

November 15, 2013

Marilyn B. Tavenner  
Administrator  
Centers for Medicare and Medicaid Services  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building, Room 445-G  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Ms. Tavenner:

On behalf of the more than 94,000 clinically practicing physician assistants (PAs) represented by the American Academy of Physician Assistants (AAPA) and the 171,000 nurse practitioners (NPs) represented by the American Association of Nurse Practitioners (AANP), we are writing to urge CMS to add an FAQ to its Open Payments website, identifying AAPA and AANP as accreditors of continuing medical education (CME) and continuing education (CE) that are exempt from reporting through the Sunshine Act.

As the nation's healthcare delivery system becomes increasingly reliant on the quality medical care provided by NPs and PAs, we believe that every effort must be made to ensure that quality learning opportunities are made available to NPs, PAs, and other members of the patient-centered medical team. Unfortunately, current CMS guidance, which only exempts five CME accrediting bodies that are specific to physicians and dentists, is far too narrow and is already creating unintended negative consequences in the provision of CME/CE for NPs and PAs, healthcare professionals who were never intended to be covered by the Sunshine Act. Additionally, we would assert that both AAPA and AANP, as accreditors of CME/CE, adhere to rigorous standards of independence from commercial influence that meet and in some cases exceed the Accreditation Council for Continuing Medical Education (ACCME) Standards of Commercial Support.

We are both experiencing declines in grants as a result of the CMS FAQ that does not appropriately list us among the excluded accrediting organizations, and expect this to continue. The Sunshine Act is causing a shift in funding away from non-physician CME/CE towards physician CME due to the "safe harbor" created only for physician CME organizations. The omission of AAPA and AANP as exempted accreditors means participation by physicians as speakers or attendees will be subject to a reporting system that will not exist for CME offered by organizations representing physicians. Additionally, we are deeply concerned about the likely long term impact of undermining inter-professional education, an essential element to value based healthcare, as physicians will be less likely to participate in our inter-professional CME/CE activities where they are subject to reporting requirements.

Additionally, the current CMS guidance paradoxically poses a threat to AAPA and AANP CME/CE independence from commercial influence. A cornerstone of independence is that commercial interests should not receive the names of faculty or participants where commercial interests have many opportunities to exercise marketing campaigns targeting participants and faculty of our independent programs. We are concerned about this potential intrusion of commercialism and its impact on patient safety. CMS requirements for AAPA and AANP to report faculty and participants of independent CME/CE to industry create a conflict of interest with our obligation to patients of ensuring independence from commercialism.

On behalf of our members and the patients we ultimately serve, AAPA and AANP urgently requests CMS work with us to develop a FAQ providing clarification that CME/CE accreditors, like AAPA and AANP, who have formally adopted the ACCME Standards for Commercial Support, also be recognized as exempted accreditors.

We look forward to hearing from you and to working with CMS on this critically important issue.

Sincerely,



Jennifer L. Dorn  
Chief Executive Officer  
American Academy of Physician Assistants



David Hebert  
Chief Executive Officer  
American Association of Nurse Practitioners