July 25, 2016

The Honorable Robert A McDonald
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue NW., Room 1068
Washington, DC 20420

Re: RIN 2900-AP44-Advanced Practice Registered Nurses.

Dear Secretary McDonald,

The National Kidney Foundation appreciates the opportunity to comment on the proposed rule to permit full practice authority of all Veterans Affairs (VA) advanced practice registered nurses (APRNs) when they are acting within the scope of their VA employment. NKF supports this proposal.

NKF is America’s largest and long-established health organization dedicated to the awareness, prevention, and treatment of kidney disease for hundreds of thousands of healthcare professionals, millions of patients and their families, and tens of millions of people at risk. In addition, NKF has provided evidence-based clinical practice guidelines for all stages of chronic kidney disease (CKD), including transplantation since 1997 through the NKF Kidney Disease Outcomes Quality Initiative (NKF KDOQI). Under this proposed rule, full-practice authority would allow APRNs to deliver advanced practice nursing services, for which they are educated, trained, and board certified to provide, without the supervision of a physician.

APRNs are critically important in the evaluation, diagnosis, education and care of patients with kidney disease. As reported in the 2010 Institute of Medicine (IOM) report, “The Future of Nursing: Leading Change Advancing Health,” evidence suggests that better use of APRNs can improve patient access to chronic care, reduce hospitalizations, and rehospitalizations in the elderly. It is therefore reasonable to expect that better use of this important workforce may also help improve earlier detection and treatment for Veterans who have CKD. The estimated number of Veterans with CKD ranges between 1.1 million and 2.5 million, 16% to 36% of the overall population served by the VA.

APRNs are educated and trained to deliver a high level of quality health care across the life span of their patients. While many states have updated regulations to allow APRN’s full-practice authority, for example the proposed rule sites 50% of states have granted full-practice authority to board certified nurse practitioners (CNP), the variation in state regulations leads to inconsistency in patient access to the services APRNs are capable to provide. The patients, who would otherwise benefit, miss out on the opportunity to take advantage of these highly skilled and trained health care providers. At all times, the
APRN must maintain certification and is accountable to state boards of nursing and the public for upholding standards of care. NKF is pleased that the VA is taking steps to update its regulations to recognize the added value APRNs practicing to their full practice authority bring to improving patient care and to standardize practice across the VA in order to achieve continuity in patient access to care, regardless of geography.

Sincerely,

Kevin Longino
Kevin Longino
CEO
Kidney Patient