

TO: AACN Members

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RE: Impact of Medicare Regulations on the Availability of Practice Sites for NP

ISSUE

In 2002, the American Association of Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF) received reports from deans and nurse educators from across the nation citing difficulty with finding access to clinical training sites for nurse practitioner (NP) students. A key concern for our organizations was related to Medicare billing and documentation requirements. Medicare stipulates that preceptors of students be present for the entire visit and document the care provided. Some NP programs reported that they were denied clinical contracts on the claim of an undue burden on preceptors.

Staff of AACN and NONPF began inquiring among their colleagues in the advanced practice nursing (APN) community to assess the scope of this concern. We learned that this generally was an issue specific to NPs and not other APNs. We also realized that, in addition to nurse educators, clinical preceptors had been reporting concerns and questions about the billing and documentation requirements.

In an effort to ascertain the extent of this problem, NONPF and AACN, with input from our collaborative partners including the American College of Nurse Practitioners, the American Academy of Nurse Practitioners, and other APN groups, conducted an online survey of 325 institutions with NP programs in late summer/fall 2002. Our hope was that the survey would establish a baseline of information necessary to determine whether the problem was widespread or perhaps specific to types of clinical training sites or regions in the United States. As well, we hoped to assess the scope of change in practice sites, whether loss or gain of sites, now and potentially longitudinally. We would then use the data to shape our strategy and, if necessary, propose changes to federal or other policies that limit the ability to use fully the clinical training sites.

RESULTS

Preliminary analysis of the data has yielded the following results:

- The response rate for the survey was 72.3% (235 out of 325 or schools with nurse practitioner programs).
- 106 schools with nurse practitioner programs reported a loss of clinical training sites over the preceding year. This number represents *one-third* of schools with nurse practitioner educational programs and 45.1% of all survey respondents.
- The 106 schools are distributed among all four regions of the United States with only a slightly higher concentration in the northeast (32.1%). Of these schools, 60.4% have an academic health science center affiliation.
- The four most frequently reported types of sites lost for clinical training of nurse practitioner students were private physician practice (81.1%), hospital-based ambulatory care setting (51.9%), HMO or group plan (40.6%), and community health center (35.8%).
- Within all types of clinical training sites where loss or limited access occurred, the four most frequently cited reasons were: precepting duties interfere with productivity (18.6%), not enough time due to heavy practice schedule (17.4%), site competition with other health professions (15.5%), and competition with other institutions for nurse practitioner training sites (13.8%). Analysis of the data across the four regions of the United States showed consistency in types of sites and reasons for losses.
- Only six percent (5.6%) of the schools experiencing a loss or limited access of sites identified the Medicare billing and documentation requirements as one of the reasons.

DISCUSSION

Quality NP education is highly dependent on the availability of an extensive network of clinical training sites. The data demonstrate that one-third of NP educational programs are experiencing a loss of clinical training sites. Though data from the survey do not currently show that the Medicare billing and documentation requirements have had a widespread impact, we must be mindful of future trends. Anecdotal reports from pockets around the country suggest that the impact can be significant and may not be yet fully recognized.

AACN and NONPF have a commitment to tracking this issue and ensuring the continued availability of clinical training sites to prepare the future NP workforce. This issue has been referred to the Joint AACN-NONPF Data Advisory Committee for input and ongoing assessment of trends. Further study of the availability and expanded

variety of clinical training sites may yield a more comprehensive understanding of the issues affecting NP education. Additional assessment may detect the impact of other federal regulations such as the Health Insurance Portability and Accountability Act (HIPAA) and Medicare in the evolving role of the APN.

RECOMMENDATIONS TO PROGRAMS

For educational programs and faculty experiencing challenges in retaining clinical training sites because of Medicare requirements, we recommend the following:

- Be familiar with Medicare regulations. By understanding these regulations fully, you can help to protect your preceptors while at the same time preserving your valuable clinical training opportunities for your students. You can help to assess the scope of activities permissible by NP students with oversight by their preceptors. Bookmark the CMS Web site on your Internet browser – www.cms.gov - and check it often for updates. The latest regulations specific to Medicare billing and documentation in teaching settings can be found on http://cms.hhs.gov/manuals/pm_trans/R1780B3.pdf.
- Contact your local Medicare carriers for explicit guidance. The following link may be useful in locating the carrier in your area: <http://www.facs.org/dept/hpa/pubs/cacreps0700.pdf>.
- Check the literature for relevant articles and resources.
- Keep your national organizations informed of particular issues you are facing. Contact either Kitty Werner from NONPF at 202-289-8044 or via email at nonpf@nonpf.org or Debbie Campbell from AACN at 202-463-6930 x224 or via email at dcampbell@aacn.nche.edu.