ANA), I would like to thank you for this opportunity to weigh in on the Pay PCPs Act (S.4338) and how Congress can expand patients' access to primary care by improving the adequacy of pay for primary care providers in Medicare. Specifically, I want to share ANA's views on how Congress can reform the way that current procedural terminology (CPT), and other healthcare common procedure coding system (HCPCS) codes are valued under Medicare. We would also encourage changes to the current RVU Update Committee (RUC) valuation system to ensure Medicare recipients' access to advanced practice registered nurses (APRNs) for their primary care needs.

ANA is the premier organization representing the interests of the nation's over 5 million registered nurses (RNs), through its constituent and state nurses associations, organizational affiliates, and individual members. RNs serve in multiple direct care, care coordination, and administrative leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions, and provide advice and emotional support to patients and their family members. ANA members also include those practicing in the four advanced registered nurse roles: Nurse Practitioners (NPs), clinical nurse specialists (CNS), certified nurse-midwives (CNM), and certified registered nurse anesthetists (CRNA). ANA is dedicated to partnering with health care consumers to improve practices, policies, delivery models, outcomes, and access across the health care continuum.

Our nation's health care system has been experiencing a shortage of primary care providers for decades. The shortage of primary care physicians in the United States is projected to be between 20,200 and 40,400 physicians by 2036<sup>1</sup>. As a result, APRNs are being increasingly utilized to provide critical primary care services to Medicare patients. NPs, for example, already make up around 50 percent of the primary care workforce. Correspondingly, NPs are now among the highest billers of Medicare. Other APRNs also get reimbursed through Medicare. Yet, these dedicated health care professionals have no voice in valuation determinations. While nurses do have a seat at the AMA Health Care Professional Advisory Committee (HCPAC) and on RUC committees, no nurse has ever served as a HCPAC representative to either the current professional terminology (CPT) editorial panel or the RUC. ANA believes that nurses should have a permanent seat on the main CPT and RUC panels to ensure that nurses have a voice in valuation processes and any efforts to reform the current CPT and RUC model.

The RUC has been developing and proposing CPT code values to CMS since 1991. CMS accepts many of the RUC's proposed values and other payers look to the RUC valuations when they negotiate reimbursement rates with health care practitioners in various care settings. The fact that CMS accepts such a high percentage of the proposed valuations demonstrates that the committee puts in the proper

<sup>&</sup>lt;sup>1</sup> https://www.aamc.org/media/75231/download?attachment

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amount of time to determine codes. Unfortunately, the budget neutrality requirements under Medicare tend to reduce values for many CPT codes. The lower code values drive many practitioners out of primary care and into higher paying specialties leading to an even larger shortage of primary care practitioners. APRNs are willing and able to fill the void in primary care, but the lower reimbursement rates make it cost-prohibitive for them to do so. Congress must enact reforms to encourage both the CPT Panel and the RUC to improve the valuation of non-physician practitioners.

In closing, I would like to thank you for your leadership and for your willingness to consider our perspective on this critical issue. ANA stands ready to work with Congress to implement policy solutions to ensure that patients have access to qualified APRNs. If you have any questions, please contact Tim Nanof, Vice President of Policy and Government Affairs, at (301) 628-5081 or <u>Tim.Nanof@ana.org</u>.

Sincerely,

Deblie Hatmaker

Debbie Hatmaker, PhD, RN, FAAN Chief Nursing Officer/EVP

cc: Chair and Ranking Member, U.S. Senate Committee on Finance Chair and Ranking Member, U.S. Senate Committee on Health, Education, Labor & Pensions Jennifer Mensik Kennedy, PhD, MBA, RN, NEA-BC, FAAN, ANA President Angela Beddoe, Interim Chief Executive Officer