

January 16, 2020

The Honorable Seema Verma  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Washington, DC 20201

Re: Scope of Practice

Dear Administrator Verma:

The undersigned organizations represent the hundreds of thousands of physicians who treat our nation's Medicare patients every day. We are committed to working with the Administration to improve the program, particularly with efforts to reduce administrative burden. We are writing to provide input on your request dated December 26, 2019. Consistent with our letter dated October 29, 2019, the undersigned organizations are concerned with the broad scope and far reaching implications of CMS' request. Since the Administration specifically identified Advanced Practice Registered Nurses (APRNs) and Physician Assistants (PAs) in their request for information, our comments focus on these health care professionals.

The undersigned organizations have long supported physician-led health care teams, with each member drawing on his or her specific strengths, working together, and sharing decisions and information for the benefit of the patient. In reviewing recommendations to change Medicare regulations that would weaken or eliminate physician supervision of nonphysician professionals, we strongly urge the Administration to rely on fact-based resources, including a thorough review of the education and training of nonphysician health care professionals and the impact on the overall cost and quality of care. We also urge the Administration to carefully review the true impact of state scope of practice laws on access to care across the country. As background, we offer some basic information below and look forward to the opportunity to discuss in more detail with the Administration.

As the most highly educated and trained health care professionals, physicians should lead the health care team. There is a vast difference in the education and training of physicians and other health care professionals, including APRNs and PAs. The well-proven pathways of education and training for physicians include medical school and residency, and years of caring for patients under the expert guidance of medical faculty. Physicians complete 10,000-16,000 hours of clinical education and training during their four years of medical school and three-to-seven years of residency training. By comparison nurse practitioners, the largest category of APRNs, must complete only 500-720 hours of clinical training after two-three years of graduate-level education. Physician assistant programs are two-years in length and require 2,000 hours of clinical care. Neither nurse practitioner nor PA programs include a residency requirement. The difference does not stop there as physicians are required to pass a series of comprehensive examinations prior to licensure. By contrast nurse practitioners must pass a single test consisting of 150-200 multiple choice questions. Similarly, physician assistants must pass a single 300-question multiple choice exam. We encourage CMS to take a close look at the stark differences in

education and training as outlined above, which clearly demonstrates the education and training of nurse practitioners and PAs are not commensurate with physicians.

Medicare patients are some of the most medically vulnerable patients in our population, often suffering from multiple chronic conditions or other complex medical needs. As such they deserve care led by physicians - the most highly educated, trained and skilled health care professionals. We cannot and should not allow anything less. Patients agree and overwhelmingly want physicians leading their health care team. In fact, four out of five patients prefer a physician to lead their health care team and 86% of patients say patients with one or more chronic conditions benefit when a physician leads their health care team.

Supporting physician-led health care teams is also aligned with most state scope of practice laws. For example, over 40 states require physician supervision of or collaboration with physician assistants. Most states require physician supervision of or collaboration with nurse anesthetists, one type of APRN, and 35 states require some physician supervision of or collaboration with nurse practitioners, including populous states like California, Florida, New York and Texas. These states represent more than 85% of the U.S. population. Moreover, despite multiple attempts, in the last five years no state has enacted legislation to allow nurse practitioners full-immediate independent practice.

A common argument for expanding the scope of practice of nonphysician professionals is it will increase access to care. However, in reviewing the actual practice locations of nurse practitioners and primary care physicians it's clear nurse practitioners and primary care physicians tend to work in the same large urban areas. This occurs regardless of the level of autonomy granted to nurse practitioners at the state level.

While the number of nurse practitioners has steadily increased over the past 20 years, we caution CMS not to use this fact as a reason to weaken physician supervision of nurse practitioners since much of this growth has come with the proliferation of nurse practitioner programs, including online programs that boast completion in as little as 18-24 months and which typically require students to secure their own internship to complete their 500-720 hours of clinical training. This is in sharp contrast to the 10,000-16,000 hours of standardized clinical training physicians must complete during their four years of medical school and three-to-seven years of residency training in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA). This lack of uniformity and standardization in nurse practitioner education is a primary example of the need for physician supervision of nurse practitioners.

Finally, the undersigned organizations caution the Administration against positioning scope of practice as an administrative burden. Doing so obfuscates the very real administrative burdens facing physicians and other health care professionals every day, where every hour they spend providing clinical care to their patients requires two hours of administrative tasks.

While all health care professionals play a critical role in providing care to patients, their skillsets are not interchangeable with that of fully trained physicians. The scope of practice of health care professionals should be commensurate with their level of education and training, not based on politics. Patients – and in this case Medicare patients – deserve nothing less.

Sincerely,

American Medical Association  
Aerospace Medical Association  
American Academy of Allergy, Asthma & Immunology  
American Academy of Dermatology Association

American Academy of Emergency Medicine  
American Academy of Facial Plastic & Reconstructive Surgery  
American Academy of Family Physicians  
American Academy of Neurology  
American Academy of Ophthalmology  
American Academy of Otolaryngic Allergy  
American Academy of Otolaryngology Head & Neck Surgery  
American Academy of Physical Medicine & Rehabilitation  
American Association of Child & Adolescent Psychiatry  
American Association of Clinical Urologists  
American Association of Neurological Surgeons  
American Association of Orthopaedic Surgeons  
American College of Allergy, Asthma & Immunology  
American College of Emergency Physicians  
American College of Osteopathic Internists  
American College of Osteopathic Surgeons  
American College of Radiation Oncology  
American College of Surgeons  
American Gastroenterological Association  
American Medical Women's Association  
American Orthopaedic Foot & Ankle Society  
American Osteopathic Association  
American Psychiatric Association  
American Society for Clinical Pathology  
American Society for Dermatologic Surgery  
American Society for Gastrointestinal Endoscopy  
American Society for Laser Medicine and Surgery  
American Society for Radiation Oncology  
American Society for Surgery of the Hand  
American Society of Cataract & Refractive Surgery  
American Society of Dermatopathology  
American Society of Interventional Pain Physicians  
American Society of Neuroradiology  
American Society of Nuclear Cardiology  
American Society of Retinal Specialists  
American Urological Association  
American Vein & Lymphatic Society  
Congress of Neurological Surgeons  
Heart Rhythm Society  
International Society for the Advancement of Spine Surgery  
National Association of Medical Examiners  
North American Neuro-Ophthalmology Society  
North American Spine Society  
Outpatient Endovascular and Interventional Society  
Renal Physicians Association  
Society for Cardiovascular Angiography and Interventions  
Society of Interventional Radiology  
Spine Intervention Society  
Undersea and Hyperbaric Medical Society

Medical Association of the State of Alabama  
Arizona Medical Association  
Arkansas Medical Society  
California Medical Association  
Connecticut State Medical Society  
Colorado Medical Society  
Medical Society of Delaware  
Medical Society of the District of Columbia  
Florida Medical Association Inc  
Medical Association of Georgia  
Hawaii Medical Association  
Idaho Medical Association  
Illinois State Medical Society  
Indiana State Medical Association  
Iowa Medical Society  
Kansas Medical Society  
Kentucky Medical Association  
Louisiana State Medical Society  
Maine Medical Association  
MedChi, The Maryland State Medical Society  
Massachusetts Medical Society  
Michigan State Medical Society  
Minnesota Medical Association  
Mississippi State Medical Association  
Missouri State Medical Association  
Montana Medical Association  
Nebraska Medical Association  
Nevada State Medical Association  
New Hampshire Medical Society  
Medical Society of New Jersey  
New Mexico Medical Society  
Medical Society of the State of New York  
North Dakota Medical Association  
Ohio State Medical Association  
Oklahoma State Medical Association  
Pennsylvania Medical Society  
South Carolina Medical Association  
South Dakota State Medical Association  
Tennessee Medical Association  
Texas Medical Association  
Utah Medical Association  
Vermont Medical Society  
Medical Society of Virginia  
Washington State Medical Association  
West Virginia State Medical Association  
Wisconsin Medical Society  
Wyoming Medical Society

Honorable Seema Verma

January 17, 2020

Page 5