

**Nursing and Health
Policy: Leadership in an
Era of Health Care Reform**

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Overview

- How the Affordable Care Act can support nurse-led innovations in health care and what are its limitations.
- Nurse-led innovative models of care that could transform health care delivery in the U.S.—what we've learned.
- Why the IOM report on *The Future of Nursing* is a game-changer for nurses and health reform.
- Strategies that DNP nurses can use to advance nursing perspectives on reforming health care.

CURRENT HEALTH CARE SYSTEM

HEALTH
PROMO/
WELLNESS

PRIMARY CARE

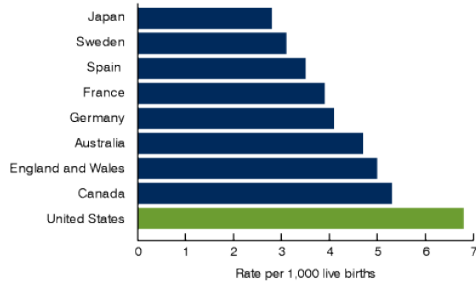
RECOVERY CARE/LTC/HOME CARE

ACUTE CARE

What's wrong with this model?

- Costly - #1 in spending on health care
- Poorer outcomes than other industrialized countries

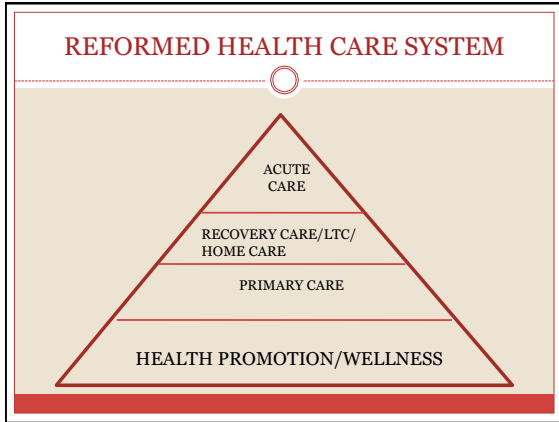
Figure 2. Infant mortality rates: Selected countries, 2004

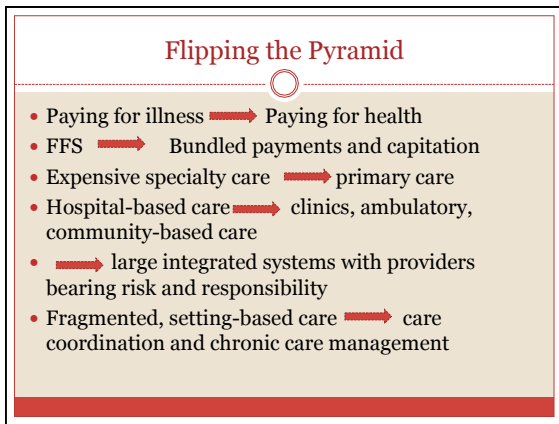


SOURCE: Health, United States, 2007, Table 25, http://www.cdc.gov/nchs/data/health_us07.pdf#listables.

Commonwealth Fund Comparative Analysis of Health Systems

- Australia, Canada, Germany, the Netherlands, New Zealand, United Kingdom, U.S.
- Measures and Ranking:
 - Health care quality – 6th
 - Efficiency – 7th
 - Access – 7th on every measure of cost-related access
 - Ability for citizens to lead long, healthy lives – 7th on infant mortality and preventable deaths under age 75
 - Per capita health care spending – 1st







ACA: Ground-breaking Framework

- Quality improvement
- Structural reform
- Payment reform

Key Features to Flip the Pyramid

- Extending coverage and reforming insurance rules
- PCMH/PCHH
 - Interprofessional teams
 - Access to Care - online appointments and e-visits; telephone consultations; electronic prescribing/refills
 - Patient Engagement - care reminders; pt access to health records; shared decision making with pts and families
 - Care Coordination for those with multiple chronic illnesses

Key Features to Flip the Pyramid

- Expanding CHCs and nurse-managed health centers
- Paying for primary care
 - PCPs get 10% payment bonus for Medicare office visits, nursing home, home visits (2011-2016)
 - Medicaid PCP payment rates raised to Medicare levels (2013)

Key Features to Flip the Pyramid

- **ACOs and bundled payments**
 - “organization of providers that agrees to be accountable for quality, cost and overall care of Medicare beneficiaries”
 - 2012
 - Shared savings if reduce costs and meet quality standards
 - 5000 patients minimum
 - Physician practices and hospitals
 - Controversy around regulations: Will they cost hospitals too much?
 - Pioneer initiative and other creative responses

Key Features to Flip the Pyramid

- **Value-Based Purchasing**
 - Incentive payments for improving quality measures
 - First year: acute myocardial infarction, heart failure, pneumonia, surgeries and hospital-acquired infections
- **Other payment incentives and penalties – e.g. HAIs and readmissions**

Key Features to Flip the Pyramid

- **Center for Innovation at CMS**
- **Pilots and demo projects**
- **Expansion of public health and prevention**
- **Developing the health care workforce**
- **“Provider” language**
- **CNMs at 100% Medicare rate**

Repeal or Refine?

- **Why repeal?**
 - Individual coverage mandate
 - Cost
 - Politics
- **Why refine?**
 - Example of Social Security
 - Cost of current care: dollars and outcomes
 - Innovation and system reform
- **Mandates vs. appropriations**

Are we ready to lead health care reform?

American Academy of Nursing's Raise the Voice Campaign
Robert Wood Johnson Foundation
www.aannet.org/raisethevoice

EDGE RUNNERS

Liberty Country Living

MERIDIAN MAAS
JANET SPECHT

Lessons

- Don't assume that your good work will be recognized and valued.
- Building relationships and partnerships are key.
- Visibility with journalists and policymakers is essential.
- We are challenged by a regulatory environment that developed because of bad practices.

Transitional Model of Care

MARY NAYLOR, PHD, RN, FAAN
UNIVERSITY OF PENNSYLVANIA

NINR-FUNDED RESEARCH

The Model

- APRNs coordinate care of high risk patients in hospital
- Follow home within 24 hours
- Work with patient, family caregivers, and providers
- Stops the cycle of acute episodes of chronic illness

Outcomes

- Reduced 30-day hospital readmissions rate
- Increased time from DC to readmission
- Saved >\$5,000 per Medicare patient
- Challenge: Payment mechanisms
- Aetna and Kaiser testing

Lessons Learned

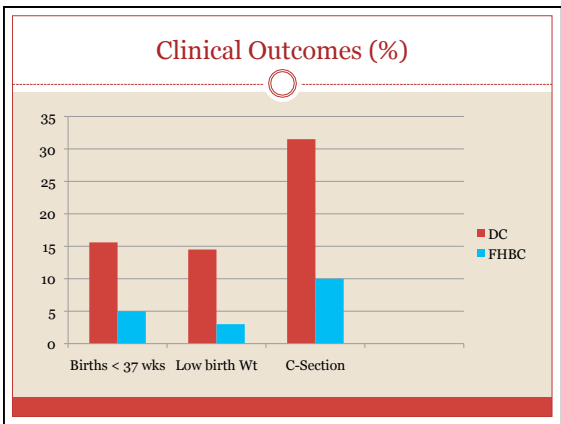
- Solid clinical and financial data
- Partnerships and “the ask”
 - AARP partnership
 - What is the ‘ask’?
 - ACA demos for partnerships between hospitals and home care agencies
 - Expansion at the discretion of the secretary of HHS

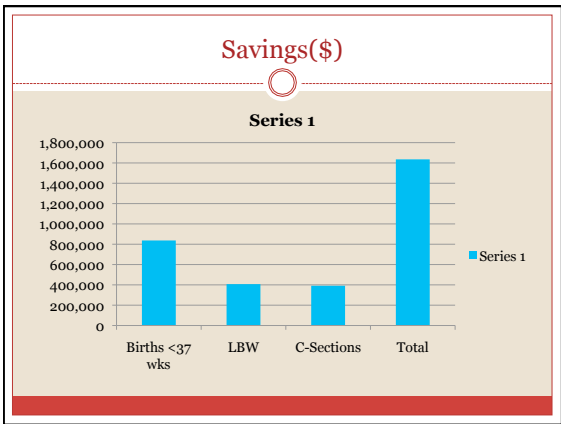
Putting Health Care in Its Social Context

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FAMILY HEALTH AND CHILD BIRTHING
CENTER OF WASHINGTON, DC







Infrastructure of CBCs

- Nurse midwifery model of care
- Endorsed by ACOG and >100 MDs
- >120 CBCs
- Should be frontline of maternity care in US: improve outcomes and lower costs

Challenges

- Payment of CNMs and the ACA
- Financial viability
- FHCB annual operating budget ~\$1.1 million/yr
- Lubic's fundraising
- "No one cares about the Medicaid population" vs. reducing federal and state \$
- Watch for MCH bills to be introduced into Congress

Challenges

- When is "enough data" enough?
- More demonstration projects?
- Coherent, aggressive strategy and messaging
- Who is the consumer partner with weight?

Nurse-Managed Centers

**NATIONAL NURSING CENTER
CONSORTIUM**
WWW.NNCC.US

NMCs

- HRSA-funded start ups as SON sites to serve the underserved and vulnerable populations
- Grant funding
- A few FQHCs
- Independence Foundation support to sustain and move beyond descriptive data

National Consortium for Nursing Centers

- President Obama's planned expansion of community health centers
- Over 250 nursing centers nationwide
- Barriers to sustainability
 - Reimbursement of NPs
 - Becoming a FQHC – requirement for 51% consumer representation on board
 - Require MCOs to credential APRNs
 - Scope of practice
 - Include APRNs in Medical Home initiatives

Convenient Care Clinics

CONVENIENT CARE ASSOCIATION
WWW.CCACLINICS.ORG

DONNA HAUGLAND
TINE HANSEN-TURTON

Minute Clinics and Beyond

- Today, 1200 clinics
- Serving over 3.5 million people

Ateev Mehrotra, M.D., M.P.H., University of Pittsburgh and RAND;
Health Affairs, Annals of Internal Medicine

- **Studies document:**
 - safety net provider
 - quality
 - prevention focus
 - referrals/continuity
 - comparable on prescriptions
 - cheaper than private MDs and ED

LIFE

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- Living Independently For Elders
- PACE program at University of Pennsylvania School of Nursing
- Capitated; full risk
- Reduced nursing home placements, ER visits, hospitalizations, falls, pressure ulcers
- Saves 15 cents on every dollar spent
- ACA: Independence At Home; MDs and RNs

Wise Health Decisions®

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NANCY E. DAYHOFF, EDD, RN, CNS
PATRICIA S. MOORE, MSN, RN, CNS, CDE

TCAB

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SUSAN HASSMILLER, PHD, RN, FAAN
PATRICIA RUTHERFORD, MS, RN

Barriers to Nurses' Innovative Models of Care

- Elements of Medicare and Medicaid
- Lack of clinical and financial outcome data
- Lack of knowledge about scaling up interventions
- Limited innovation on use of media to bring visibility to the barriers and solutions
- Failure to anticipate policy barriers and "asks"
- Being at important policy tables
- Access to capital and IT funds
- Being prepared to lead

Mandate for Nurse Educators

CLINICAL AND FINANCIAL OUTCOME
SELECTION, MEASUREMENT, AND ANALYSIS

DEVELOPING AN IT INFRASTRUCTURE TO
CAPTURE NEEDED DATA

PRESENTING DATA TO KEY STAKEHOLDERS

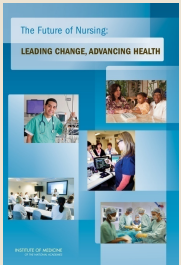
This IS nursing's time.

**Future of Nursing: Campaign
for Action**

INSTITUTE OF MEDICINE
ROBERT WOOD JOHNSON FOUNDATION
CENTER FOR CHAMPIONING NURSING IN AMERICA
(AT AARP)

IOM Report

High-quality, patient-centered health care for all will require a transformation the health care delivery system



Why Nurses?

A high-quality health system will provide:

- Chronic care management
- Care coordination
- Prevention and wellness
- Care across the lifespan

Nurses can help address these needs



IOM Future of Nursing Report

A blueprint to:

- Foster interprofessional collaboration
- Enable all health professionals to practice to full level of education and training
- Improve nursing education
- Prepare and enable nurses to lead change
- Improve workforce data collection & analysis

Campaign for Action Strategies

1) Collaborate with a broad array of stakeholders	2) Activate on local, state and national levels
3) Communicate the call to action	4) Monitor results to ensure accountability

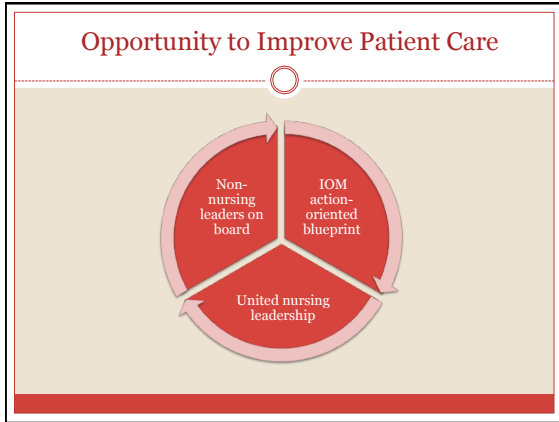
Campaign for Action

Your role:

- Recruit engaged and committed stakeholders
- Educate policy-makers on key issues
- Reach out to philanthropies/funders
- Gain visibility through media
- Move key recommendations forward

www.iom.edu/nursing

www.thefutureofnursing.org



- ### The Environment Has Changed
- Media coverage
 - Policymakers are interested
 - Consumer organizations are interested
 - The Macy Foundation breaking turf barriers:
“Who Will Provide Primary Care and How Will They Be Trained?”
www.josiahmacyfoundation.org
 - RWJF meetings between MDs and APRNs

Our nation needs our ideas, our expertise, our innovations

WILL WE BE LEADERS IN HEALTH CARE REFORM?

Next Steps with ACA

- **Regulations**
 - Communicate with CMS and HRSA
 - Public comments
- **State exchanges**
- **Appointments – nurses and non-nurses**
- **New legislation**

Next Steps

- **What are your innovations?**
- **Can/should they be spread, scaled up?**
- **Seize opportunities to test them.**
- **Apply to be an AAN Edge Runner:**
www.aannet.org/raisethevoice

Next Steps

- **Seize opportunities to lead**
 - IOM Commission on the Future of Nursing
 - Develop a media strategy to showcase nurses' work (context of improving access to quality, affordable, equitable health care)
 - State Medicaid Director, legislators, governor
 - Insurers

Next Steps

- **Partnerships**
 - Nursing organizations
 - Other provider groups (eg. PAs)
 - Consumers – AARP
 - Business community
 - Foundations

Developing the Nursing Workforce

- Educational innovations and financial support
- Leadership development
 - Getting to the table
 - What to do once you get there
 - Mentoring and coaching
 - Interprofessional conversations
 - Clinical leadership, rounding, TCAB
- What will improve health outcomes and control costs?

Advancing Nurses' Solutions for Reforming Health Care

FOR OUR PATIENTS, OUR COMMUNITIES, AND OUR NATION
