

 RE: AACN Response to AMA Resolution 214

**From:** James Madara  
**Sent:** Thursday, November 30, 2017 11:20 AM  
**To:** Deborah Trautman  
**Cc:** David O. Barbe  
**Subject:** RE: AACN Response to AMA Resolution 214

Dear Drs. Trautman and Sebastian,

Thank you for your message regarding Resolution 214. The AMA recognizes that to fully serve patients today and into the future, it is essential that physicians and nurses work together. We thus share your commitment to advancing team-based care.

We greatly valued our partnership in the Interprofessional Education Collaborative, which aimed to help schools develop interprofessional training programs to better prepare health care professionals for team-based care. The AMA has continued pursuit of this goal through our Accelerating Change in Medical Education Consortium. Through the Consortium, the AMA is collaborating with medical schools to transform medical education, including through initiatives that prepare future physicians for practice in a team-based care environment.

Our views clearly differ on whether advanced practice nurses (APRNs) should practice independently. From patient-centered medical homes to some of the nation's largest health care systems, we firmly believe that physician-led team-based care—not fragmented, autonomous care—is the ideal model of health care delivery.

Accordingly, the AMA takes particular issue with the fact that the APRN Compact authorizes APRN multistate license holders to practice independent of a supervisory or collaborative relationship with a physician, superseding state laws or regulations that require such a relationship. We note that of all the health professional licensure compacts, the APRN Compact is the only one that attempts to expand the profession's scope of practice at the same time. As the AMA's policy in opposition to independent APRN practice is clear and longstanding, the policy adopted last month should not have come as a surprise.

While the AMA and American Association of Colleges of Nursing (AACN) may have differing views on certain policy issues, we encourage the AACN to join us as we work with other professional societies in maintaining a meaningful and productive dialogue on matters of common interest for the purpose of advancing patient safety and access to our nation's health care system.

Sincerely,

James L. Madara, MD  
CEO, American Medical Association

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**From:** Deborah Trautman  
**Sent:** Wednesday, November 29, 2017 1:54 PM  
**To:** David O. Barbe; James Madara  
**Subject:** AACN Response to AMA Resolution 214

November 29, 2017

David O. Barbe, MD, MHA, President  
James L. Madara, MD, Chief Executive Officer  
American Medical Association  
330 N. Wabash Ave., Suite 39300  
Chicago, IL 60611-5885

Dear Drs. Barbe and Madara,

As the voice for academic nursing, the American Association of Colleges of Nursing (AACN) is committed to quality education, research, and practice, which requires a strong interprofessional team where all members practice to the full extent of their education, clinical training, and certification. AACN, which represents more than 810 schools of nursing and nearly 500,000 nursing students, was one of the founding members of the Interprofessional Education Collaborative (IPEC), which aims to create real change

in the delivery system by advancing core competencies among all healthcare professionals. These competencies focus on mutual respect and shared values with the goal of advancing team-based care, which includes collaboration among nurse practitioners and their physician colleagues.<sup>[i]</sup> We write today to share our concerns regarding AMA's recently adopted amendment to Resolution 214, as we believe it disregards the importance of key IPEC competencies, specifically related to knowledge of roles, communication, and relationship-building.

First, understanding the roles and responsibilities of all members of the healthcare team, specifically Advanced Practice Registered Nurses (APRNs), is paramount. Decades of research have shown that APRNs provide safe, high-quality, and cost-effective care. This evidence has informed state and national stakeholders who support APRNs practicing to the top of their licensure and call for removing barriers to APRN practice.<sup>[ii],[iii],[iv]</sup> This evidence also has led authorities to identify restrictive legislation and policies impacting APRN practice as restraint of trade. The Federal Trade Commission (FTC) strongly promotes competition in the healthcare industry, which benefits consumers by helping to control costs and prices, improving quality of care, and expanding access to healthcare services. The FTC's analysis of APRN roles and responsibilities found that:

*Numerous expert health care policy organizations have concluded that expanded APRN scope of practice should be a key component of our nation's strategy to deliver effective health care efficiently and, in particular, to fill gaps in primary care access. Based on our extensive knowledge of health care markets, economic principles, and competition theory, the FTC staff reaches the same conclusion: expanded APRN scope of practice is good for competition and American consumers. [v]*

Moreover, each profession must guide the educational and practice standards of their discipline. The AMA's resolution specifically highlights and opposes the Consensus Model for APRN Regulation. AACN is the convener of the Licensure, Accreditation, Certification, and Education (LACE) network, which represents more than 30 APRN organizations that worked to develop and implement the Consensus Model. The primary goal of this model is to address gaps in healthcare and expand access to APRN services. Collaboration among these nursing organizations is purposeful, timely, and ongoing. Nursing firmly believes that we have a responsibility to work together to align our practice with the nation's most pressing healthcare needs, particularly in the areas of primary care, population health, social determinants of health, and precision health. AMA's Resolution 214 speaks against the Consensus Model, and we are concerned that APRN roles and responsibilities are not well understood, nor are the benefits provided to the patient.

Finally, we believe communication and relationship building is needed. In a 21st century healthcare system where innovation and collaboration are the hallmarks of true progress, the intent to develop a national strategy to impede qualified professionals from increasing access to care, as your organization proposes, halts forward momentum. Together we must engage in dialogue for the benefit of the patient, family, and community. The core competency of responsible communication calls on us to listen and hear each other, allowing some space for discussion and debate. AACN believes that we must demonstrate responsible communication and welcomes the opportunity for a national discourse with the AMA and other stakeholders on how to overcome this divided path. We look forward to opening a dialogue with you to discuss the points raised in this letter and to clear up any misperceptions related to the APRN role. Together we can build a stronger relationship for the sake of our nation's health and the patients we both serve.

Sincerely,

Juliann G. Sebastian PhD, RN, FAAN  
Chair of the Board of Directors

Deborah E. Trautman, PhD, RN, FAAN  
President and Chief Executive Officer

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[i] Interprofessional Education Collaborative. (2016). *Core Competencies for Interprofessional Collaborative Practice: 2016 Update*. Retrieved from <http://www.aacnnursing.org/Portals/42/AcademicNursing/CurriculumGuidelines/IPEC-Core-Competencies-2016.pdf?ver=2017-09-28-105242-247>.

[ii] Institute of Medicine. (2010). *The Future of Nursing: Leading Change, Advancing Health*. National Academies.

[iii] National Governors Association. (2012). *The role of nurse practitioners in meeting increasing demand for primary care*. Retrieved from <https://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/the-role-of-nurse-practitioners.html>

[iv] Heritage Foundation. (2010). *Not Enough Doctors? Too Many? Why States, Not Washington, Must Solve the Problem*. Retrieved from <http://www.heritage.org/health-care-reform/report/not-enough-doctors-too-many-why-states-not-washington-must-solve-the>

[v] Federal Trade Commission. (2014). *State Legislators Should Carefully Evaluate Proposals to Limit Advanced Practice Registered Nurses' Scope of Practice*. Retrieved from <https://www.ftc.gov/news-events/press-releases/2014/03/ftc-staff-paper-statelegislators-should-carefully-evaluate>.

