

October 15, 2019

Nicole Timmons
U.S. Marshals Service
Department of Justice
CG-3, 10th Floor
Washington, DC 20530

Re: Extension with Change of a Previously Approved Collection USMS Medical Forms; OMB No. 1105-0099

Dear Ms. Timmons,

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 U.S. Marshals Service (USMS) Medical Forms. Authorizing nurse practitioners to complete these forms will increase access to care for U.S. Marshals and allow them to select their health care provider of choice and will align the forms with the current regulations on medical examinations for U.S. Marshals.

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 our primary care workforce, with that percentage

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>.

growing annually.⁶ It is important that U.S. Marshals have access to nurse practitioners for the completion of these medical forms in order to increase access to high-quality care.

USMS Medical Forms

USMS Medical Form USM-522A is utilized to report injuries that restrict U.S. Marshals from performing their duties; USM-600 is used to ensure that applicants and officers are physically fit to perform their duties. In addition CSO-012 is used to determine when a Court Security Officer is medically cleared to return to work. As currently written, these forms do not authorize nurse practitioners to complete the forms. This decreases access to care for U.S. Marshals.

As noted in the supporting statement for this information collection, these forms are issued pursuant to 5 CFR § 339 which defines the circumstances when medical documentation may be required, and examinations and evaluations are conducted to determine the nature of a medical condition that may affect safe and efficient performance. Authorizing nurse practitioners to complete these forms is consistent with the regulations in 5 CFR § 339.

5 CFR § 339.104 defines medical documentation as “a copy of a dated, written and signed statement, or a dated copy of actual medical office or hospital records, from a licensed physician or **other licensed health practitioner**, as these terms are defined below, that contains necessary and relevant information to enable the agency to make an employment decision.” (emphasis added) The definition of “practitioner” in 5 CFR § 339.104 includes nurse practitioners. 5 CFR § 339.303 which regulates medical examination procedures, states that employees have the right to submit medical information from their “private physician or **practitioner**.” (emphasis added) This would include the right to submit medical examination information from a nurse practitioner. Authorizing nurse practitioners to complete these forms is consistent with the regulatory definition of “medical documentation” and the rights of employees to select a nurse practitioner to submit the required medical information.

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. Nurse practitioners are authorized to complete similar forms for U.S. Air Marshals and 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 complete these forms will increase access to high-quality health care for U.S. Marshals and align the forms with current regulations.

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.