

4. CAPITALIZING ON NURSES' POTENTIAL

4.1 By 2022, all changes to institutional policies and state and federal laws adopted in response to the COVID-19 pandemic that expand scope of practice, telehealth eligibility, insurance coverage, and payment parity for services provided by APRNs and RNs should be made permanent.

1. Key Strategic Stakeholders

Health Care Organizations

Major Payers; Health Care Systems

Federal Government

All Government Entities making relevant policies

State, Local Government

Legislative Councils

Education

Research Partners/Evaluators

Other

Consumer Groups

2. Top 3-5 Actions for 2021

- A. Begin with a “yellow light” strategy-- we just aren’t sure that all of the changes described had a positive impact.
- B. Careful evaluation of the changes and their impact in order to assess priorities. At the same time, some of these emergency changes may be essential to preserve to protect patient well-being/safety.
- C. Advocate for study of these new rules will challenge the idea that we should just “snap back” to normal.
- D. Research strategy must above all be grounded in health equity. It must be clear from the start that we are attempting to use this new data to understand what is best for patients.
- E. Explore unintended consequences of these policy changes, even ones that might make nurses look bad.
- F. Take a first look at a political strategy so that we will be ready to take action once we know more -- who made what decisions and how?

3. Top 3-5 Actions for 2022

- A. Explore the results of the “yellow light” research process.
- B. Build an appropriate political for each entity, which may mean using soft power and indirect means to accomplish our goals. This may not be a loud public campaign.
- C. There was discussion in our group about whether advocating for making these rules permanent would reinforce a fee-for-service model that we want to move away from. So whatever our strategy, it needs to be reconciled with a long-term vision for public health.
- D. Leave behind the old version of this conflict that pits physicians vs. nurses.
- E. Rethink many aspects of our system in the name of health equity. Even if we don’t get everything we want, it should be clear that we are thinking about these problems differently.

4. Success Indicators

- Health equity, not the short-term interests of the nursing profession, is the win.
- Changing the discourse around these issues is an independent measure of success.
- Other stakeholders, from physicians to legislators, understand that this is a new style of nurse advocacy primarily focused on health equity in the aftermath of the pandemic.