HHS Secretary Has Discretion to Add NPs to Medical Home Demos
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You may recall a previous article about medical homes in this space. Well, it has been a busy few months, and we want to update you on ACNP’s efforts to ensure that nurse practitioners (NPs) can fully participate in any medical home demonstration project (MHDPP) the federal government undertakes. The Medicare Improvement for Patients and Providers Act of 2008 (Public Law [P.L.] 110-275), more commonly referred to as “the Medicare bill,” became law on July 15, 2008, when Congress overrode the president’s veto. The bill was debated for months and went through many changes and more than a few votes before becoming law. This bill contains an expansion of the Medicare MHDPP created by the earlier Medicare Improvement and Extension Act of 2008 (P.L. 109-432).

The purpose of both the original and expansion MHDPP is to test the idea of providing Medicare beneficiaries with a medical home and to give physicians a bonus payment for such services. The original language did not include any providers other than physicians as medical home providers. Earlier this year, when Congress started its attempts to expand the project, ACNP learned that Congress was still using physician-only language. ACNP, along with other key NP advocates and organizations, immediately started educating lawmakers about including NPs as providers in the demonstrations and worked with other NP associations to have NPs added to the legislation as an eligible provider for medical homes. Generally, Hill offices are very supportive, but the politics of the bill and pushback from the physician organizations were too much to overcome. There is, however, still a possibility of NP inclusion in the MHDPP because of the way the final language is written and because some of our Senate friends have taken up the challenge.

The Medicare Improvement for Patients and Providers Act provides the secretary of Health and Human Services with authority to expand the duration and the scope of the MHDPP, to the extent that any of the following conditions are met:

- The expansion of the project is expected to improve the quality of patient care without increasing spending under the Medicare program and/or
- The expansion of the project is expected to reduce spending under the Medicare program.

We believe that NPs clearly can improve the quality of patient care without increasing spending under the Medicare programs, and NP participation may even reduce spending. The fact that the secretary has discretion over how to expand the demonstration means we have an opportunity to influence this decision.

To help influence the secretary’s decision on this point, Sens Bingaman (D-NM), Harkin (D-IA), Collins (R-ME), and Mukowski (R-AK) inserted a colloquy into the official congressional record stating their support for and urging the secretary to include NPs in the demonstration. Sen Harkin has also agreed to circulate a letter for signature by colleagues urging the secretary to include NPs. We will be calling on you to help us make sure your senators are engaged in this next important step! Stay tuned!

Check ACNP’s website, www.acnpweb.org, to download both the full colloquy by the 4 senators and the Dear Colleague letter from Harkin.

Senate Passes Legislation to Reauthorize Funding for Community Health Centers

The Senate passed S.901, the Health Centers reauthorization package, on July 22, 2008. The bill reconfirms the core principles of the current federal Health Centers program, while putting the funding for the program on track to reach the goals of the ACCESS for All America plan. The plan aims to reach 30 million patients by 2015. The Senate-passed bill now heads to a conference committee with the House-passed version (H.R. 1343) to iron out the remaining differences.

Sen Orin Hatch (R-UT), a co-sponsor of the legislation with Sen Ted Kennedy (D-MA), said that since 2001, additional funding provided under the bill has allowed health centers in more than 750 communities nationwide to provide care to about 4 million new patients. Hatch said, “These centers provide affordable and quality care to at-risk Americans who otherwise might have to do without.”

The National Association of Community Health Centers (NACHC) says the Senate passage of S.901 is a true testament to the success of the program and the power of grassroots advocacy.