



Association of periOperative Registered Nurses

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**Memo of Support for
Registered Nurse First Assistants (RNFAs)
Regarding Reimbursement for First Assistant at Surgery Services**

Initiatives directed at achieving reimbursement for the first assistant services provided by registered nurse first assistants (RNFAs) are essential to establish recognition of the RNFA as an eligible provider of first assistant at surgery services within the health care insurance industry. AORN supports the role of the RNFA in contributing to safe patient care and recognizes that the lack of reimbursement for first assistant services provided by RNFAs presents a barrier to utilization of RNFAs.

RNFA Description

1. Licensed Professional Registered Nurse, experienced in operating room nursing, qualified through additional education as a first assistant in surgery.
2. Participates in hands-on functions associated with carrying out the surgical procedure.

RNFA Qualification Requirements

Completion of an intense one year college educational program consisting of didactic instruction, taught by surgeon-nurse teaching teams, and surgeon-supervised clinical rotations, dedicated to preparing the operating room nurse to assume the role of first assistant at surgery.

Current Reimbursement Environment

AORN understands the necessity of reducing health care costs for all involved parties. It is important to note that reimbursement for assisting at surgery services to licensed non-physician providers such as the RNFA represents a cost savings to the health care insurance industry.

Reimbursement for first assistant at surgery services provided by a MD is at a higher rate than reimbursement for the same service when provided by a non-physician. Presently, the insurance industry routinely reimburses this lower rate for first assistant at surgery services provided by licensed non-physician professionals who are qualified to provide first assistant at surgery services. However, when these services are performed by a qualified RNFA, such reimbursement is not routinely provided.

The documented shortage of available surgeons and the mandated reduction in permitted work hours of surgical residents has contributed to the need for registered nurse first assistants to step in to provide first assistant services, thereby ensuring continued delivery of quality surgical patient care. The RNFA is a technically skilled and highly knowledgeable health care professional who is educationally prepared, clinically experienced and available to function in this capacity.

AORN recognizes that the failure of payers to provide for RNFA reimbursement represents a barrier to optimal utilization of RNFA services. Achievement of parity with other licensed non-physician providers of assisting at surgery services through public policy action to establish reimbursement for RNFA services is necessary to ensure patient access to quality, cost-effective and safe surgical care.

Equitable Resolution

Since most insurance policies include provisions for reimbursement for first assistant at surgery services, no modification of existing protocols associated with procedures designated as reimbursable would be necessary in order to include RNFAs as eligible providers of first assistant services. Public policy to this effect would establish parity with other licensed non-physician first assistants who currently receive reimbursement.

Conclusion

In order to contribute to cost-effective, safe, and accessible quality health care for surgical patients, public policy efforts should be directed to establish provisions for reimbursement for the first assistant services provided by RNFAs.