

March 3, 2022

William N. Parham, III, Director
Centers for Medicare and Medicaid Services (CMS)
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

RE: CMS–10793, OMB Control Number: 0938–New, Medicare Advantage and Prescription Drug Plan Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey

Dear Director Parham,

The American Association of Nurse Practitioners (AANP), representing more than 325,000 nurse practitioners (NPs) in the United States, appreciates the opportunity to comment on this notice and comment request with ways to enhance the quality, utility, and clarity of this information collection. The Medicare Advantage (MA) and Prescription Drug Plan (PDP) Consumer Assessment of Healthcare Providers and Systems (CAHPS) surveys are designed to collect and publicly report consumer satisfaction information regarding MA plans and PDPs. However, we are concerned that the survey instruments do not include nurse practitioners and indicate that patients see only doctors for their health care needs. **Accordingly, we request that CMS amend the surveys by changing the word “doctor” to “health care provider” throughout the instruments and clarifying that nurse practitioners are included in that definition.**

As you know, NPs are advanced practice registered nurses who are prepared at the masters or doctoral level to provide primary, acute, chronic and specialty care to patients of all ages and backgrounds. Daily practice includes assessment; ordering, performing, supervising and interpreting diagnostic and laboratory tests; making diagnoses; initiating and managing treatment including prescribing medication and non-pharmacologic treatments; coordinating care; counseling; and educating patients and their families and communities. NPs hold prescriptive authority in all 50 states and the District of Columbia (D.C.) and perform more than one billion patient visits annually.

NPs practice in nearly every health care setting including hospitals, clinics, Veterans Health Administration and Indian Health Services facilities, emergency rooms, urgent care sites, private physician or NP practices (both managed and owned by NPs), skilled nursing facilities (SNFs) and nursing facilities (NFs), schools, colleges and universities, retail clinics, public health departments, nurse managed clinics, homeless clinics, and home health care settings.

As of 2019, there were more than 163,000 NPs billing for Medicare services, making NPs the largest and fastest growing Medicare designated provider specialty.¹ Approximately 40% of Medicare patients receive billable services from a nurse practitioner² and approximately 80% of NPs are seeing Medicare and Medicaid patients.³ NPs have a particularly large impact on primary care as approximately 70% of all NP graduates deliver primary care.⁴ In fact, they comprise approximately one quarter of the primary care

¹ <https://www.cms.gov/files/document/2019cpsmdcrproviders6.pdf>

² <https://www.cms.gov/files/document/2019cpsmdcrphysupp6.pdf>

³ [NP Fact Sheet \(aanp.org\)](https://www.aanp.org)

⁴ <https://www.aanp.org/about/all-about-nps/np-fact-sheet>.

workforce, with that percentage growing annually.⁵ **It is important to note that the majority of NPs are certified in primary care and see Medicare and Medicaid patients.**

We appreciate that within the 2022 Medicare Advantage Plan Survey Field Test Version, certain questions reference “a doctor, nurse, or other health care provider.” However, while this does reference “nurses” there is no mention of advanced practice nurses, including nurse practitioners. Additionally, the instruments’ usage of this terminology is not consistent, which can lead to confusion and inaccuracies. For example, there is a section titled “Your Personal Doctor” which only asks respondents questions related to their “personal doctor”. In the “Your Personal Doctor” section, the questions are written in such a way that patients who regularly see NPs for their care would answer the questions inappropriately. **As mentioned above, approximately forty percent of Medicare beneficiaries received care from an NP in 2019, so this could lead to inaccurate results for a significant portion of respondents.**

There is also a section titled “Getting Health Care From Specialists” which provides a definition of “specialist” that only includes physicians. Regarding specialists, our survey results indicate that approximately 30% of NPs focus on a clinical practice area that would meet this description. However, they are entirely excluded from that section.

There are similar issues within the 2022 Prescription Drug Plan Survey Field Test Version. This instrument is not inclusive of NPs, or other health care providers, and only references “doctors” within the fields of inquiry. Questions 3, 4, 14, 15, and 19 all reference “your doctor” when referencing duties performed by, and interactions with, health care providers.

To improve the accuracy of these survey instruments, **we recommend CMS change the language to be provider neutral by replacing the word “doctor” with “health care provider”, and at the onset of the survey describe which providers (including NPs) are included in that definition.** This has been implemented in other surveys, including recently within the Medicare Beneficiary Experience of Care Survey (MBECS), which was changed to use the provider neutral term “healthcare providers”, which includes nurse practitioners. Other CAHPS surveys include nurse practitioners and those results have shown that patients report higher satisfaction with nurse practitioners than other provider types. We strongly encourage CMS to standardize the practice of including nurse practitioners in all survey instruments, including the Medicare Advantage and Prescription Drug Plan CAHPS.

We thank you for the opportunity to comment on these survey instruments. Should you have comments or questions, please direct them to MaryAnne Sapio, V.P. Federal Government Affairs, msapio@aanp.org, 703-740-2529.

Sincerely,



Jon Fanning, MS, CAE, CNED
Chief Executive Officer
American Association of Nurse Practitioners

⁵ [Rural and Nonrural Primary Care Physician Practices Increasingly Rely On Nurse Practitioners](#), Hilary Barnes, Michael R. Richards, Matthew D. McHugh, and Grant Martsof, *Health Affairs* 2018 37:6, 908-914.