

(Draft language for two-pager to insurance exchange policy makers)

Health care costs need to be curbed, quality needs to improve, and millions of Americans need access to basic health care services. Though there is disagreement about *how* health reform should happen, most Americans and policymakers agree that our healthcare delivery system needs significant reform. Each state faces challenges that are specific to unique populations and politics, but in all cases, advanced practice registered nurses (APRNs) can be part of the solution for increased access to high quality, cost effective care.

As the ACA becomes fully implemented between 2014 and 2019, the Congressional Budget Office projects 32 million previously uninsured people will gain insurance coverage.¹ The lesson learned in Massachusetts: without expansion of the primary care workforce, delays in access for all insured individuals will be exacerbated.^{2,3} A RAND study projects that substituting APRNs visits for physician visits will save Massachusetts \$4.2–\$8.4 billion (0.6–1.3 percent) for the period 2010–2020.⁴ Other states can also reap significant savings by incorporating APRNs as a cornerstone of their primary care workforce.⁵

APRNs offer innovative models of care that improve quality, increase access, while reducing healthcare costs.²⁻⁷ Each of the four roles of APRNs offers value for health plans to provide many of the essential health benefits.

Nurse Practitioners -

Certified Nurse-Midwives/Certified Midwives -

Certified Registered Nurse Anesthetists -

Clinical Nurse Specialists -

The IOM report, *The future of nursing, leading change, advancing health*, recommends that public and private insurers establish review standards that accredit APRNs for direct reimbursement of health services that are within their scope of training and education. Now is the most opportune time to achieve this goal and enhance the quality and access of health care services while reducing healthcare costs.⁸

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