



## The Role of Advanced Practice Registered Nurses and Physician Assistants in HIV Care Policy Statement

Approved: March 2014

---

The availability of effective treatment has transformed HIV disease into a chronic condition requiring a complex hybrid of HIV specialty, primary care and preventive medicine best delivered by a multi-disciplinary care team.<sup>i</sup> Advanced Practice Registered Nurses (APRNs)<sup>1</sup> and Physician Assistants (PAs) play a critical role in maximizing the effectiveness of the care team and in providing quality, cost effective HIV care in the U.S.<sup>ii</sup> Studies indicate that patients with HIV cared for by APRNs and PAs in multi-disciplinary care settings have comparable outcomes to patients managed by physicians.<sup>iii,iv</sup>

Expanded access to health insurance coverage through the Affordable Care Act (ACA) will increase demand for HIV primary care at a time when the number of physicians entering HIV medicine is decreasing. Nearly 50% of patients with HIV have Medicaid coverage; a percentage that will grow with the ACA's Medicaid expansion.<sup>v,2</sup> HIV workforce shortages and inadequate third-party payer reimbursement demand innovative and team-based approaches to supporting the comprehensive, coordinated care required by many patients to successfully manage and treat HIV infection.<sup>vi</sup>

The practice landscape for APRNs and PAs is rapidly evolving with many states passing laws that expand their scope of practice to reflect their education and training and to meet the increased demand for primary care. Many of the states with the most restrictive practice rules for APRNs and PAs also have higher HIV workforce shortages creating barriers to expert care that likely contribute to HIV health disparities.<sup>vii,viii</sup>

### **HIV Medicine Association Position:**

Finite health care resources are most effectively utilized when all medical providers are able to practice to the full extent of their training.<sup>ix</sup> **HIVMA supports:**

1. APRNs and PAs practicing to the full extent of their training and expertise in consultation with the appropriate medical support as needed. APRNs and PAs, like all medical providers, are responsible for recognizing the limits of their training and identifying when it is appropriate to refer patients or consult with a medical provider with more advanced or specialized training.
2. APRNs having the authority to prescribe and practice without a collaborative practice agreement with a physician. We recommend all APRNs caring for patients with HIV infection have established consultative relationships with expert HIV physicians as part of their patients' care team.
3. PAs having the authority to provide medical services delegated by a supervising physician and within their level of expertise.

---

<sup>1</sup> APRN refers to certified registered nurse anesthetists, certified nurse-midwives, clinical nurse specialists and certified nurse practitioners.

<sup>2</sup> HIVMA strongly supports the Medicaid expansion and urges every state to implement it.

4. PAs having the authority to prescribe under the supervision of a physician.

- 
- <sup>i</sup> Gallant, JE, Adimora, AA, et al. "Essential Components of Effective HIV Care: A Policy Paper of the HIV Medicine Association of the Infectious Diseases Society of America and the Ryan White Medical Providers Coalition." *Clinical Infectious Diseases*. 2011;53(11): 1043-1050. <http://cid.oxfordjournals.org/content/early/2011/10/20/cid.cir689.full>
- <sup>ii</sup> Institute of Medicine. Committee on HIV Screening and Access to Care. Health Care System Capacity for Increased HIV Testing and Provision of Care. 2011.
- <sup>iii</sup> Wilson, IB, Landon, BE, et al. "Quality of HIV care provided by nurse practitioners, physician assistants, and physicians." *Ann Intern Med* 2005;143(10): 729-736.
- <sup>iv</sup> HIV Medicine Association. "Identifying Providers Qualified to Manage the Longitudinal Treatment of Patients with HIV Infection and Resources to Support Quality HIV Care." 2010. [http://www.hivma.org/uploadedFiles/HIVMA/Guidelines\\_Patient\\_Care/HIVMA\\_Standards\\_Practice\\_Guidelines/HIV\\_Guidelines/Guidelines\\_Content/Revised%20Qualified%20HIV%20Provider%20Policy%20Statement%20Approved%203%2016%2013.pdf](http://www.hivma.org/uploadedFiles/HIVMA/Guidelines_Patient_Care/HIVMA_Standards_Practice_Guidelines/HIV_Guidelines/Guidelines_Content/Revised%20Qualified%20HIV%20Provider%20Policy%20Statement%20Approved%203%2016%2013.pdf) Accessed November 2013.
- <sup>v</sup> Kates J, Garfield, R, et al. "Assessing The Impact of The Affordable Care Act on Health Insurance Coverage of People with HIV." Washington, DC: Kaiser Family Foundation. 2014. <http://kaiserfamilyfoundation.files.wordpress.com/2013/12/8535-assessing-the-impact-of-the-affordable-care-act-on-health-insurance-coverage.pdf> Accessed January 2014.
- <sup>vi</sup> Moore, RD, Keruly, JC, et al. "Improvement in the Health of HIV-Infected Persons in Care: Reducing Disparities." *Clinical Infectious Diseases*. 2012 Nov;55(9):1242-51.
- <sup>vii</sup> Kuo Y-F, Loresto FL Jr., Rounds LR, Goodwin JS. "States with the least restrictive regulations experienced the largest increase in patients seen by nurse practitioners." *Health Aff (Millwood)*. 2013;32(7).
- <sup>viii</sup> American Academy of Physician Assistants. "The Six Key Elements of a Modern Physician Assistant Practice Act." February 2014. [http://www.aapa.org/uploadedFiles/content/The\\_PA\\_Profession/Federal\\_and\\_State\\_Affairs/Resource\\_Items/6\\_KE\\_chart\\_2-14.pdf](http://www.aapa.org/uploadedFiles/content/The_PA_Profession/Federal_and_State_Affairs/Resource_Items/6_KE_chart_2-14.pdf) Accessed February 2014.
- <sup>ix</sup> Institute of Medicine. "The Future of Nursing Leading Change, Advancing Health." *National Academies Press*. 2010. <http://www.iom.edu/Reports/2010/The-future-of-nursing-leading-change-advancing-health.aspx> Accessed October 2013.

Additional Select References:

1. American Association of Nurse Practitioners. "2013 Nurse Practitioner State Practice Environment." 2013. <http://www.aanp.org/images/documents/state-leg-reg/stateregulatorymap.pdf> Accessed October 2013.
2. Baligh, R, Yehia, MD, et al. "Structures of Care in the Clinics of the HIV Research Network." *AIDS Patient Care and STDs*. 2008;22(12):1007-13.
3. Gallant, JE. "What does the generalist need to know about HIV infection?" *Adv Chronic Kidney Dis* 2010;17(1): 5-18.
4. Horberg, MA, Hurley, LB, et al. "Determination of Optimized Multidisciplinary Care Team for Maximal Antiretroviral Therapy Adherence." *Journal of Acquired Immune Deficiency Syndrome*. 2012;60:183-90.
5. Kaiser Commission on Medicaid and the Uninsured. "Improving Access to Adult Primary Care in Medicaid: Exploring the Potential Role of Nurse Practitioners and Physician Assistants." Washington, DC: Kaiser Family Foundation. 2011. <http://kff.org/medicaid/issue-brief/improving-access-to-adult-primary-care-in/> Accessed February 2014.
6. National Governors Association. "The Role of Nurse Practitioners in Meeting Increasing Demand for Primary Care." 2012. <http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/the-role-of-nurse-practitioners.html> Accessed November 2013.
7. Robert Wood Johnson Foundation. "Implementing the IOM Future of Nursing Report—Part III: How Nurses Are Solving Some of Primary Care's Most Pressing Challenges." 2012. <http://www.rwjf.org/content/dam/files/rwjf-web-files/Resources/2/cnf20120810.pdf> Accessed February 2014.