

ANA Gains Relief for Nurse Practitioners on Electronic Prescribing

Summary

In response to a Medicare rule that could have reduced payments by 1 percent in 2012 for nurse practitioners (NPs) who do little or no prescribing, the American Nurses Association (ANA) requested the Centers for Medicare and Medicaid Services (CMS) to make a change to exempt non-prescribing NPs from such penalties. On June 1, a change was announced in the Federal Register to delay the rule and to exempt clinicians with limited prescribing activity — either no prescriptions or up to nine prescriptions over a six-month period.

Background

Many of the more than 45,000 NPs who directly bill Medicare Part B could have been subject to the pay cut for not using electronic prescribing, including NPs who don't prescribe at all. This possibility occurred due to language buried in the electronic prescribing sections of a 2008 Medicare law and further hidden in 671 pages of a July 2010 Notice of Proposed Rule Making with respect to Payment Policies under the Physician Fee Schedule.

ANA regulatory analysts became aware of this possibility based on an announcement from CMS in February 2011. After researching the issue, soliciting input from NPs in practice, and speaking with CMS staff, it became clear to ANA that the rule's drafters had not considered the possibility that some clinicians with prescribing authority nonetheless might choose not to prescribe at all.

The final rule — published in November 2010 — put those NPs in financial jeopardy with no possibility of relief. ANA posted an [information notice to NPs](#) to alert them to the possibility of pay cuts and to instruct them on the proper codes NPs needed to use on Part B claims to document electronic prescribing.

In April 2011, ANA CEO Marla Weston, PhD, RN, wrote to CMS Administrator Don Berwick, MD, to ask for relief for NPs who provide primary care services to Medicare beneficiaries but do not prescribe. The rule subsequently was changed in NPs' favor by adding the requested exemption option for low-prescribing NPs.

Individual NPs will still be responsible for requesting the exemption, but due to ANA's advocacy they now have a way to avoid the financial penalties that might have been imposed. (When the exemption process is finalized by CMS, ANA will also make that information widely available.)