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# The Future of Nursing and Primary Care

The National Conference of State Legislatures 2010  
Legislative Summit

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## Aging, Sicker Population

- 85 and older fastest growing segment\*
- 30% of Americans have 2 or more chronic conditions\*\*
- 85% of nation's health care dollars treat chronic conditions\*\*
- 5% of beneficiaries who die each year take up 30% of Medicare budget\*\*\*

\*The Aging Population in the Twenty-First Century: Statistics for Health Policy (1988) Commission on Behavioral and Social Science Education.

\*\*Anderson, Gerard. "Chronic Care: Making the Case for Ongoing Care" RWJF Chartbook, February 2010.

\*\*\*Lubitz J.D., Riley G.F. Trends in Medicare payments in the last year of life. N Engl J Med 1993;328:1092-1096.

# Flawed U.S. Health System



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Health  
disparities

High infant  
mortality  
(ranked 37<sup>th</sup>)\*

Lagging life  
expectancy  
(ranked 31<sup>st</sup>)\*

Medical  
errors

*\*World Health Statistics 2009. World Health Organization, 2009.  
Available at: [http://www.who.int/whosis/whostat/EN\\_WHS09\\_Full.pdf](http://www.who.int/whosis/whostat/EN_WHS09_Full.pdf)*



# Primary Care Shortage

Physicians choose higher-paying specialties over primary care

Rural and urban areas hit hard

28% of Medicare patients who tried to find new PCP had trouble\*



\*MedPAC 2008 June Report.

# Primary Care Shortage



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## Massachusetts Universal Health Care Experience:



60%

PCP accept new patients in 2009\*\*

70%

PCP accept new patients in 2007\*\*

42%

Patients able to see PCP within week in 2007\*

56%

Patients able to see PCP within week in 2006\*

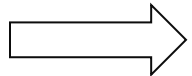
Massachusetts Medical Society, "Physician Workforce Study" 2007\* and 2009\*\*

# Patient Protection and Affordable Care Act (PPACA)

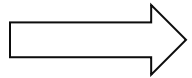


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**32 million people to receive health insurance coverage**



**Fear: Long waits**



**Fear: High costs**



**Solution: Nurses can help fill voids in primary care and chronic care management**

# 21<sup>st</sup> Century Health Care



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Prevention

Chronic  
Care  
Management

Care  
Coordination

End-of-Life  
Care



# Example: Ruth Lubic

## Family Health & Birth Center, Washington, D.C.

- ❖ Midwifery women-centered care
- ❖ Improved pregnancy outcomes for low-income women



Ruth Lubic, Photo: CBS News



# Example: Ruth Lubic



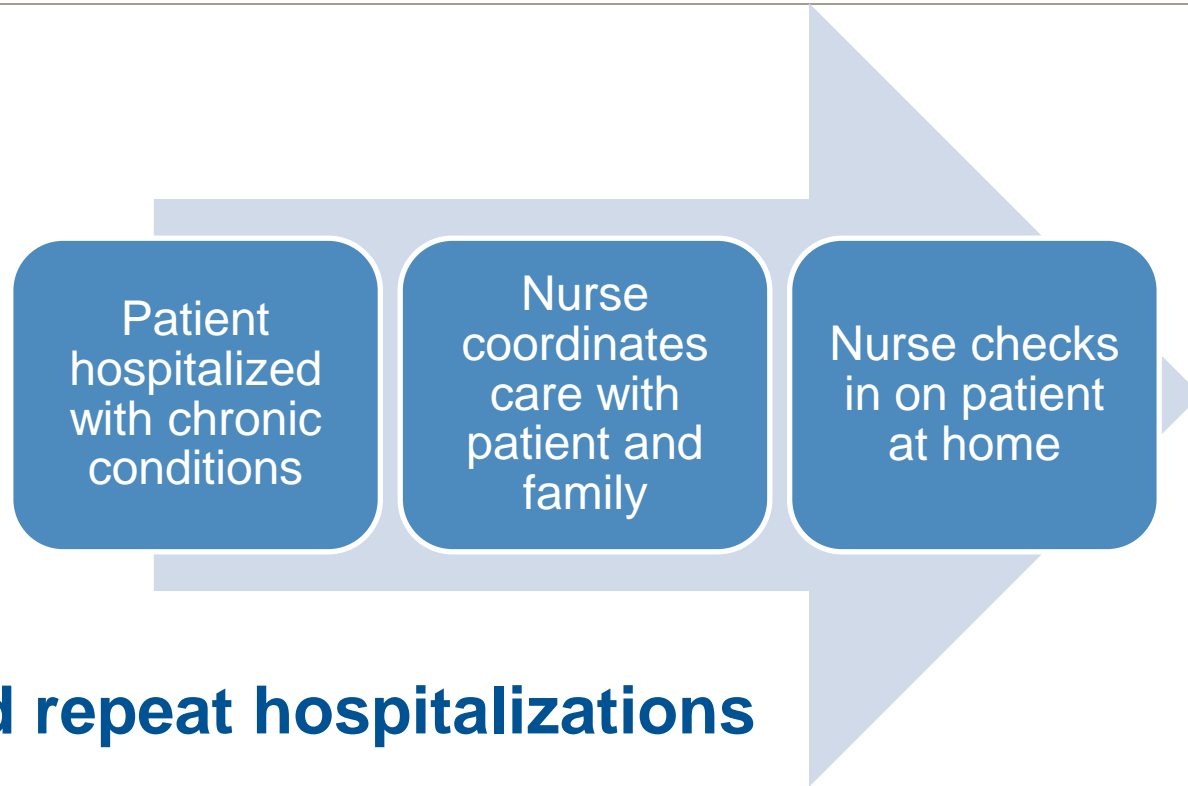
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Condition	Birth Center Outcomes	Washington, D.C. Outcomes
Pre-term Births	5%	15.6% (black births)
Low Birth-Weight Births	3%	14.5%
C-Section Deliveries	10%	31.5%
Breastfeeding	86% at discharge	N/A

# Example: Transitional Care Model



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## Goals:

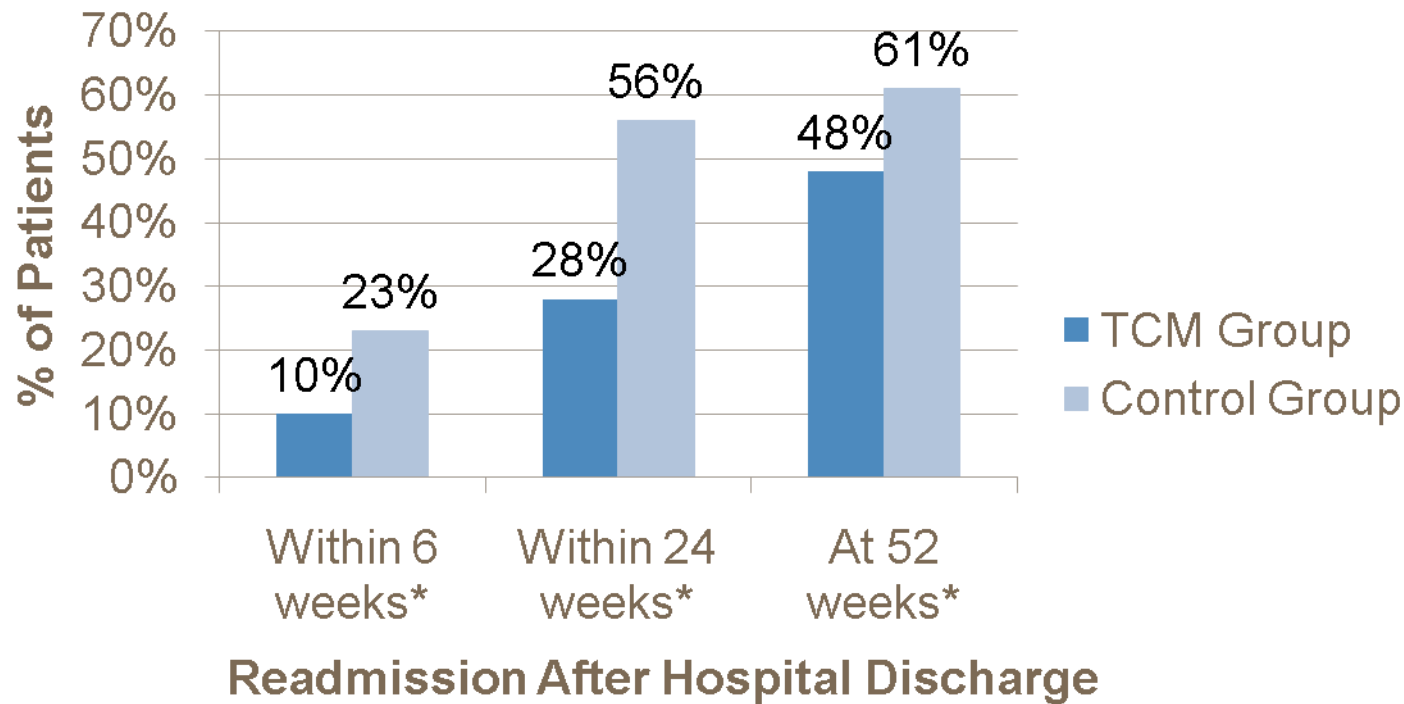
- ❖ **avoid repeat hospitalizations**
- ❖ **attain better health outcomes**

# TCM Improves Quality of Care\*



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## TCM's Impact on Hospital Readmission Rates



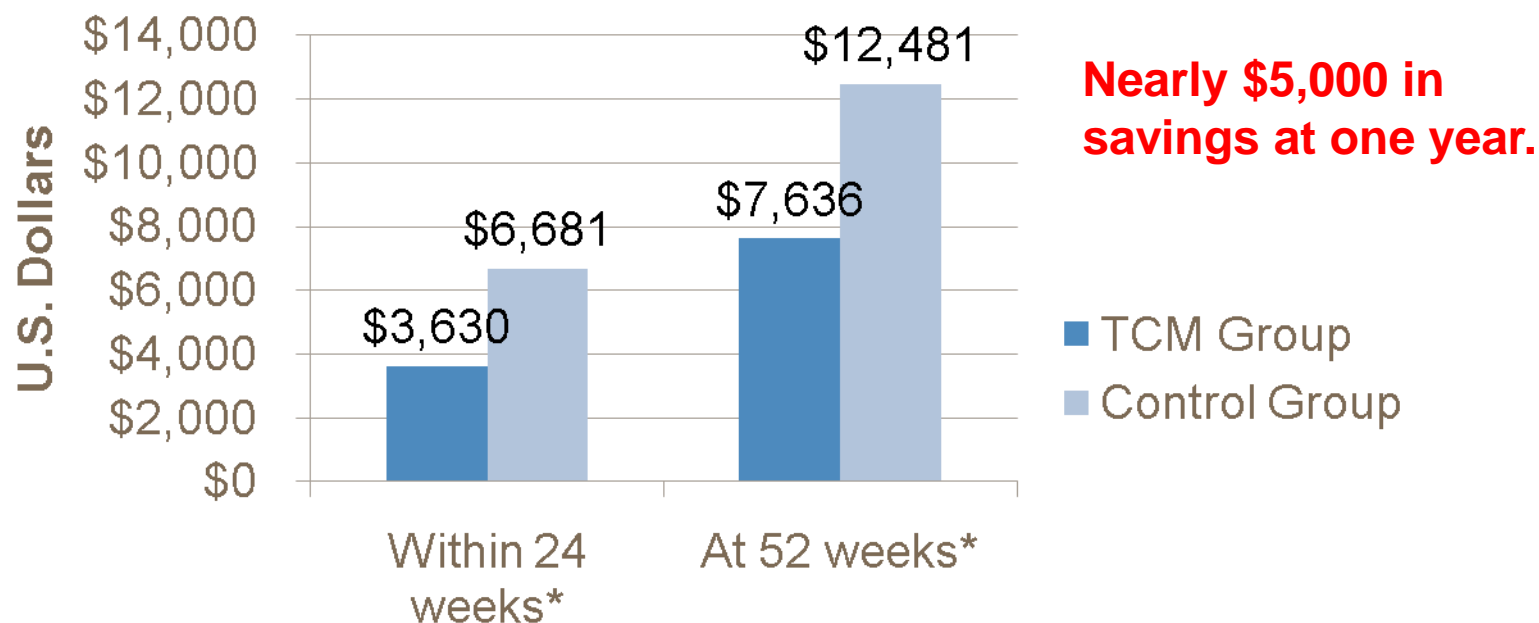
\*Source: Transitional Care Model Web site:  
<http://transitionalcare.info/ToolQual-1801.html>.

# Transitional Care Model Savings\*



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## Total Cost (Reimbursement) for Re-Hospitalizations



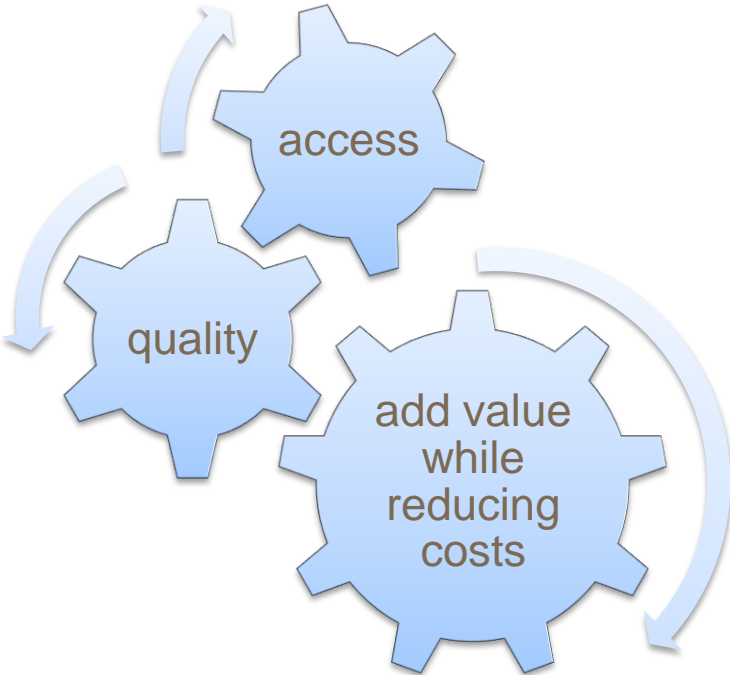
## Readmission After Hospital Discharge

\*Source: Transitional Care Model Web site:  
<http://transitionalcare.info/ToolQual-1801.html>.

# Nurses Are Solution



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# Challenges Facing Nursing



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1) Scope of Practice

2) Reimbursement

3) Educational Capacity

APRNs must be allowed to practice to full extent of their education and licensure

- Help provide cost-effective care
- Help address primary care shortage

# Scope of Practice



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Statutory and regulatory barriers prevent nurses from practicing to full extent of their licensure

23 states allow APRNs to practice independently

20 states require APRNs to practice in collaboration with physician

7 states mandate physician supervision



# Reimbursement



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Some managed care organizations don't credential nurse practitioners as PCPs

These nurses can't be reimbursed for care they're authorized to practice

# Reimbursement



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**Payment systems often don't recognize:**

Prevention

Care Coordination

Chronic Care  
Management

Nurses'  
contributions  
not  
reimbursed

# Reimbursement



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## One Solution: ACOs

- ❖ Links primary care with specialties and hospital in a community
- ❖ Providers held accountable for cost and quality of care
- ❖ Receive bonuses or penalties based on performance



# Educational Capacity

Nursing schools lack  
enough faculty



Can't teach and mentor next  
generation of nurses



Must recruit more nurses to  
get Ph.D.-level education  
required for teaching



## More nurses need advanced degrees

- Most nurses educated in community colleges
- Only 20% of community college grads get advanced degrees
- Can't fill 21<sup>st</sup> century faculty and primary care needs

# Educational Capacity: Solutions



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1. Increase graduate-level financial assistance

2. Raise faculty salaries

3. Create financial incentives for APRNs to pursue academic careers

# Initiative on the Future of Nursing

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**Showcases nurse contributions for a more effective and efficient health care system**

# IFN Goals



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Transform  
nursing field



Improve  
patient care

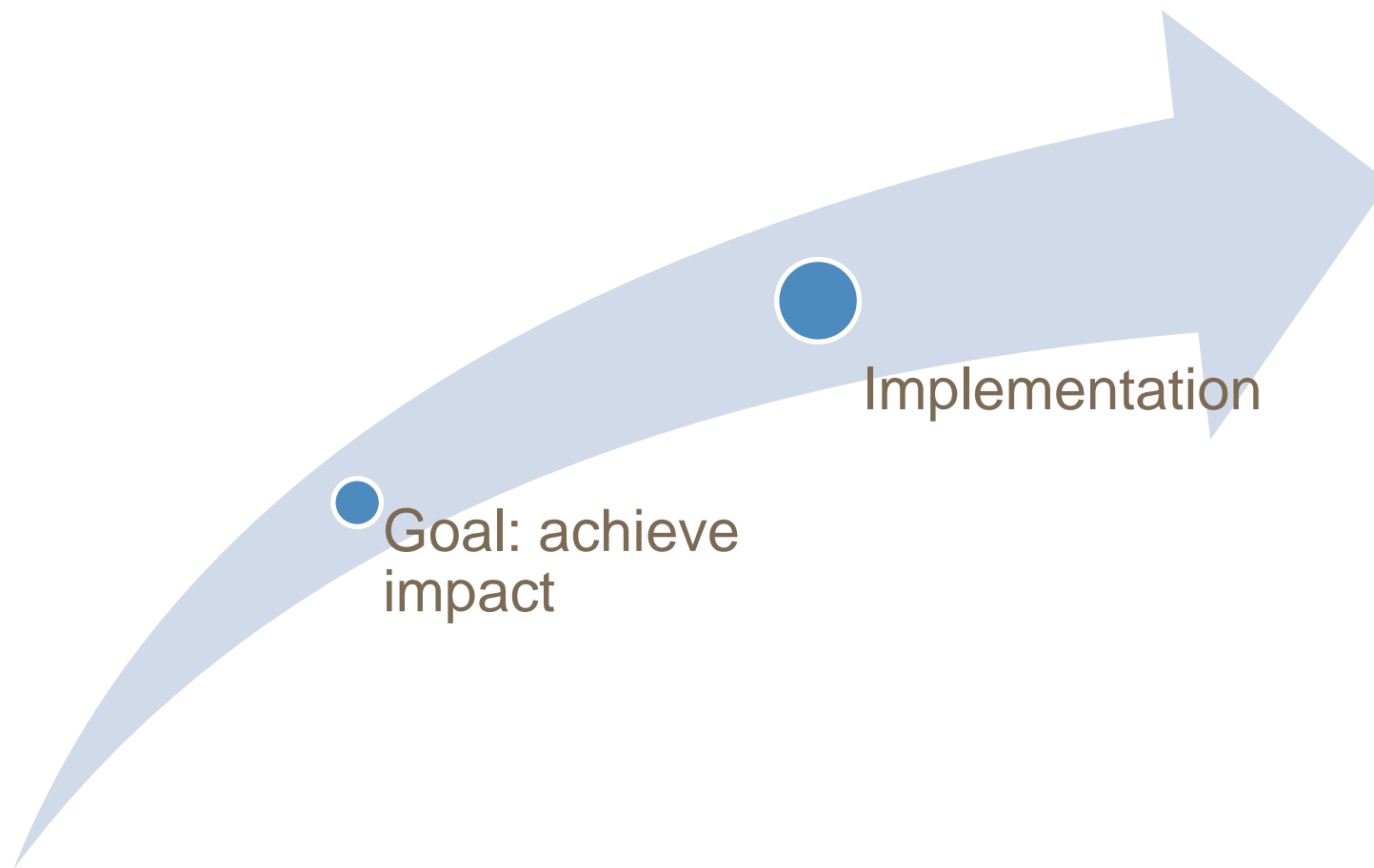




# Initiative on the Future of Nursing



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Goal: achieve  
impact

Implementation

# Initiative on the Future of Nursing

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- ❖ **Stellar leadership**
- ❖ **Diverse committee**
- ❖ **Open process**
- ❖ **Public engagement**



Commission Chair  
Donna Shalala

## Plan:

- prioritize recommendations
- determine gaps; add other recs
- engage strategic partners
- select national advisory commission
- launch AARP advocacy effort

# IFN Implementation



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## October 5

- Press conference to unveil recommendations
- National Press Club

## Nov. 30-Dec. 1

- Implementation Launch Conference
- Invitation only
- Action-oriented event
- Diverse partners, VIPs
- Breakout groups to foster engagement/develop strategy

# IFN Implementation Launch Conference



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## High-Level Leaders to Attend Launch



RWJF President  
Risa Lavizzo-Mourey



IOM President  
Harvey Fineberg



IFN Chair  
Donna Shalala

We'll devote at least two  
years to implementation

# IFN Resources



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❖ Visit us on the Web at:

[www.thefutureofnursing.org](http://www.thefutureofnursing.org)

❖ Follow us on twitter at:

[www.twitter.com/futureofnursing](http://www.twitter.com/futureofnursing)

❖ Leave a comment on the Initiative blog at:

[www.blog.thefutureofnursing.org](http://www.blog.thefutureofnursing.org)

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