

2015 Legislative Highlights for NPs and CNSs

Oregon is a national leader in advanced nursing practice. In 2013, Oregon became the first state in the nation to require insurers to reimburse primary care and mental health nurse practitioners at the same rates as physicians when performing the same services and billing under the same codes. In 2015, ONA revisited our historic payment parity legislation to make important technical corrections, worked to expand advanced practice nurses' scope of practice and reduce burdens on providers.

NP Payment Parity Fix: Senate Bill 153

During implementation of Oregon's new Nurse Practitioner Payment Parity law, ONA learned some insurers were processing claims in a way that kept qualifying NPs from receiving their full reimbursement rate. Senate Bill 153 closed this loophole and ensures NPs receive the full reimbursement rate regardless of how insurers process their claims. **Passed**

Provider Incentives: House Bill 3396, House Bill 2171

Lawmakers examined state incentives for health care providers this session. House Bill 3396 extended the Rural Medical Tax Credit, Rural Malpractice Subsidy, Loan Repayment and Loan Forgiveness Programs to 2018. It also requires the Oregon Health Authority to study these programs' effectiveness and make recommendations to the Legislature.

The Rural Medical Tax Credit Program was also changed this session. Beginning in the 2016 tax year, rural providers 10-20 road miles from a city of 40,000 or more will receive a \$3,000 tax credit, rural providers 20-50 road miles from a city of 40,000 will receive a \$4,000 credit, and rural providers more than 50 road miles from a city of 40,000 will receive a \$5,000 credit. The new tiered system takes effect in 2016. Eligible providers will continue receiving \$5,000 for the 2015 tax year. **Passed**

"Grace Period" Reimbursements: Senate Bill 523

Under the Affordable Care Act, certain patients are given a 90-day "grace period" to pay premiums. Federal rules require insurers to reimburse providers for claims during the first 30 days of the grace period. Days 31-90 are not covered by insurance. Senate Bill 523 requires insurers to inform providers if a patient is in the grace period when the provider verifies coverage prior to a patient visit. This gives providers and patients a chance to explore alternate payment methods in advance. **Passed**

continued on page 2

Virtual Credit Cards: House Bill 3021

Despite fees that can lower providers' reimbursement by as much as five percent, insurers are increasingly relying on virtual credit cards (VCCs) to reimburse providers, often without providers' approval.

ONA worked with the Oregon Medical Association to successfully pass House Bill 3021, which allows providers to determine if they will accept VCCs and allows them to designate a staff person to deal with VCC companies. It also requires insurers to disclose any VCC fees. **Passed**

Seat Belt Exemptions: House Bill 2837

House Bill 2837 allows nurse practitioners and physicians assistants to sign seat belt exemption requests for patients who cannot wear a belt due to body size, physical or health conditions. Previously, only physicians were allowed to sign these exemptions. This new law increases continuity of care for patients and ends an arbitrary barrier to NP practice. **Passed**

Title Protection: Senate Bill 283

Multiple bills that protect health care practitioners' titles were signed into law this year, including Senate Bills 283. Senate Bill 283 prevents individuals who are not NPs, CNSs, or CRNAs, from using the title "Advanced Practice Registered Nurse" or the abbreviation "APRN" to describe themselves and their qualifications. **Passed**

Federal Legislation: Medicare Access and CHIP Reauthorization Act of 2015: H.R. 2

This spring, Congress passed the Medicare Access and CHIP Reauthorization Act of 2015. In addition to replacing Medicare's sustainable growth rate formula and extending the CHIP program; the bill allows nurse practitioners and clinical nurse specialists to document evaluations for Medicare patient's durable medical equipment orders. This provision took effect in April. **Passed**

Federal Legislation: Home Health Planning and Improvement Act of 2015: H.R. 1342

Oregon Congressman Greg Walden reintroduced a bill which would allow NPs, CNSs, and CNMs to sign home health plans of care and certify Medicare patients for home health benefits. If passed, the bill would eliminate current restrictions which require physicians to sign off on NPs', CNSs' and CNMs' home health orders. The bill has the support of Oregon's entire Congressional delegation and is awaiting a hearing in the House of Representatives.

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