The American Nurses Association (ANA) appreciates the opportunity to comment on Fiscal Year (FY) 2015 appropriations for the Title VIII Nursing Workforce Development Programs and Nurse-Managed Health Clinics. Founded in 1896, ANA is the only full-service professional association representing the interests of the nation’s 3.2 million registered nurses (RNs) and advanced practice registered nurses (APRNs—including certified nurse-midwives, nurse practitioners, clinical nurse specialists, and certified registered nurse anesthetists) through its state nurses associations, and organizational affiliates. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, and projecting a positive and realistic view of nursing.

As the largest single group of clinical health care professionals within the health system, licensed registered nurses are educated and practice within a holistic framework that views the individual, family and community as an interconnected system that can keep us well and help us heal. As the nation works towards restructuring the healthcare system by focusing on expanding access, decreasing cost, and improving quality; a significant investment must be made in strengthening the nursing workforce.

We are grateful to the Subcommittee for your past commitment to Title VIII funding, and we understand
the immense fiscal pressures the Subcommittee is facing. However, ANA respectfully requests you support

**$251 million for the Nursing Workforce Development programs** authorized under Title VIII of the Public Health Service Act in FY 2015. Additionally, we respectfully request **$20 million for the Nurse-Managed Health Clinics** authorized under Title III of the Public Health Service Act in FY 2015. While we recognize the reality of the current fiscal environment, we also firmly believe this request is necessary given the demand for nursing services is steadily on the rise.

### Demand for Nurses Continues to Grow

A sufficient supply of nurses is critical in providing our nation’s population with quality health care now and into the future. Registered Nurses (RNs) and Advanced Practice Registered Nurses (APRNs) are the backbone of hospitals, community clinics, school health programs, home health and long-term care programs, and serve patients in many other roles and settings. The Bureau of Labor Statistics’ (BLS) Employment Projections for 2012-2022, indicates the expected number of practicing nurses will grow from 2.862 million in 2012 to 3.437 million in 2022, an increase of  574,400, or 20.1%. In addition, nurse practitioners are one of the fastest growing occupations according to the BLS projections, noting there will be a 33.7% increase between 2012-2022.

Contrary to the good news that there are a growing number of nurses, the current nurse workforce is aging. According to the 2008 National Sample Survey of Registered Nurses, over one million of the nation’s 2.6 million practicing RNs are over the age of 50. Within this population, more than 275,000 nurses are over the age of 60. As the economy continues to rebound, many of these nurses will seek retirement, leaving behind a significant deficit in the number of experienced nurses in the workforce. BLS has projected that 555,100 RNs and APRNs will retire or otherwise leave the labor force by 2022—a tsunami of RN retirements. In fact, with RN retirements in the mix, the nation will need to have produced 1.13 million new RNs by 2022 to fill those jobs. A shortage of this magnitude would be twice as large as any shortage experienced by this country since the 1960s. Cuts to Title VIII funding would be
detrimental to the health care system and the patients we serve.

Furthermore, as of January 1, 2011 Baby Boomers began turning 65 at the rate of 10,000 a day. It is estimated that over 80 million Baby Boomers reached age 65 last year. With this aging population, the healthcare workforce will need to grow as there is an increase in demand for nursing care in traditional acute care settings as well as the expansion of non-hospital settings such as home care and long-term care.

**Title VIII: Nursing Workforce Development Programs**

The Nursing Workforce Development programs, authorized under Title VIII of the Public Health Service Act (42 U.S.C. 296 et seq.), include programs such as **Nursing Loan Repayment Program and Scholarships Program**, (Sec. 846, Title VIII, PHSA); **Advanced Nursing Education (ANE) Grants**; (Sec. 811), **Advanced Education Nursing Traineeships**, (AENT); **Nurse Anesthetist Traineeships (NAT): Comprehensive Geriatric Education Grants**, (Sec. 855, Title VIII, PHSA); **Nurse Faculty Loan Program**, (Sec. 846 A, Title VIII, PHSA); and **Nursing Workforce Diversity Grants**, (Sec. 821). These programs support the supply and distribution of qualified nurses to meet our nation’s healthcare needs.

Without support for Title VIII funding and nursing education; there will be a shortage of nurse educators. With a shortage of nurse educators, schools will have to turn away nursing students. With less financial assistance to deserving nursing students; there will be fewer nursing students. With fewer nursing students, there will be fewer nurses. As noted above, the nursing shortage will have a detrimental impact on the entire health care system.

Numerous studies have shown that nursing shortages contribute to medical errors, poor patient outcomes, and increased mortality rates. A study published in the March 17, 2011 issue of the *New England Journal of Medicine* shows that inadequate staffing is tied to higher patient mortality rates. The study supports findings of previous studies and finds that higher than typical rates of patient admissions, discharges, and transfers during a shift were associated with increased mortality – an indication of the
important time and attention needed by RNs to ensure effective coordination of care for patients at critical transition periods.

Over the last 50 years, Title VIII programs have provided the largest source of federal funding for nursing education; offering financial support for nursing education programs, individual students, and nurse educators. These programs bolster nursing education at all levels, from entry-level preparation through graduate study and in many areas including rural and medically underserved communities.

The American Association of Colleges of Nursing’s (AACN) *Title VIII Student Recipient Survey* gathers information about Title VIII dollars and its impact on nursing students. The 2012-2013 survey, which included responses from over 800 students, stated that the Title VIII programs played a critical role in funding their nursing education. The survey showed that 78% of the students receiving Title VIII funding are attending school full-time. By supporting full-time students, the Title VIII programs are helping to ensure that students enter the workforce without delay. Between FY 2005 and 2012 alone, the Title VIII programs supported over 450,000 nurses and nursing students as well as numerous academic nursing institutions, and healthcare facilities.

The Title VIII programs also address the need for more nurse faculty. Data from AACN’s 2013-2014 enrollment and graduations survey show that nursing schools were forced to turn away 78,089 qualified applications from entry-level baccalaureate and graduate nursing programs in 2013, and faculty vacancy was a primary reason. There are also replacement and expansion need in nursing colleges. The total instructors needed by 2022 will be 91,800. In order to meet that need the nursing colleges will have to hire 34,200 more instructors. The Title VIII Nurse Faculty Loan Program aids in increasing nursing school enrollment capacity by supporting students pursuing graduate education provided they serve as faculty for four years after graduation.

Monies you appropriate for these programs help move nurses into the workforce without delay. Your investment in programs, and the nurses that participate, is returned by more students entering into the profession and serving in rural and underserved areas; by nurses continuing with their education and
studying to be nurse practitioners, thereby addressing our nation’s growing need for primary care providers; or by going on to become a nurse faculty member and teaching the next generation of nurses. While ANA appreciates the continued support of this Subcommittee, we are concerned that Title VIII funding levels have not been sufficient to address the growing nursing shortage. Registered Nurses (RNs) and Advanced Practice Nurses (APRNs) are key providers whose care is linked directly to the availability, cost, and quality of healthcare services. For these reasons and many more, we again respectfully request you appropriate $251 million for the Nursing Workforce Development programs authorized under Title VIII of the Public Health Service Act in FY 2015.

**Nurse-Managed Health Clinics**

A health care system must value primary care and prevention to achieve an improved health status of individuals, families and the community. Nurses are strong supporters of community and home-based models of care. We believe that the foundation for a wellness-based health care system is built in these settings and reduces the amount of both financial expenditures and human suffering. ANA supports the renewed focus on new and existing community-based programs such as Nurse Managed Health Centers (NMHCs).

Currently, there are more than 200 Nurse Managed Health Centers (NMHCs) in the United States which have provided care to over 2 million patients annually. ANA believes that Nurse Managed Health Centers (NMHCs) are an efficient, cost-effective way to deliver primary health care services. NMHCs are effective in disease prevention and early detection, management of chronic conditions, treatment of acute illnesses, health promotion, and more. These clinics are also used as clinical sites for nursing education.

**We respectfully request the committee provide $20 million for the Nurse-Managed Health Clinics authorized under Title VIII of the Public Health Service Act in FY 2015.**

Thank you for your time and your attention to this matter.