

Response to The New York Times.

On behalf of the American Academy of Nurse Practitioners (AANP), we read with interest the June 23 article "A Personal, Coordinated Approach to Care" by Jane E. Brody. The article notes that the medical-home "is an approach in which each person has a primary care doctor who heads a team of professionals - perhaps including a physician assistant, a nurse practitioner, a dietitian, a social worker and a pharmacist - to provide round-the-clock access to care." We respectfully wish to correct the impression that the team must be headed by a primary care physician. Medical home practices may also be led by other primary care providers such as nurse practitioners (NPs).

NPs are licensed independent practitioners who practice in ambulatory, acute and long-term care settings as primary care providers. They practice autonomously and in collaboration with other health care providers. Increased utilization of these primary care professionals would lead to more access, improved outcomes and overall lower health care costs. It is in the best interest of consumers that they receive all the facts available about health care professionals so that they can make intelligent and informed decisions when selecting the provider of their care.

The article also points out that "another virtue of the medical home is an emphasis on the whole patient and the patient's environment, rather than a specific disease or body part." It may be of interest to note that this type of patient-centered care is the model of care that NPs have provided since the inception of the NP role. NPs focus on health promotion, disease prevention, and health education and counseling, guiding patients to make smarter health and lifestyle choices, which ultimately can lead to reduced health care costs.

NPs are well established as high quality primary care providers. There are over 125,000 of these clinicians practicing in the United States, the majority of whom are practicing in primary care. Approximately 6000 NPs graduate from their educational programs each year. With proper funding this number could be increased substantially to assist in meeting the primary care needs of the public. Better awareness of the value of NPs and increased access to their valuable services will go a long way in solving the primary care provider shortage.

AANP, the oldest and largest national professional membership organization for NPs of all specialties, was created in 1985 to provide NPs with a unified way to network and to advocate for NP issues across all specialties at the local, state, and national levels. Since its inception, AANP has continually served as a major resource for NPs, their patients and other healthcare consumers, to promote excellence in practice, education and research; to provide legislative leadership to advance health policy; to establish healthcare standards and to advocate for access to high-quality, cost-effective and personalized healthcare.

We appreciate having the opportunity to respond to your article and hope that you will assist in disseminating this information to the public as well. AANP has extensive and comprehensive research data regarding NPs and their practice and we would welcome the opportunity to work with you as a resource in the future.

Sincerely,

Dee Swanson, MSN, NP-C, FAANP, President, AANP Board of Directors
Tim Knettler, MBA, AANP Chief Executive Officer
Jan Towers, PhD, NP-C, CRNP, FAANP, FAAN, AANP Health Policy Director