

American Association of Nurse Practitioners
Statement for the Record
House Committee on Education and Workforce
Subcommittee on Workforce Protections Hearing
“Strengthening Federal Workers’ Compensation Programs: Ensuring Integrity, Efficiency, and Access”
Wednesday, March 18, 2026

Dear Chairman Mackenzie,

The American Association of Nurse Practitioners (AANP), representing more than 461,000 Nurse Practitioners (NPs) in the United States, appreciates the opportunity to provide a statement for the record for the House Committee on Education and Workforce, Subcommittee on Workforce Protections hearing titled “Strengthening Federal Workers’ Compensation Programs: Ensuring Integrity, Efficiency, and Access.” AANP writes in support of the *Health Care for Energy Workers Act of 2025* (H.R. 4122), introduced by Representatives Rick Allen (R-GA) and Lucy McBath (D-GA) and appreciates the subcommittee including the bill in this hearing. We are pleased to see the Subcommittee taking up this bill and encourage the full Committee to markup and advance the legislation expeditiously.

This legislation would authorize NPs and physician assistants to order treatment for patients covered under the Energy Employees Occupational Illness Compensation Program Act (EEOICPA) who suffer from occupational illnesses due to their employment. The Department of Labor Ombudsman has recognized that access to care has been an issue for patients receiving care under the EEOICPA. In the 2024 Annual Report to Congress, the Ombudsman stated that “claimants and their authorized representatives (ARs) contacted our office and relayed that they have encountered significant difficulties in either accessing medical treatment and/or obtaining authorization for essential healthcare services for the treatment of their covered conditions. As a result of these difficulties, treatment for approved medical conditions has been unnecessarily delayed or denied.”¹ Past Ombudsman reports have identified similar issues of patients unable to access to care due to their inability to find a healthcare provider, and the Ombudsman stated that they are increasingly hearing from claimants regarding these concerns.²

Given the critical nature of this issue, it is imperative that Congress take proactive steps to support EEOICPA patients in accessing medically necessary care. We applaud Representatives Allen and McBath for recognizing and addressing this access to care issue, and the Subcommittee for including H.R. 4122 in this hearing. Authorizing NPs and PAs to order care under the EEOICPA is a critical component to ensuring that these patients have timely access to care for illnesses that they contracted providing critical services to our country. Accordingly, we urge the Subcommittee, and ultimately the full Committee, to advance this bill in a timely fashion.

Importantly, the full Committee on Education and the Workforce has already recognized the important contributions of nurse practitioners to the care of federal employees by favorably reporting out the *Improving Access to Workers’ Compensation for Injured Federal Workers Act* (H.R. 3170) by a vote of 34-0. Prior to reporting the bill out of Committee, this Subcommittee conducted a hearing on May 6, 2025, where they heard testimony on the difficulty that federal workers face in finding physicians willing to participate in the Federal Employees Compensation Act program and the need for increased access to

¹ https://www.dol.gov/sites/dolgov/files/OMBUDSMAN/annualreport/2024_ARC.pdf, at page 25.

² https://www.dol.gov/sites/dolgov/files/OMBUDSMAN/annualreport/2023_ARC_Final-PDF.pdf

care for patients under that program.³ We reiterate our support for H.R. 3170 as well, thank the Subcommittee and full Committee for its actions on that legislation, and also support a favorable report for H.R. 4122.

As the Subcommittee is aware, NPs provide a substantial portion of the high-quality⁴, cost-effective⁵ care that our communities require. According to the Centers for Medicare and Medicaid Services (CMS), as of 2024, there were over 243,000 NPs billing for Medicare services, making NPs the largest Medicare designated provider specialty,⁶ and approximately 80% of NPs are seeing Medicare and Medicaid patients.⁷ NPs have a particularly large impact on primary care as approximately 70% of all NP graduates are prepared in primary care.⁸

According to the Medicare Payment Advisory Commission (MedPAC), APRNs and physician assistants (PAs) comprise approximately one-third of our primary care workforce, and up to half in rural areas.⁹ As stated in MedPAC's July 2025 data book, Medicare "encounters with APRNs and PAs grew rapidly from 2018 to 2023 (50 percent in total), and encounters with primary care physicians declined substantially (-22 percent)."¹⁰ Further, the Commission highlights that these changes "continue a longer-term trend of declines in services billed by primary care physicians and rapid increases in the number of services billed by APRNs and PAs."¹¹ Fifty-seven percent of Medicare beneficiaries received a primary care service from an NP or PA, and sixty-six percent of rural Medicare patients received a primary care service from an NP or PA.¹² The impact of NPs on access to care, particularly in rural areas, is significant and removing barriers within EEOICPA will increase the availability of qualified clinicians to meet the needs of patients.

The importance of NPs in rural areas has also been recognized by federal agencies such as CMS, which recently included a technical score component within the Rural Health Transformation Program (D.3. Scope of Practice) that rewards states for removing barriers to practice on nurse practitioners. The Rural Health Transformation Program's opportunity for states to include NP practice environment as a metric underscores the importance of ensuring nurse practitioners are empowered to practice to the full extent of their education and clinical training. As stated in the Notice of Funding Opportunity, allowing clinicians to practice to the top of their license will increase the supply of health services, increase primary care options to support preventative health, and decrease wait times for patients.¹³

This barrier is also inconsistent with other federal government programs and does not reflect the modern health care workforce. NPs are already primary care providers within the Medicare, Medicaid and Federal Employee Health Benefits programs and have full practice authority within the Veterans Health Administration and Indian Health Services. They are also included in the definition of an "acceptable medical source" by the Social Security Administration for the purposes of certifying that an individual has a medically determinable impairment. Modernizing the EEOICPA and all federal workers' compensation programs will reduce barriers on patients and improve access to care.

³ U.S. Congress. House of Representatives. Committee on Education and the Workforce. (2025) Improving Access to Workers' Compensation for Injured Federal Workers Act of 2025 (Rep. 119-394).

⁴ <https://www.aanp.org/images/documents/publications/qualityofpractice.pdf>.

⁵ <https://www.aanp.org/images/documents/publications/costeffectiveness.pdf>.

⁶ <https://www.cms.gov/files/zip/cy-2026-pfs-proposed-rule-specialty-impacts-practitioner.zip>

⁷ https://storage.aanp.org/www/documents/NP_Infographic.pdf

⁸ *Ibid*

⁹ https://www.medpac.gov/wp-content/uploads/2022/06/Jun22_MedPAC_Report_to_Congress_SEC.pdf (see Chapter 2.)

¹⁰ [July 2025 Data Book: Health Care Spending and the Medicare Program – MedPAC](#)

¹¹ *Ibid*

¹² *Ibid*

¹³ [Search Results Detail | Grants.gov](#)



American Association of
NURSE PRACTITIONERS™

The Voice of the Nurse Practitioner®

AANP thanks the Committee for its consideration of this statement and for its actions on improving care delivery and reducing barriers for patients and clinicians across federal workers' compensation programs. We look forward to working with the Committee to ensure that these bills are considered and passed by the full U.S. House of Representatives in the 119th Congress. Should you have comments or questions, please direct them to MaryAnne Sapio, V.P. Federal Government Affairs, msapio@aanp.org, 703-740-2529.