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February 26, 2015

Ethan Kalett  
Director, Regulation Policy and Management  
Department of Veterans Affairs  
810 Vermont Avenue NW, Room 1068  
Washington, DC 20420

Submitted electronically to <http://www.regulations.gov>

Re: Expanded Access to Non-VA Care Through the Veterans Choice Program [RIN 2900-AP24]

Dear Mr. Kalett:

On behalf of the American Nurses Association (ANA), we are pleased to comment on the Department of Veterans Affairs' (VA) proposed rule, *Expanded Access to Non-VA Care Through the Veterans Choice Program*, published in the Federal Register on November 5, 2014. As the only full-service professional organization representing the interests of the nation's 3.1 million registered nurses (RNs), ANA is privileged to speak on behalf of its state and constituent member associations, organizational affiliates, and individual members. ANA members also include the four advanced practice registered nurse roles: nurse practitioners, clinical nurse specialists, certified nurse-midwives and certified registered nurse anesthetists.<sup>1</sup>

ANA applauds VA's consistent use of provider neutral terms (such as "non-VA provider," "provider" and "health care provider") when referencing and describing the clinicians authorized to provide care to VA patients. ANA supports VA's statement, in the *Supplementary Information*, that VA interpreted the Conference Report's reference to a "referring physician" as meaning "VA health care provider." The consistent use of provider neutral language is essential to accurately describe the range of health care providers who provide care and services to veterans.

We appreciate the opportunity to share our views on this matter. If you have questions, please contact Andrea Brassard ([andrea.brassard@ana.org](mailto:andrea.brassard@ana.org) or 301-628-5043).

Sincerely,

Debbie D. Hatmaker, PhD, RN, FAAN  
Executive Director

cc: Pamela Cipriano, PhD, RN, NEA-BC, FAAN, ANA President  
Marla Weston, PhD, RN, FAAN, ANA Chief Executive Officer

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<sup>1</sup> The Consensus Model for APRN Regulation defines four APRN roles: certified registered nurse anesthetist; certified nurse-midwife; clinical nurse specialist; certified nurse practitioner. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.