

December 18, 2015

The Honorable Charles Grassley
United States Senate
Washington, DC 20510

The Honorable Richard Blumenthal
United States Senate
Washington, DC 20510

Dear Senators Grassley and Blumenthal:

On behalf of the undersigned organizations, we are pleased to offer our support for your legislation, the “Provider Payment Sunshine Act” (S.2153). We support your effort to promote transparency to ensure patients are informed of potential financial relationships health professionals may have with manufacturers of medical devices and pharmaceutical products and services.

Representing physician assistants (PAs) and advanced practice registered nurses (APRNs) including nurse practitioners, certified registered nurse anesthetists, certified nurse-midwives, and clinical nurse specialists as well as APRN and PA students and the faculty who educate them, we believe requiring applicable manufacturers to include information regarding payments made to APRNs and PAs in transparency reports submitted under section 1128G of such Act is essential.

While we strongly support expanded transparency, we would recommend the legislation exclude de minimis transfers from medical device and pharmaceutical manufacturers to those covered under the Act. Eliminating the current \$10 per incident threshold and the aggregate threshold of \$100 in favor of reporting all transfers of \$200 or more would promote public attention to relatively larger transfers of value to healthcare professionals and reduce compliance burdens associated with minor matters. Much of the data being collected today in relation to the Act captures relatively minor items of value which we do not believe is the type of transparency information the public is seeking.

APRNs and PAs welcome being subject to the same transparency scrutiny as physicians in the Medicare program. It follows, though, that when APRNs and PAs provide the same services as physicians, with the same safe patient outcomes, the Medicare program should treat them the same as a general rule. It does not. Medicare policy includes numerous payment differentials, supervision requirements, limitations on care delivery, and other barriers to patient access to care by APRNs and PAs. We look forward to working with you and your colleagues to continue addressing these barriers – a critically important task as the number of Medicare beneficiaries will double to nearly 80 million by 2030, just 15 short years away.

Thank you for your leadership in introducing S 2153, and we look forward to working with you to refine and enact this measure into law in the public interest.

Sincerely,

American Association of Colleges of Nursing, AACN
American Association of Nurse Anesthetists, AANA
American Academy of PAs, AAPA
American College of Nurse-Midwives, ACNM
National Association of Pediatric Nurse Practitioners, NAPNAP
National Association of Clinical Nurse Specialists, NACNS
National League for Nursing, NLN