



This survey was conducted by the GAPNA Health Affairs Committee, September 1, 2018.

Nurse practitioners (NPs) are authorized Part B Medicare providers. They order and bill for performing and interpreting diagnostic tests within their scope of practice and certify patients' eligibility for skilled rehabilitation services. Despite recognition of NPs' scope of practice, current Medicare home health regulations pose unnecessary restrictions to patient access and risks associated with care coordination. In order to better understand the impact of these restrictions GAPNA conducted a study to assess the effect on NPs' patients and their practices.

The highlights of these data collected from 361 providers, 260 who order Medicare Home Health, are summarized below.

Impact of regulations

- 68% report difficulty getting the initial certification signed
- 66% report patients "are likely" to experience delays in care due to the certification signature requirement
- 53% report patients "are likely" to experience delays in care with a change in condition
- 35% report patients "are likely" to experience delays in care due to the recertification signature requirement

Impact among providers

- 40% (n=143) report seeing 60 or more Medicare patients per month
 - 29% of these providers report delays "extremely likely"
 - 23% of these providers report delays "somewhat likely"
- 23% (n= 84) report seeing 20 or more Medicare home health patients per month
 - 50% report delays "extremely likely"
 - 39% report delays "somewhat likely"

Current regulations lead to delays in care and untoward outcomes. Passage of legislation (S. 445/H.R. 1825, "Health Care Planning and Improvement Act of 2017") improves access to high quality, cost-effective care to home bound older adults. NPs



must take full advantage of educational opportunities regarding Medicare home health and care plan oversight billing and support advocacy efforts of their professional organizations.

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