# **TNP Policy Update: Notes**

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# I. Federal Policy Issues

### A. Legislation

- 1) VETERANS: Increase the Role of NPs at VA facilities (H.R. 1247/S. 297).
- 2) <u>HOME HEALTH</u>: Pass the Home Health Care Planning Improvement Act (S. 578/H.R 1342).
- 3) <u>DME</u>: Authorize NPs to Document Evaluations for Diabetic shoes (H.R. 4756).
- 4) PRIMARY CARE: Pass the Ensuring Access to Primary Care for Women and Children Act (S. 737).
- 5) <u>P4P MODELS</u>: Enable NPs Patients to be Beneficiaries in Medicare Shared Savings Accountable Care Organizations, or ACOs (S.2259).

#### **B.** Other issues

- 1) Authorize NPs to Certify Medicare Patients for Hospice Care.
- 2) Authorize NPs to Perform Admitting Examinations and Monthly Patient Assessments in Skilled Nursing Facilities.
- 3) Provide Opportunity for NPs to be Full Participants in the Insurance Exchange (Marketplace) Program.
- 4) Provide Stable, Sufficient Funding for Nurse Education Programs.
- 5) Amend Medicare Conditions of Participation to Require Hospitals to Consider NPs for Appointment to Medical Staffs.

#### C. Progress on Federal Issues

- 1) On January 8, the VA Secretary submitted a draft regulatory rule that would allow APRNs working in the VHA to practice to their full scope.
- 2) AANP's Home Health Care Planning Improvement Act has garnered wide bipartisan support, with 177 co-sponsors in the House of Representatives and 48 co-sponsors in the Senate.

# II. State Trends and Highlights

## **B. State Legislation**

- 1) Florida legislature sent a Prescriptive Authority/Controlled Substances Bill to Governor (HB 423).
- 2) Utah's Governor signed SB 58, which removes required consultation/referrals for Schedule II's for APRNs.
- 3) West Virginia's Governor signed HB 4334, which removes the collaborative agreements for APRNs after 3 years of physician supervision and allows for longer supply of Schedule III's.

4) Wyoming became the first state to pass the APRN Compact (HB 566).

## **D. State Trending Issues:**

- 1) <u>LICENSURE & WORKFORCE</u>: right-sizing licensure regulation for health care professionals, licensure compacts, loan repayment programs.
- 2) <u>CONTROLLED SUBSTANCE</u>: new clinical guidelines and regulated requirements, prescription drug monitoring programs, mandatory provider CE, co-prescribing of opioids and naloxone, quantity limitations, regulation of pain management clinics.
- 3) <u>REIMBURSEMENT & DELIVERY DESIGN</u>: provider non-discrimination and parity laws, health insurances exchanges, pay for performance.
- 4) <u>TELEHEALTH</u>: regulations on patient/provider location, disciplinary regulation and oversight, compacts and special licenses, Board of Medicine regulation.

#### III. TNP Activities

## E. 84R Legislative Session

- 1) HB 1885/SB 751: would remove the requirement for a physician delegation agreement for APRNs and move APRNs under the exclusive licensure authority of the Texas Board of Nursing.
- 2) <u>HB1753:</u> would allow APRNs to sign paperwork certifying the care or condition of their patients, such as providing certification of disability for patients to receive disable parking permits or placards, signing physicals for student athletes, and signing worker's compensation forms for employees injured on the job.
- **3)** HB 3398/SB 1980: would allow Medicaid managed care plans, HMOs, and PPOs to recognize APRNs as primary care providers and include them in the list of provider directories, regardless of whether their delegating physician is in-network.
- 4) <u>HB 2602:</u> would allow physicians to delegate ordering and prescribing Schedule II Controlled Substances to APRNs specializing in psych-mental health care and those providing palliative care, fixing an important gap in prior legislation (SB 406) that only gave this privilege to facility-based APRN's.
- 5) OTHER TNP BILLS FROM 84R: SB 466 (jury duty signature recognition bill; HB 3912 (death certificates signature recognition bill).

#### F. Interim Activities

- 1) <u>INTERIM CHARGES</u>: The legislature identifies and submits issues for study during the interim. These charges will look at veteran healthcare, telemedicine, healthy aging, chronic disease, access to mental health care in Texas, and Medicaid MCO policies and procedures.
- 2) **SUNSET**: BON Sunset Review will take place March-October.

3) <u>INSURANCE ISSUES</u>: PPO/HMO issues with note recognizing nurse practitioners as PCPs and in-network insurance requirements.