

## Nurse Practitioner Groups Unite to Push for Change

Marcia Frellick | Dec 05, 2012

When the 2 most prominent groups representing nurse practitioners (NPs) merge January 1, they will combine resources, talents, and legislative might just as the future of healthcare is taking shape.

The American Academy of Nurse Practitioners and the American College of Nurse Practitioners announced on November 19 that they will pool their memberships, totaling 41,000 NPs. Having a single group, which will be called the American Association of Nurse Practitioners (AANP), will eliminate confusion for NPs about which organization to join and unify the voice of an increasingly prominent segment of healthcare providers.

Behind the merger are some looming realities that call for NPs to present a united front. First, the Patient Protection and Affordable Care Act (ACA) means about 30 million more patients are expected to enter the healthcare system through 2019 as insurance coverage is required of nearly all Americans. At the same time, a shortage of primary care physicians is expected to surpass 52,000 by 2025, according to a recent study published in the November/December issue of the *Annals of Family Medicine*.

The looming gap has system reformers looking to stretch resources with NPs, who have masters or doctorate degrees and a scope of practice that is similar — and complementary — to that of primary care physicians. They assess, diagnose, interpret test results, and treat acute and chronic conditions.

NPs are ready to step in to fill that gap, but until now, that message has been diluted, says David Hebert, who has been chief executive officer of the American College of Nurse Practitioners and now becomes chief executive officer of the new AANP.

"I think it's a great opportunity to combine resources as well as strategy so that nurse practitioners can have a strong voice, whether it's in Washington or the state capitals," Hebert told *Medscape Medical News*.

### Scope Varies by State

NPs have been working toward consistent national guidelines for scope of practice, which currently varies by state. Some states require physician involvement in care plans, some allow independent practice, some will not let NPs prescribe independently or sign death certificates, and some allow NPs to prescribe only certain classes of drugs independently.

Another target of legislative change for NPs is the ability to order home healthcare for patients. At this time, to get reimbursed by Medicare, NPs can order home care only through physicians. That wastes time and resources, Hebert said.

"We think we can save money by getting people out of the hospitals and nursing homes earlier. Home health is less expensive, and if it's the right thing for the patient, then the nurse practitioner certainly ought to be able to order home health for patients," Hebert said.

NPs are pushing to practice to their full scope in every state, an argument that has pitted them against physician groups who say NPs don't have the same education and experience as physicians and should not be considered the answer to the physician shortage.

In response to the announcement of the merger, Reid Blackwelder, MD, president-elect of the American Academy of Family Physicians (AAFP), said in an email: "We wish these 2 groups well in their reorganization. We look forward to working with them and other health care professional organizations to improve the quality of care for all patients."

However, he reiterated the AAFP's position that patients are better served with physician-led healthcare teams and that NPs should not deliver healthcare independently: "Research consistently demonstrates that when patients have a personal relationship with a primary care physician and a physician-led health care team that focuses on meeting each individual's needs, the quality of care goes up, patients' outcomes improve, and the use — and therefore the cost — of services is reduced," he said.

### Number of NPs Rising

Hebert said that although the merger will strengthen NPs' influence, the growth of the specialty has already amplified its voice.

NP numbers have climbed nearly 80% in just more than a decade, from 87,000 in 2001 to 155,000 in 2012, with 11,000 graduating from NP programs this year alone, according to Nancy McMurrey, spokesperson for AANP.

The merger capitalizes on that growing strength and comes at a very strategic time for nurses as the nation ushers in the ACA, said Jamesetta Newland, PhD, FNP-BC, and editor-in-chief of *The Nurse Practitioner: The American Journal of Primary Healthcare*.

"Numbers bring power. I think [the merger] also sends a message that we are united. That's one area that some of our opponents have...had an advantage.... But this sends a loud message," she said.

Under the ACA, states are working to set up health exchanges primarily for individuals without insurance and small businesses. Enrollment in those exchanges begins in the fall of 2013. Models for accountable care organizations are being tested and medical homes are evolving.

"There are almost open slates waiting for us to write on them, and if we're at the table, then we can help formulate the language and the rules," Dr. Newland said.

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