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NEWS RELEASE



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**Final ACO Rules Adopt ANA’s Recommendations on Nursing Leadership,
Patient-Centered Care**
ANA Contends Improvements Can Be Made on Care Coordination Provisions

SILVER SPRING, MD – The American Nurses Association (ANA) commends federal regulators for heeding ANA’s advice to expand registered nurses’ (RNs) roles in their final rules for creating a new type of collaborative health care organization, but contends that improvements still should be made to recognize the value of care coordination provided by nurses.

ANA is particularly pleased that final rules issued by the Centers for Medicare and Medicaid Services (CMS) for Medicare Accountable Care Organizations (ACOs) include these changes, based on recommendations from ANA and other nursing groups:

- Medicare beneficiaries who get most of their primary care from a nurse practitioner (NP) or clinical nurse specialist (CNS) will be able to continue that primary care relationship within the ACO. Before this rule change, a patient’s ability to access the ACO depended only on services provided by physicians, but not NPs or CNSs, whom CMS refers to as “significant assets to the ACO in the area of quality and cost saving.” By recognizing a beneficiary’s true primary care provider, this change promotes continuity of care and honors patients’ rights to choose their providers.
- Qualified health professionals, including RNs, will be recognized as leaders in quality assurance and process improvement initiatives within an ACO. This change, urged by

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ANA, is a further step toward meeting the recent Institute of Medicine's *Future of Nursing* report recommendation that "nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States."

"CMS has strengthened the plan outlining how accountable care organizations will operate by recognizing the crucial role of nurses as primary care providers and care coordinators in this health care delivery model," said ANA President Karen A. Daley, PhD, MPH, RN, FAAN. "ACOs must be more than just a business structure for compensating members of the health care team, but a means to achieve the larger goal of providing true patient-centered care that is essential to improving quality and reducing costs."

In making changes from the proposed rule, CMS leadership was persuaded by the voice of nursing: ANA's comments were explicitly quoted and partner nursing organizations' concerns were acknowledged in several modified sections of the final rule.

"The changes between the proposed and final ACO rules reflect the positive influence nursing organizations can exert on the way health care is delivered in this country when we are unified in the best interests of patients and the nursing profession," said ANA CEO Marla J. Weston, PhD, RN.

ANA believes that ACOs can be improved further by creating processes and incentives that specifically recognize and measure nurses' integral contributions to improvements in quality of care and care coordination. Care coordination is a core foundation of professional nursing practice, reflecting interdisciplinary communication skills, evaluation, judgment and decision-making by nurses, and is not achieved by reliance on health information technology alone.

Read more on [ANA's policy analysis on ACOs](#).

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The ANA is the only full-service professional organization representing the interests of the nation's 3.1 million registered nurses through its constituent and state nurses associations and its organizational affiliates. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.