MANAGED CARE AFFECTING NURSE PRACTITIONERS IN MISSISSIPPI

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MOLINA

• Some billing delays, and of all Medicaid programs, most likely to have denials for no significant reason.

• Molina periodically sends out letters to patients saying their NP provider is not longer in network when that is not the case. Their reason “mistake on their part”.

• However, they do not send out the same letters saying they had made a mistake. They have not provided a list of patients these letters were sent in error to, so the clinic and be proactive.

• This has happened annually for the last 2 years.
REIMBURSEMENT CONCERNS

- Nurse Practitioners receive 85%
- Limits access:
  - NPs have 13% higher odd of working in Primary Care in states with Full Practice Authority
  - Odds increase to 20% if the state also reimbursed NPs at 100% Medicaid
  - Practices with NPs have 23% greater odds of accepting Medicaid than those without
REIMBURSEMENT

- NP practices must hire only licensed staff, while MDs can hire certified
  - Making NP cost greater to provide care to Medicaid patients
  - NPs pay large collaborative fees making cost of providing care to patients greater
  - Limited reimbursement makes NPs less likely to accept Medicaid
NURSE PRACTITIONER VALUE

• Nurse Practitioners practice in rural areas where there are limitations to care.

• *Nurse Practitioners care compared to MD*
  • NPs have higher patient satisfaction
  • Fewer unnecessary hospital readmissions
  • Fewer potentially preventable hospitalizations
  • Fewer unnecessary ER visits

• www.aanp.org>advicact-resource>position-statement
RESEARCH PROVES NURSE PRACTITIONER VALUE

• Meta analysis of 38 studies show Nurse Practitioners are equally as competent as MDs at:
  • interpreting x-rays
  • More competent in phone follow up with patient
  • Equally competent in physical exams
  • Equally competent in issuing appropriate referral

(AANP discussion paper: quality of Nurse Practitioner Practice)
The requirement if DME to have a physician signature limits patient access to needed medical equipment.

Nurse practitioners can order controlled substances but must have a physician signature to order diapers.

Needed treatments such as nebulizers and O2, and critical supplies such as diabetic supplies and walkers, cause unnecessary delays in obtaining for patient, increasing risk to patient for hospital admission, falls and care delays.

There is the option of adding to the protocols and this is very helpful. However, not all collaborators will agree to this.