



October 26, 2017

Secretary David J. Shulkin  
U.S. Department of Veterans Affairs  
810 Vermont Avenue NW  
Room 1063B  
Washington, DC 20420

Attn: Director, Regulation Policy and Management (OOREG)

Submitted electronically to [www.regulations.gov](http://www.regulations.gov)

Re: Authority of Health Care Providers to Practice Telehealth (RIN 2900-AQ06)

Dear Secretary Shulkin:

The American Nurses Association (ANA) is pleased to comment on the Department of Veterans Affairs' (VA) proposed rule on Authority of Health Care Providers to Practice Telehealth. ANA is the premier organization representing the interests of the nation's 3.6 million registered nurses (RNs) through its constituent and state nurses associations, organizational affiliates, and individual members. ANA advances the nursing profession by fostering high standards of nursing practice, promoting a safe and ethical work environment, bolstering the health and wellness of nurses, and advocating on health care issues that affect nurses and the public. RNs serve in multiple direct care, care coordination, and administrative leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions including essential self-care, and provide advice and emotional support to patients and their family members. ANA members also include the four advanced practice registered nurse roles (APRNs): nurse practitioners (NPs), clinical nurse specialists (CNSs), certified nurse-midwives (CNMs) and certified registered nurse anesthetists (CRNAs).<sup>1</sup>

The VA has made extensive use of telehealth programs to meet veterans' healthcare needs. The VA estimated that in 2014 it provided telehealth services to approximately 690,000 veterans - about 12 percent of the veterans who receive care from the VA.<sup>2</sup> The proposed rule would amend VA's medical regulations by standardizing the delivery of care by VA health care providers through telehealth. ANA applauds the VA for taking important steps to ensure that beneficiaries receive the same high level of care and access to care irrespective of the state or location in a state of the VA health care provider or the beneficiary. The proposed rule would clarify that VA health care providers may exercise their authority to provide care through the use of telehealth, notwithstanding any state laws, rules, or licensure, registration, or certification requirements to the contrary. The VA would exercise federal preemption of state licensure registration, and certification

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<sup>1</sup> The Consensus Model for APRN Regulation defines four APRN roles: certified nurse practitioner, clinical nurse specialist, certified nurse-midwife and certified registered nurse anesthetist. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.

<sup>2</sup> U.S. Department of Veterans Affairs. (2014). *VA telehealth services served over 690,000 veterans in fiscal year 2014* [Press release]. Retrieved from <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2646>

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laws, rules, regulations, or requirements to the extent such state laws conflict with the ability of VA health care providers to engage in the practice of telehealth while acting within the scope of their VA employment.

ANA supports the VA's consistent use of provider neutral terms (such as *health care provider*) when referencing and describing VA employees authorized to provide care through the use of telehealth to VA beneficiaries. The consistent use of provider neutral language is essential to accurately describe the range of health care providers who provide care and services to veterans and their families.

ANA continues to emphasize the position that all RNs and APRNs should practice to the full extent of their clinical education, training, and national certification. The implementation of this proposed rule enables the VA to increase veteran access to needed health care and provide additional health care services in medically underserved areas where RNs and APRNs could practice to the full extent of their practice authority. This is an important step in ensuring that our nation's veterans receive the high quality health care that they have earned. ANA is dedicated to partnering with health care consumers and providers to improve practices, policies, delivery models, outcomes and access across the health care continuum.

ANA appreciates the opportunity to share our views on this matter. If you have questions, please contact Mary Beth Bresch White, Director, ANA Health Policy at 301.628.5022 or [marybreschwhite@ana.org](mailto:marybreschwhite@ana.org).

Sincerely,

A handwritten signature in cursive script that reads "Debbie Hatmaker".

Debbie Hatmaker, PhD, RN, FAAN  
Executive Director

cc: Pamela Cipriano, PhD, RN, NEA-BC, FAAN, ANA President  
Marla Weston, PhD, RN, FAAN, ANA Chief Executive Officer