



## Nursing Related Provisions in Proposed Health Care Reform Legislation

HR 3962 (House Bill Affordable Health Care for America Act)	HR 3590 (Senate Bill Patient Protection and Affordable Care Act)
<ul style="list-style-type: none"> <li>• Provides 5 years of mandatory funding (in addition to annually appropriated discretionary funds) for expanded <u>Community Health Centers</u> as a part of the new Public Health Investment Fund: \$12 billion</li> <li>• Provides 5 years of mandatory funding (in addition to annually appropriated discretionary funds) to expand the <u>National Health Service Corps</u> (mostly physicians but includes a 10 percent set-aside for advance practice registered nurses) for scholarships and loan repayments: \$1.45 billion</li> <li>• Funding for the <u>Public Health Workforce Corps</u> (could be placed in state, local, tribal health departments or federally qualified health centers with preference given to under-served areas). Includes schools of nursing as potential grant recipients: \$283 million</li> <li>• Authorizes funds for the development of <u>Nurse-Managed Health Clinics</u> with \$50 million for FY 2010</li> <li>• <u>Increases Medicare payments by 5%</u> for primary care services and for services in health professional shortage areas (includes NPs)</li> <li>• Specifically authorizes nurse practitioners as possible leaders of <u>medical homes</u>. Funding is \$1.7 billion for 5 years.</li> <li>▪ Transitional Care Services not directly included. Has incentives in different programs: Creates penalties for readmissions and provides funds for certain DSH hospitals, with priority to hospitals that serve high-risk beneficiaries to provide transitional care services; Independence at Home demonstration provides coordinated care and transitional care services. Medicare Medical Home pilot includes transitional care services; Medicaid Medical Home pilot included.</li> <li>▪ No Health Care Workforce Commission</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes a \$200 million 4-year demonstration to test a <u>Medicare Graduate Nursing Education</u> program <ul style="list-style-type: none"> <li>○ Payments would be made to hospitals for the clinical training costs of preparing advanced practice nurses with the skills necessary to provide primary and preventive care, transitional care, chronic care management and other nursing services appropriate for the Medicare population. This graduate nursing education would be provided through affiliations with accredited schools of nursing and in partnership with two or more non-hospital community-based care settings in which at least half of all of the clinical training is carried out. Hospitals would reimburse nursing schools and community-based care settings for their portion of the clinical training costs</li> </ul> </li> <li>• Reauthorizes (but provides no new mandatory funding) for <u>National Health Service Corps</u> funding at \$4 billion for 6 years</li> <li>• <u>Increases Medicare payments by 10%</u> for primary care services and for services in health professional shortage areas (includes NPs, CNSs, and PAs)</li> <li>• Authorizes funds for the development of <u>Nurse-Managed Health Clinics</u> with \$50 million for FY 2010</li> <li>• Authorizes funding for a new program to train <u>primary care "extension" workers</u>. This provision uses the IOM definition of primary care that is inclusive of nursing. Authorizes \$625 million for 5 years</li> <li>• Creates a <u>Health Care Workforce Commission</u> to analyze needs and provides solutions. High priority areas include identifying necessary skills and maximizing skills sets across disciplines; an analysis of nature, scopes of practice, and demands for health care workers in the enhanced info-technology and management workplace; and an analysis of how to align Medicare and Medicaid GME policies with national workforce goals. Also prioritizes the education and training capacity, projected demands and integration with health care delivery system including nursing workplace capacity at all levels</li> </ul>



### HR 3962 (House Bill Affordable Health Care for America Act)

- Provides 5 years of mandatory funding (in addition to annually appropriated discretionary funds) for expanded Title VIII nursing workforce and nursing faculty development as a part of a new Public Health Investment Fund: \$638 million
  - Advanced nursing education grants: Provides grants to nursing schools, academic health centers, and other entities to enhance education and practice for nurses in master's and post-master's programs. These programs prepare nurse practitioners, clinical nurse specialists, nurse midwives, nurse anesthetists, nurse educators, nurse administrators, and public health nurses
  - Nurse education, practice, and retention grants: Supports schools and nurses at the baccalaureate and associate degree levels
  - Nursing student loan program: Provides loans to qualified nursing students attending baccalaureate-degree or associate-degree nursing programs
  - Loan repayment and scholarship program: pays up to 85% of a nursing student loans in return for at least 3 years of service in specific location
  - Nurse faculty loan program: Supports loan programs within schools of nursing to help masters and doctoral degree students in exchange for teaching at a school of nursing for cancellation of up to 85 percent of their educational loans, plus interest over 4 years
  - Authorization for appropriations for parts B through D of title VIII:
    - Nurse practitioners, Certified nurse midwives, certified nurse anesthetists, and other advanced educated registered nurses
    - Workforce Diversity Grants: This program awards grants and contract opportunities to schools of nursing, nurse-managed health centers, academic health centers, state or local governments, and nonprofit entities looking to increase diversity of nursing workforce in terms of under-represented minority populations
    - strengthen capacity for basic nurse education and capacity

### HR 3590 (Senate Bill Patient Protection and Affordable Care Act)

- Provides for \$30 billion increased authorization of funds (but no new mandatory funding) for Federally Qualified Health Centers: \$30 billion  
Does not specifically note nurse practitioners as possible leaders for medical homes but doesn't exclude them per se. Funding not stipulated.
- Includes \$500 M funding to establish a five-year Community Care Transitions Program under Medicare for hospitals with high readmission rates and/or serving underserved populations in partnership with community-based organizations, to provide transition services to certain high risk beneficiaries that include at least one of five care transition interventions;
- Reauthorizes (but provides no new mandatory funding) for Title VIII funding at \$338 million for FY 2010. Includes funding for same provisions noted in House section