



GRADUATE NURSE EDUCATION DEMONSTRATION FREQUENTLY ASKED QUESTIONS

General

1) *What is the purpose of the Graduate Nurse Education (GNE) Demonstration?*

The primary purpose of the Demonstration is to provide qualified training to advanced practice registered nurse (APRN) students in order to increase the supply of APRNs to provide access to healthcare professional services for the increasing number of Medicare beneficiaries.

2) *Is there a maximum award amount (yearly? total?) per hospital?*

As per the legislation, the Centers for Medicare & Medicaid Services (CMS) is authorized to spend up to \$50 million for each fiscal year 2012 through 2015 to support the Demonstration. The amount awarded to the selected hospitals will be dependent on the application proposals and budgets requested to increase the supply of APRNs.

3) *Are there only going to be five demonstration projects awarded?*

Yes, pursuant to Section 5509(a)(1)(B) of the Affordable Care Act, the GNE Demonstration can include up to five eligible hospitals.

4) *What is your expected number of increased training positions per year for the Demonstration project?*

The CMS does not have a specified number of increased training positions defined for this Demonstration. However, eligible hospital applicants are expected to detail their strategy for achieving increased enrollment of APRN students who will receive clinical training under this Demonstration in their proposals. The strategy shall include a target number of APRN students to be recruited by each participating school of nursing. The target number will be above the average number of graduate APRNs by school of nursing for the academic years 2006-2010.

Subspecialties/Programs Permitted

5) *Are all four clinical specialties required to be offered for an applicant to be competitive?*

No, eligible hospital applicants for the GNE Demonstration are not required to provide qualified clinical training for all four types of APRN programs. An application with fewer than the four program areas will still be considered competitive for the GNE Demonstration, provided all other criteria are met.

6) *Will the CMS consider Doctorate of Nurse Practitioner programs as part of the APRN specialty program?*

This Demonstration allows reimbursement for training that permits an individual to be employed in a new capacity in which he or she could not have been employed without completing the additional training program. Training that enhances nurse competencies, but does not permit an individual to be employed in a new capacity, would not qualify as GNE under this Demonstration. In other words, individuals who have already been licensed or eligible to obtain a license, to practice as APRNs are not eligible for further training under the Demonstration.

Accordingly, CMS will consider Doctorate of Nurse Practitioner programs for this Demonstration as long as graduation from that accredited APRN program provides the APRN student with the necessary requirements to achieve any required certification that would allow the APRN graduate to obtain a license to practice which is not already held.

7) *Are the Acute Care Pediatric Nurse Practitioner, Psychiatric Nurse Practitioner, Neonatal Nurse Practitioner subspecialties eligible for the Demonstration?*

No, these subspecialties are not eligible for reimbursement of qualified clinical training under this Demonstration.

8) *Can a school of nursing participate in this Demonstration if the Doctorate of Nurse Practitioner (DNP) program is being converted from a Master's level program, but does not yet have full certification for the DNP program?*

No, a school of nursing's DNP or Master's program must be accredited pursuant to Section IV, A of the solicitation to be able to participate in the Demonstration. Specifically it states, "An applicable [school of nursing (SON)] is defined by Section 801 of the PHSA. The SON must be accredited by a nursing accrediting organization recognized by the U.S. Department of Education (ED) and/or the Council for Higher Education Accreditation. These accrediting agencies include the Commission on Collegiate Nursing Education, the National League for Nursing Accrediting Commission, the Council on Accreditation of Nurse Anesthesia Educational Programs of the American Association of Nurse Anesthetists, and the Commission on Midwifery Education of the American College of Nurse-Midwives. In addition to meeting the

criteria defined in Section 801 of the PHSA, the SON must also enter into a written partnership agreement with the eligible hospital participating in the Demonstration.”

Eligible Hospital Applicant

- 9) ***May an eligible hospital applicant apply as a system with its national provider number, or does the application have to go through one of the hospitals in that system?***

No, an eligible hospital applicant may not apply as a system. The application must be submitted by one of the individual hospitals. Each applicant must apply through an eligible hospital and detail the partnerships/systems in its application. Specifically, in the solicitation at Paragraph III. A. Who May Apply we state: “An eligible hospital applicant means an individual hospital (as defined in subsection (e) of Section 1861 of the Social Security Act (42 U.S.C. 1395x)) or a Critical Access Hospital (as defined in subsection (mm)(1) of that section) that has a current valid CMS Certification Number (CCN) and submits a Medicare Hospital Cost Report.” However, hospitals that are multi-campus hospitals, with one entity submitting a hospital cost report for multiple campuses, will be allowed to participate in the Demonstration. CMS will only make direct payments for up to five eligible hospitals under this Demonstration.

Partnerships

- 10) ***If an eligible hospital applicant is part of a system of hospitals, may that hospital apply with other hospitals outside of its system?***

An expanded configuration of hospital relationships is permissible under the Demonstration under certain circumstances. The eligible hospital applicant can provide clinical training under arrangements with additional hospitals and their corresponding schools of nursing. The agreement between the eligible hospital and each additional hospital shall define the obligations of each entity with respect to the provision of qualified clinical training, including but not limited to clinical experiences, costs, and the personnel required for the training. Please note, however, that the applicant cannot be a joint application from all hospitals in the system and their partners. The applicant must be one “eligible hospital” as defined in the solicitation. Please see the complete solicitation for additional details at http://www.innovations.cms.gov/Files/x/GNE_solicitation.pdf

- 11) ***If an eligible hospital applicant has an agreement with several homeless shelters where the applicant staffs are the Nurse Practitioners that run the clinics that serve that population, would those clinics count as non-hospital community-based care center?***

Yes, assuming that these clinics are certified and accepted by the school of nursing as a site that clinical training can occur in satisfaction of APRN clinical training degree requirements.

12) *Can an eligible hospital applicant partner with schools of nursing in other states?*

Yes, such a partnership would be permitted under this Demonstration.

Reasonable Costs – General

13) *Would the development of clinical materials by the school of nursing to be used in the clinical environment to train participating APRN students be allowable school of nursing budget costs (salaries, authorship/reviewer expenses, web fees, etc)?*

The costs incurred to develop clinical materials for the clinical training of the APRN students are allowable under this Demonstration.

14) *Would the costs associated with the increased didactic training, health assessment labs, skills labs, advising, administrative overhead, etc be allowable. Would loss revenue by hospitals or clinics be allowable when the preceptors take longer to teach a student, and are not able to include as many billable visits per day?*

Only those reasonable costs related to clinical training are allowable under this Demonstration. Costs related to didactic training are not allowable. Lost revenue is not allowable.

15) *Will the total amount of reasonable costs be reimbursed at a prorated rate of the lead hospital's Medicare proportion?*

Reimbursement will not be influenced by the eligible hospital applicant's Medicare proportion. The CMS is paying for those reasonable costs of providing APRNs with qualified clinical training that is attributable to the increased number of APRNs.

16) *Some of our community-based providers are hesitant to take on learners because of a 10-20 percent impact on productivity on a Relative Value Unit basis. This is especially true when the preceptors are working with first year student - some of those settings are paid fee for service. Can the reimbursed cost in this initiative include verifiable reductions in individual preceptor efficiency?*

Only those reasonable costs related to clinical training are allowable under this Demonstration. Lost revenue is not allowable.

Reasonable Costs – Didactic Training

- 17) Does the exclusion of didactic training costs include support for faculty teaching didactic courses as part of the APRN curricula?**

Didactic training costs are not allowable.

Reasonable Costs – Administrative Costs

- 18) Are school of nursing administrative costs associated with managing clinical faculty involvement allowable (e.g., salaries, administrative expenses, etc.)?**

Yes, if the school of nursing administrative costs associated with managing clinical faculty are related to the clinical training under the GNE Demonstration.

- 19) Are costs associated with increased recruitment allowable for the school of nursing partner (e.g., salaries, travel, administrative expenses, etc.)?**

No, student recruitment costs are not considered clinical training costs and would not be allowable under this Demonstration.

- 20) An increase in school enrollment is going to require an increase in faculty to teach in both clinical and didactic courses. Are we able to include faculty salaries to meet these increased class sizes (clinical or didactic) in the budget?**

Only those costs related to clinical training are allowable under the GNE Demonstration. Faculty salaries for didactic courses are not allowable.

- 21) Can the hospital hire a project director to administer this project, including setting the GNE cost center, disbursing payments to the school of nursing and community-based care setting, respond to the budgets and required reports, etc., and can they also support some of the time for the person who generally oversees the project from the funds?**

Yes, the hospital may hire a project director to administer this project (if desired); however, only the costs attributed to the increase in APRN students will be reimbursed. Project director costs are allowable as long as they are necessary for the operations of the clinical training program.

- 22) Can we pay partial salaries or base pay for Nurse Practitioners who work with Nurse Practitioner students (for example, pay for 20 percent of their time) like a joint appointment, so long as they work with a Nurse Practitioner student at least that much of the time?**

Yes, partial salaries of Nurse Practitioners who provide clinical training oversight or preceptor activities will be allowable as long as those costs are attributed to the clinical training of the increased number of APRN students.

Qualifying community-based care settings

23) *Regarding the non-hospital community-based care requirement. The only community-based care settings that would be pertinent for anesthesia students would be the ambulatory surgery centers. Since CRNAs function within hospital settings, would a rural hospital meet the CCS requirement?*

No, a rural hospital would not meet the definition of a non-hospital community-based care setting. Pursuant to the legislation, 50 percent of the clinical training must be done in a non-hospital community-based care setting (CCS). For Certified Registered Nurse Anesthetists, the non-hospital clinical training could be in an ambulatory surgery center, or possibly a stand-alone pain management clinic that offers any kind of anesthesia.

24) *Would state or local public health departments, as well as local PACE programs, be considered non-hospital community-based care settings for the purposes of this solicitation?*

Yes.

Clinical Training Requirements

25) *The solicitation states that 50 percent of the clinical training may be waived for rural or medically-underserved areas. What is the mechanism to request the waiver?*

To clarify, the legislation states that 50 percent of the clinical training covered by the solicitation must be conducted in non-hospital community-based care settings (CCSs). The requirement that it take place in a non-hospital CCS may be waived for eligible hospitals in rural or medically-underserved areas. (See Section 5509(e)(7)(B) of the Affordable Care Act). If the eligible hospital applicant is requesting such a waiver, the request serves as a part of the relevant section of the proposal. That is, the eligible hospital applicant needs to state that it is requesting the waiver and provide evidence supporting the assertion that the waiver applies.

- 26) *Regarding the 50 percent requirement: Does 50 percent of each trainee's education need to be in primary care or 50 percent of all the training for all the students be in primary care?***

The Demonstration requires that 50 percent of all the training for all the APRN students be completed in a non-hospital community-based care center.

- 27) *Do all students need to have a clinical rotation in a rural or federally qualified health clinic?***

No. The requirement is that 50 percent of all clinical training occur in a non-hospital community-based care center.

Requirements for Written Agreements

- 28) *If there is already a collaborative agreement between the university school of nursing and an eligible hospital applicant to provide education for APRN students, does an additional agreement need to be obtained specifically for this solicitation?***

No, an additional agreement specifically addressing the Demonstration is not necessary. The school of nursing must meet the criteria defined in Section 801 of the PHSA, and have a written partnership agreement with the eligible hospital that satisfies Section 5509(b) of the Affordable Care Act. For purposes of this Demonstration, the currently existing agreement may be provided as long as it adequately describes the information required by the legislation.

- 29) *If an eligible hospital applicant has affiliated hospitals and clinics in their system that can provide clinical sites including community care clinics, does the applicant need descriptions, letters of intent, etc., from all these facilities? Would the affiliation agreement that exists between these facilities within the system and the main hospital in suffice?***

The facility description and letters of intent, as well as similar required items, are needed in the proposal for all partnerships included in the proposal to ensure proper proposal review.

Baseline Determination

- 30) *In determining the baseline numbers for the proposal, is there a certain formula applicants should be using to calculate the per-student training costs? Or is it up to each applicant to derive its own training costs?***

It is up to the applicant to propose the formula however please use 5509(a)(2)(B) for some guidance.

Miscellaneous

31) *Can an eligible applicant simultaneously apply for other Innovation Center funding or demonstration opportunities in addition to the GNE Demonstration?*

Yes.

Location of Solicitation

32) *Where can I find the full proposal announcement?*

The solicitation for this Demonstration can be found on our website:
<http://www.innovations.cms.gov/initiatives/GNE/index.html>.

Application Help

33) *What form may the applications be in, electronic or hardcopy?*

Applications will only be accepted in hardcopy and on CD. Electronic submissions will not be accepted. For clarification, the statement in the solicitation that “all hard copies and electronic copies must be identical” refers to the proposal copies found on the 10 CDs to be submitted with the original hardcopy proposal.

34) *Where should completed proposal applications be sent?*

All completed proposals (1 original hardcopy and 10 CDs) must be received no later than 5pm EST on May 21, 2012 at: Centers for Medicare & Medicaid Services, Center for Medicare & Medicaid Innovation, Attention: Alexander Laberge, Mail Stop: WB-06-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

35) *What is the deadline for proposals to be submitted? Is CMS considering an extension of this deadline?*

The deadline for proposal submissions is May 21, 2012 at 5pm EST.

36) *Will proposal submissions be permitted via grants.gov?*

No, the GNE Demonstration is not a grant program, so submissions will not be permitted via grants.gov.

37) *Page 5 refers to a Payment Instructions document on the GNE website, but a search of that site for these terms just leads me back to the solicitation. Can you please provide a direct link?*

We apologize for the confusion. That document is currently under development and will be posted as soon as it is available. Please check our website for updates.

38) *Is there a list of FAQs for this announcement?*

This FAQs document is continuously under development and will be updated on our website periodically. Check our website for updates at:

<http://www.innovations.cms.gov/initiatives/GNE/index.html>.

39) *Is there an application or "How to apply" section on your website?*

The information on the required contents of proposals and details on how to apply can be found in the Graduate Nurse Education Demonstration solicitation. The solicitation may be found on our website at

http://www.innovations.cms.gov/Files/x/GNE_solicitation.pdf.

Additional information on the Graduate Nurse Education Demonstration can be found on the Innovation Center website:

<http://www.innovations.cms.gov/initiatives/GNE/index.html>.

40) *The overall director of our institution is the Chancellor and he would be more appropriate to sign the cover letter although the guidance states that the hospital director should sign. Is it permissible to have the Chancellor sign?*

The applicant to the Demonstration must be an eligible hospital or critical access hospital. Therefore, the chief executive officer of the hospital must sign the application.