

November 30, 2017

David Seltz, Executive Director Health Policy Commission 50 Milk Street, 8th Floor Boston, MA 02109

Dear Director Seltz:

On behalf of the Massachusetts Coalition of Nurse Practitioners (MCNP) and the more than 9,000 licensed Nurse Practitioners (NPs) in Massachusetts we represent, I am writing to provide feedback on the proposed updates for the 2018 filing for Massachusetts Registration of Provider Organizations (MA-RPO).

MCNP seeks to be a partner as Massachusetts continues to prioritize health care reform, access to care and cost savings measures. We continue to advocate for those initiatives that provide the Commonwealth with the flexibility needed to optimize resources and to position the provider workforce to address consumer demand, while simultaneously promoting the type of provider transparency that informs quality and is requisite for value based payment models. We believe that Nurse Practitioners are an essential part of the solution, and empowering NPs to practice to the full extent of their licenses would close gaps in access experienced by vulnerable populations and contain costs by supporting innovative models of care.

MCNP has been advocating for a change in Massachusetts law that would allow NPs this flexibility and are encouraged that this legislation will be passed this session. Thus, our comments to the proposed 2018 MA-RPO filing are in this context.

The proposed changes to the Provider Registry offer a specific opportunity to further the discussion on our overall healthcare system and the role that NPs can play in that system, and we are encouraged by the inclusion of NPs in the Provider Registry.

With that said, we would urge that if NPs are listed in a Provider Registry, they are listed alongside physicians in one central Registry. To separately list NPs from their physician colleagues can inaccurately raise issues about different levels and quality of care.

Additionally, we adamantly oppose the inclusion of supplemental data related to supervising physicians in RPO-99A through RPO-99E, as NPs are independently licensed for all elements of their clinical practice, outside of prescribing. The aforementioned presents a false impression of less-adequate care. The proposed collection of this additional data does not benefit the public in any way, and we urge that this language be removed from the final reporting requirements.

On behalf of the more than 9,000 Nurse Practitioners across the state, and the thousands of patients we serve, I urge your careful consideration of these concerns.

Thank you for the opportunity to comment and I look forward to working with you more on this issue.

Respectfully,

Stephanie Ahmed, DNP, FNP-BC

Past President and Legislative Co-Chair Massachusetts Coalition of Nurse Practitioners