

October 7, 2019

Mr. Vincent Alvarez
U.S. Department of Labor
200 Constitution Ave. NW, Room S-3201
Washington, DC 20210

Re: Peace Corps Volunteer Authorization for Examination and/or Treatment; OMB Number: 1240-0NEW

Dear Mr. Alvarez,

The American Association of Nurse Practitioners (AANP), representing more than 270,000 nurse practitioners (NPs) in the United States, appreciates the opportunity to provide comment on ways to enhance the quality, utility and clarity of the proposed new Peace Corps Volunteer Authorization for Examination and/or Treatment Form. As noted in the information collection, this form is being issued pursuant to the Sam Farr and Nick Castle Peace Corps Reform Act of 2018 (Farr-Castle) which had the intent of expanding medical benefits for Peace Corps volunteers. Authorizing nurse practitioners to complete this form to furnish the required medical benefits to Peace Corps volunteers is consistent with Farr-Castle and will fulfill the goal of increasing access to care for Peace Corps volunteers.

NPs are advanced practice registered nurses (APRNs) who are prepared at the masters or doctoral level to provide primary, acute, chronic and specialty care to patients of all ages and walks of life. 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 practice in nearly every health care setting including long-term care facilities, clinics, hospitals, Veterans Affairs and Indian Health Care facilities, emergency rooms, urgent care sites, private physician or NP practices (both managed and owned by NPs), schools, colleges, retail clinics, public health departments, nurse managed clinics, homeless clinics, and home health. NPs hold prescriptive authority in all 50 states and the District of Columbia. NPs complete more than one billion patient visits annually.

Nurse practitioners currently provide a substantial portion of the high-quality¹, cost-effective² health care that our communities require, and will continue to do so to meet the needs of their communities. As of 2017, there were more than 130,000 NPs billing for Medicare services, making NPs the largest and fastest growing Medicare designated provider specialty.³ In the commercial health care market, between 2012-2016 the number of office visits to primary care physicians declined by 18% while the number of office visits to NPs and PAs increased by 128%.⁴ NPs have a particularly large impact on primary care. Approximately 73% of all NP graduates deliver primary care⁵. NPs comprise approximately one quarter of

¹ <https://www.aanp.org/images/documents/publications/qualityofpractice.pdf>.

² <https://www.aanp.org/images/documents/publications/costeffectiveness.pdf>.

³ https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMSProgramStatistics/2017/Downloads/PROVIDERS/2017_CPS_MDCR_PROVIDERS_6.PDF

⁴ <https://www.healthcostinstitute.org/research/publications/hcci-research/entry/trends-in-primary-care-visits>.

⁵ <https://www.aanp.org/about/all-about-nps/np-fact-sheet>.

our primary care workforce, with that percentage growing annually.⁶ It is important that Peace Corps volunteers have access to nurse practitioners for the provision of their medical care in order to increase access and authorize Peace Corps volunteers to select their health care provider of choice.

Peace Corps Volunteer Authorization for Examination and/or Treatment Form

The focus of this information collection is the initiation of a new form that will authorize medical treatment for Peace Corps volunteers requiring medical treatment for injuries/exposure sustained in the performance of their volunteer service after their service is completed. The proposed form would require that a physician or medical facility certify the patient's disability, their need for ongoing medical care, and that the physician or medical facility is authorized to provide the volunteer with the necessary medical services. As currently written, this form would not authorize nurse practitioners to perform these functions, which we do not believe was the intent of Farr-Castle.

Under Farr-Castle, the Secretary of Labor shall authorize the Director of the Peace Corps to furnish medical benefits to a volunteer injured during the volunteer's period of service for up to 120 days following the termination of the service. To qualify for these benefits, the Director must certify that the volunteer's injury resulted from an injury sustained during their Peace Corps service. The Secretary is granted the authority to prescribe the form and content of the required certification.⁷ As noted in this information collection, the proposed form is issued pursuant to this authority. Farr-Castle did not require certifications of injuries and ongoing medical care to be provided only by physicians and medical centers. The Director of the Peace Corps has the statutory authority to authorize nurse practitioners to sign this form and furnish medical benefits under this statute to their patients.

As noted previously, nurse practitioners have the education and clinical preparation to certify the injuries of volunteers and provide them with ongoing medical care. Performing physical examinations, evaluating patients for injuries, and serving as primary care providers is well within the scope of practice for nurse practitioners. NPs have served as Federal Motor Carrier Safety Administration medical examiners, authorized to perform medical examinations for interstate truckers since 1992. More recently this was expanded to NPs in the Veteran's Administration. Nurse practitioners serve as primary care providers in the Veteran's Administration, the Medicare and Medicaid programs, and the Indian Health Service. The Social Security Administration also considers nurse practitioners to be acceptable medical sources for the purpose of establishing a medically determinable physical or mental impairment. This demonstrates that other federal agencies have long recognized that NPs are qualified to certify health status and provide ongoing care to patients. Authorizing NPs to certify injuries suffered by Peace Corps volunteers and provide them with ongoing medical care will increase access to high-quality health care for Peace Corps volunteers.

We thank you for the opportunity to comment on this proposed information collection. We look forward to working on these issues with you. Should you have comments or questions, please direct them to MaryAnne Sapio, V.P. Federal Government Affairs, msapio@aanp.org, 703-740-2529.

Sincerely,



David Hebert
Chief Executive Officer

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

⁷ 5 U.S.C. § 8142; Public Law No: 115-256.