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Same Pay for the Same Service:
Advocacy Efforts in Washington State

Submitted to the Faculty
Yale University School of Nursing and *The Nurse Practitioner*

In Partial Fulfillment
of the Requirements for the Degree
Doctor of Nursing Practice

Justin Gill

March 31, 2019

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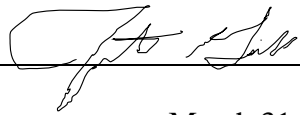
This DNP Project is accepted in partial fulfillment of the requirements for the degree
Doctor of Nursing Practice.

Lisa Summers, DrPH, FACNM

Date _____

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March 31, 2019

Same pay for the same service: Advocacy efforts in Washington state

By Justin Gill, MS, ARNP, FNP-C , Louise Kaplan, PhD, ARNP, FNP-BC, FAAN, FAANP , and Lisa Summers, DrPH, CNM, FACNM

Advanced Practice Nursing and Reimbursement

Advanced practice registered nurses (APRNs) continue to provide critical access to health care throughout the United States. Multiple studies have shown that the outcomes of APRNs are equivalent to physicians.^{1,2} In addition, APRNs are more likely to practice in rural areas as compared to physicians.³ More individuals have access to health insurance since implementation of the 2010 Patient Protection and Affordable Care Act which has increased the demand for health care providers.

APRNs or their employers bill for the services they provide. Medicare reimburses nurse practitioners (NPs), certified registered nurse anesthetists (CRNAs), and clinical nurse specialists (CNSs) 85% of the physician fee schedule while certified nurse midwives are reimbursed at the same rate as physicians since passage of the Patient Protection and Affordable Care Act in 2010.⁴ Medicaid and private insurance reimbursement varies widely based on state regulations and

health plan policies.⁵ Oregon is the only state with legislation requiring private insurers to reimburse NPs and Physician Assistants (PA) in primary and behavioral health care at 100% of the physician rate.⁶ APRNs are expected to achieve the same quality of care for patient outcomes, and assume full responsibility and liability for the care they provide compared to physicians, yet payment for their services are not always equivalent. This article describes efforts in Washington state to achieve reimbursement parity.

ARNPs in Washington State

All APRNs in Washington State are licensed as Advanced Registered Nurse Practitioners (ARNPs).⁷ ARNPs have full practice authority in Washington State⁸ and Medicaid and the Department of Labor and Industries reimburse ARNPs at 100% of the physician rate.⁹ The reimbursement practices of private insurance companies are difficult to track due to the proprietary nature of reimbursement contracts.¹⁰ Nonetheless, two of the state's largest insurers, Premera Blue Cross and Regence Blue Shield, announced in memos to ARNPs the plan to reduce NP reimbursement to 85% of the physician rate in 2013 and 2015, respectively.^{11,12,}

13

Efforts to achieve the same pay for the same service

Regence Blue Shield reimbursed NPs at 95% of the physician fee schedule for nearly two decades before reducing reimbursement to 85%. A complaint was filed by an NP with the Washington Office of the Insurance Commissioner in 2002, citing a section of Washington law which seemed to indicate parity reimbursement was required. The complaint was initially upheld as valid but overturned on appeal.¹⁴ A lawsuit filed by the Washington State Nurses Association to argue in support of payment parity for ARNPs was rejected in King County Superior Court.¹⁵ In order to achieve reimbursement parity, legislation will be required to mandate that private insurers pay ARNPs the same rate as physicians for the same service.

ARNPs United of Washington State

ARNPs United of Washington State (AUWS) is a statewide professional organization. AUWS has historically advocated for reimbursement parity. In 2016 after several attempts, AUWS worked successfully with the Department of Labor & Industries to increase NP reimbursement through the regulatory process from 90% to 100% of the physician rate. Legislative efforts to require parity reimbursement were stalled for over a decade for several reasons including lack of support from an influential lawmaker. In 2018, AUWS developed a multi-pronged strategy to garner support for the introduction of a bill. This advocacy strategy included a statewide survey to identify the effects of

reduced health plan reimbursement, a political endorsement process, engagement with AUWS membership, meetings and communication with legislators, and identifying legislative champions.

AUWS Political Endorsement Process

Washington State law allows organizations to provide political endorsements. Forming a political action committee would be required if money was to be raised and donated to candidates. The political endorsement process used by AUWS included development of a candidate questionnaire, development of rating criteria, communication with candidates, organizing responses for review, and a meeting to determine which candidates to endorse.

The 231 candidates for the state Senate and House races were contacted after the primary election results were certified by the Washington Secretary of State (SOS) on August 24th, 2018. Responses were received from 75 candidates. In addition to the candidate's responses, factors considered for endorsement included the political lean of the district, party, incumbency status and leadership role, and whether the candidate was endorsed by other nursing organizations. Thirty-three House candidates and 13 Senate candidates were endorsed. AUWS announced the endorsements on the organization's website and Facebook page. Many of the candidates promoted the endorsement

using their campaign media. Among those endorsed, 22 of 33 (66.7%) House candidates and 10 of 13 (76.9%) Senate candidates were elected. AUWS sent a congratulatory message to the newly elected officials.

Communication with Membership

In addition to the announcements on the AUWS website and Facebook page, endorsements were discussed during the AUWS annual meeting in October 2018. Current and prospective AUWS members received updates on the political endorsement process and efforts to promote legislation.

2019 Legislative Session

In Washington state, the 2019 legislative session runs from January to April. A leadership team of AUWS met with a key committee chairperson in November 2018. A briefing packet with workforce data, the 2018 ARNP survey results, and health plan reimbursement information was presented to the legislator. As a result of the meeting, the legislator gave permission to submit a bill which was drafted by committee staff using the Oregon law as a model. Preparation for the legislative session included organizing talking points, identifying and collaborating with a new contract lobbyist, and outlining a strategy for bill sponsorship and introduction. Part of this process involved discussions with other organizations and professions, such as the physician assistant group, the medical association, and

other nursing organizations. Knowing the health plans would oppose the bill, understanding the positions of these organizations on reimbursement parity was necessary in order to strategize for the legislative session. [House Bill \(HB\) 1433](#) and [Senate Bill \(SB\) 5647](#) were introduced in the Washington State Legislature in January 2019. Eleven representatives served as sponsors for HB 1433, and twelve senators served as bipartisan sponsors for SB 5647.

Next Steps

In the 2019 session, HB 1433 and SB 5647 did not receive a hearing by their respective committees, which effectively killed the bill for the 2019 session. The efforts to promote the bill during the 2019 session were the groundwork for securing a hearing in the 2020 legislative session. In the interim, AUWS will work with its membership and coalition partners to lobby legislators, collect stories from ARNP practice owners, and meet with key committee chairs before the next session to promote a hearing.

Bills often take several years to pass. The Oregon pay parity bill required three sessions for passage. Advocates in Washington State are undeterred and will be back in 2020.

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