

October 4, 2010

To: NQF Steering Committee

Re: Resource Use Measurement White Paper: Commenting Draft

Please note that my comments are associated with the National Association of Clinical Nurse Specialists.

I would like to identify two areas of concern in the document:

- 1) It does not identify nurses or advanced practice nurses as providers of health care warranting inclusion in the measures.
- 2) It suggests that resource use differences be equalized across providers.

1) *Lack of Acknowledgement of Nursing's Contributions to Health Care*

For example on page 16 the main types of resource use measures are identified as follows: per capita, per patient, per episode, per admission, and per procedure measures of resource use. Adapting their typology to resource use measures, they also identify four types of entities that encompass the perspectives of those that are evaluating and those that are being evaluated: a) healthcare providers, including physicians and accountable care organizations; b) intermediaries, including health plans and employers; c) consumers or patients; and d) society and policy makers.

On page 17 providers are defined "hospital, physicians, nursing homes, ambulatory surgical centers, urgent care, ACO's ...?". Because a question mark is included, it appears there is room for other providers to be added to the list.

Response: Nurses, advanced practice nurses, and specifically, advanced practice nurse roles (CNS, NP, CRNA, CNW) should be identified in this document.

2) *Equalizing Differences across Providers*

On page 30 the document suggests that resource use should be equalized across providers. "Thus, for comparative measurement purposes, applying a risk-adjustment method to a provider's or other entity's (e.g., health plan's) estimated resource use is meant to equalize or account for any differences in the composition of their panel or enrollees that would affect their resource use amounts." Advanced practice nurses' high quality services are more economical than other provider groups such as physicians. Therefore, equalizing resource use across providers disadvantages advanced practice nurses.

Response: We not support equalizing differences across providers.

Respectively submitted,

Ann M. Mayo, RN; DNSc  
Member, National Association of Clinical Nurse Specialists