



Support Reimbursement Parity for ARNPs (HB 1433 and SB 5647)

Background

Current law allows health plans to pay different, lower, rates to Advanced Registered Nurse Practitioners (ARNPs) than to medical physicians for the same service. As a result, in 2012, Premera Blue Cross announced a 15% reduction in reimbursement to ARNPs in primary care beginning March 1, 2013. In 2015, Regence also announced it would lower its reimbursement to ARNPs from 95% to 85% of the physician fee schedule.

Access to Care Challenge

These reductions compound already existing disparities in reimbursement between physicians and ARNPs. They have the potential to decrease access to care for residents of Washington if private practices and clinics are unable to remain financially viable.

There are more than 9000 ARNPs licensed in Washington State with full practice and prescriptive authority who provide primary and specialty care. These reductions in reimbursement primarily affect practices owned by ARNPs and have the potential to affect access to primary care services in multiple ways. A 2018 survey to Washington ARNPs with Washington showed:

- **In the last 5 years, of 6.6% of respondents had closed a practice or stopped working as a contractor.** The top two reasons prior practice owners and independent contractors closed their practice were reduced reimbursement (29%) and inability to compete with large health systems (20 %).

Legislative Solution

WANA supports legislation that requires health plans to reimburse ARNPs the same rate as medical physicians **when the same service is provided**. The law specifies that reimbursement to medical physicians or other health care professionals should not be reduced to comply with the law.

Payment equal to that of a medical physician for a service provided by an ARNP is an access to care issue. Please support reimbursement parity for ARNPs.