

## CMS Response to Public Comments Received for CMS-10467

The Centers for Medicare & Medicaid Services (CMS) received comments from two coalitions of nurse organizations related to CMS-10467. This is the reconciliation of the comments.

### **Comment:**

The Centers for Medicare & Medicaid Services (CMS) received comments from the two coalitions of nurse organizations that the information collected in CMS-10467 use methods such as “small discussions, focus groups, and telephone interviews, that representatives from both the hospital and community-based care settings, as well as from *all* schools of nursing involved in the demonstration, be targeted”.

### **Response:**

**CMS appreciates the suggestion and concern expressed by the commenters. Currently, representatives from the hospital and their respective partners are targeted. However not all schools of nursing are targeted based on resource allocation. CMS shall take under advisement to target all schools of nursing.**

### **Comment:**

The Centers for Medicare & Medicaid Services (CMS) received comments from the two coalitions of nurse organizations questioning “who should be included as stakeholders, the number of stakeholder interviews that will be conducted, and the qualifications of the interviewers”.

### **Response:**

**CMS appreciates the concern expressed by the commenters. Stakeholders include students, clinical faculty, clinical preceptors, chief nurse officers, community-based care settings staff, and administrators for the hospitals and schools of nursing. A maximum of four rounds of interviews will be conducted during the demonstration period, targeting most of the stakeholders. The stakeholder interviewers are very competent in qualitative design and analysis and possess an average of 20 years’ experience. The lead interviewers possess at a minimum a doctoral degree (i.e. a DNP or PhD), and are active professional Registered Nurses (RN). Competencies of the lead interviewers include but not limited to Advance Practice Registered Nurse (APRN) board certification; Clinical Nurse Specialist (CNS) board certification; and clinical and faculty educators for doctoral and master level nursing programs.**

**Comment:**

The Centers for Medicare & Medicaid Services (CMS) received comments from the one of the coalitions of nurse organizations suggesting that “identifying limitations in the design or requirements of the demonstration may make it difficult to achieve the objectives established by Congress and options for strengthening graduate nursing education programs”.

**Response:**

**CMS agrees and will be reporting the limitations and offering alternatives for strengthening the graduate nurse education program.**

**Comment:**

The Centers for Medicare & Medicaid Services (CMS) received comments from one of the coalitions of nurse organizations that “expenses and burdens of data collection are to be fairly accounted for in payments to program participants”.

**Response:**

**CMS appreciates the suggestion and concern expressed by this commenter however per the legislative mandate, payments to participants is based on the total reasonable costs for clinical training only recognized for the incremental increases in APRN student enrollees. CMS agrees and recognizes that data collection may be considered burdensome for some of the participants and is working with sites to minimize burden. However a majority of the participants are collecting most of the data for their internal purposes. Also the program participants have agreed to provide requested data to assess the impact of the demonstration per the demonstration terms and conditions for participation.**

**Comment:**

The Centers for Medicare & Medicaid Services (CMS) received comments from the one of the coalitions of nurse organizations pointing out that data collected by other nurse practitioner and APRN organizations are to be used.

**Response:**

**CMS appreciates the suggestion expressed by this commenter. Nurse organizations were initially targeted based primarily on the breadth of information available for all four specialties that are legislatively mandated; and secondly the amount of resource allocation available. CMS shall take under advisement the recommendation to use data from other APRN organizations.**