

August 3, 2026

The Hon. Rand Paul
Chairman
Committee on Homeland Security &
Governmental Affairs
U.S. Senate
340 Dirksen Senate Office Building
Washington, DC 20510

The Hon. Gary Peters
Ranking Member
Committee on Homeland Security &
Governmental Affairs
U.S. Senate
340 Dirksen Senate Office Building
Washington, DC 20510

Dear Chairman Paul and Ranking Member Peters,

I am writing on behalf of the American Nurses Association (ANA) to inform you of our strong support of the *Improving Access to Workers' Compensation for Injured Federal Workers Act* (S. 3296). This bipartisan legislation would retire outdated barriers in the Federal Employees' Compensation Act (FECA) that limit the ability of nurse practitioners (NPs) to provide care and treatment for injured or ill federal employees.

ANA is the premier organization representing the interests of the nation's over five million registered nurses through its constituent and state nurses associations, organizational affiliates, and individual members. RNs serve in multiple direct care, care coordination, and administrative leadership roles across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions, and provide advice and emotional support to patients and their family members. ANA members also include those practicing in the four advanced registered nurse roles: nurse practitioners (NPs), clinical nurse specialists (CNS), certified nurse-midwives (CNMs), and certified registered nurse anesthetists (CRNAs). ANA is dedicated to partnering with health care consumers to improve practices, policies, delivery models, outcomes, and access across the health care continuum.

Currently, federal employees can select an NP as their health care provider under the Federal Employees Health Benefits Program (FEHBP), and the majority of states authorize NPs to provide the diagnosis and treatment for a workplace-related injury. However, contrary to the workers' compensation process in most states, FECA requires that only a physician can make the diagnosis, certify the injury and extent of disability, and oversee the

patient's treatment and care. This barrier places yet another burden on our country's approximately two million federal employees.

In addition, S. 3296 would put FECA on par with the Social Security Disability Insurance program, Medicare, Medicaid, and the vast majority of other federal health programs where NPs are authorized to oversee health care delivery consistent with state law. This bill also reflects bipartisan recommendations to remove barriers on NPs from the National Academies of Sciences, Engineering, and Medicine; the Brookings Institution; the American Enterprise Institute; the World Health Organization; the Bipartisan Policy Center; the National Governors Association; Americans for Prosperity; and the Federal Trade Commission, among others.

In closing, I would like to thank you for your leadership and for your willingness to consider our perspective on this important issue to ensure that federal workers have access to qualified, high-quality providers. ANA stands ready to work with the Education and Workforce Committee to advance this legislation. If you have any questions, please contact Tim Nanof, Executive Vice President of Policy and Government Affairs, at (301) 628-5081 or Tim.Nanof@ana.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'Bradley Goettl', with a stylized flourish at the end.

Bradley Goettl, DNP, DHA, RN, FAAN, FACHE
Chief Nursing Officer

cc: Jennifer Mensik Kennedy, PhD, MBA, RN, NEA-BC, FAAN, ANA President
Angela Beddoe, ANA Chief Executive Officer