

Patient Protection and Affordable Care Act

**Joint Commission on Health Care
August 4, 2010**

Shirley Gibson, President
Virginia Nurses Association

Virginia Health Reform Initiative

- Opinions on Healthcare Reform
- Pause regarding Health Care Reform
- What would we want to see come from the Advisory Committee of the Virginia Health Reform Initiative



Opinions on Health Care Reform

- Health Care Reform is needed
- WHO ranked U.S. 37th out of 191 Nations
- *The Healing of America: A Global Quest for Better, Cheaper and Fairer Health Care* by T. R. Reid
- Commonwealth of Virginia Health Information Exchange (COV – HIE)



Pause - Regarding Health Care Reform

- **Could provide over 1 million Virginians coverage and enhanced access to health care**
 - Lack of infrastructure
 - Medically underserved
 - Lack of primary care and access
 - Nurses are key to the delivery of quality, safe care – looming nursing shortage
- **Health Care Reform is very complex**
- **Uncertainty about future provider reimbursement**



Virginia Nurses Association

The mission of VNA is to provide advocacy and education for Registered Nurses to advance professional practice and influence the delivery of quality care



State of Nursing in the Commonwealth

Current

- Nursing Shortage
- Nurse Staffing
- Nursing Capacity

Future

- Consideration of Care Delivery Models for the Future



Virginia's Nursing Shortage

- Virginia will be short 20,000 nurses by 2020 according to Health Reform Commission 2007
- Department of Health Professions Workforce Data Center 2009 projects 12,000 nurse shortage
- HRSA figures Virginia down from 40th to 45th per 100,000 capita from 2004 to 2008
- Demand will exceed supply



Safe Staffing

- Safe Staffing Advisory Council (SSAC)
- ANA Safe Staffing Saves Lives Campaign
- VNA's messaging is there is no one solution and ratios will not solve this
- 12/09 publication of joint white paper on staffing (VNA's SSAC, VONE, VHHA)



Good News – Progress on Education Capacity

- State Council of Higher Education Report 2004 recommendation
- Met the recommended increase of 900 over the last five years
- **[Bad news: 1 in 4 nursing faculty to retire in next five years]**
(Virginia Department of Health Professions Workforce Data Center)



Health Care Reform

Patient Protection and Affordable Care Act

- Primary Goals
 - Expand coverage to 32 million without healthcare
 - Reform the delivery system to improve quality
 - Lower the overall cost of providing healthcare



Health Care Reform

How will this help Nursing?

- Additional grants, scholarships and loan repayment to promote careers in nursing
- Establishes a federally-funded student loan repayment program
- Establishment of a national workforce commission
- **Creation of \$50 million grant program to support nurse-managed health clinics**
- **Expands geriatric career awards to APN**
- Grants to strengthen nurse education programs
- Allows APN – NP to be providers in home-based primary care teams
- Increases the payment rate for Certified Nurse Midwives to MD rate



Health Care Reform - Creation of New Care Delivery Models

Nurses will be key in creating new care delivery models

- Increasing the need for Registered Nurses and Advanced Practice Nurses
- Increasing the need for Chronic and Acute Care Coordinators
- Expanding roles in education and post discharge
- Bridging the continuum of care
- Expanding roles in wellness and prevention
- Targeting high users of health care



Health Care Reform - Creation of New Care Delivery Models

- Nurse Managed Clinics with Advanced Practice Nurses (APN)
- Advanced Practice Nurses – 2007 Health Reform Commission – recommendation: “Examine and Expand APN Roles”
- Legal Authority
 - Medical Practice Act – “Directed and supervised”
 - VA 1 in 12 States left
- Regulatory Board
 - Joint Board of Medicine and Nursing
 - VA 1 in 7 States left
- APN should practice within the full scope of their education and certification
- APN as providers in underserved rural areas



Martha Jefferson Hospital

CENTRA
Lynchburg General Hospital
Virginia Baptist Hospital

BON SECOURS ST. MARY'S HOSPITAL
Bon Secours Richmond Health System

INOVA FAIRFAX HOSPITAL

The Virginia Magnet Consortium

MAGNET RECOGNITION
AMERICAN NURSES CREDENTIALING CENTER

VNA
VIRGINIA NURSES ASSOCIATION

UNIVERSITY OF VIRGINIA HEALTH SYSTEM

Reston Hospital Center
HCA Virginia

CARLION CLINIC

ValleyHealth
Winchester Medical Center

Montgomery Regional Hospital
HCA Virginia Health System

VCU Health System

SENTARA
Norfolk General Hospital

INOVA LOUDOUN HOSPITAL

BON SECOURS MEMORIAL REGIONAL MEDICAL CENTER
Bon Secours Richmond Health System

INOVA FAIR OAKS HOSPITAL

Health Care Reform – Providers Current State

- Virginia is low-cost, high quality state
 - Lowest 10% of states in Medicare spending per beneficiary (Dartmouth Atlas)
 - Second highest quartile in quality of care (Commonwealth Fund)
 - Lowest quartile in insurance premium cost for the private, small group market and nearly lowest quartile in private, individual insurance market

Health Care Reform – Impact on Providers

- Increase newly insured with limited access
- Increase in utilization
- Increase volumes without capacity
- Impact on already overburden ERs
- Exacerbate workforce shortages
- Implementation cost of health information technology

Health Care Reform – Impact on Providers

- Uncertainty of reimbursement to fund cost of care
- Reduce DSH funding – Safety Net Hospitals
 - Medicare and Medicaid
- Shifts in Medicaid population negative effects
 - Clinical programs
 - Educational programs
- Require providers to stay ahead of delivery system reforms

Outcome of Advisory Committee Virginia Health Reform Initiative

- Evaluate and develop recommendations for improving access
- Evaluate and develop recommendations for implementing new ways to deliver better care at lower cost
- Understand and limit the impact on nursing and providers
- Make recommendations that will stay ahead of reform and access funding for Demonstration Projects