



August 4, 2026

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

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

Dear Chairman Paul and Ranking Member Peters:

On behalf of the 57 undersigned organizations representing the Nursing Community Coalition (NCC), thank you for including S.3296, the *Improving Access to Workers' Compensation for Injured Federal Workers Act*, on the agenda for the Committee's business meeting. We appreciate the Committee's consideration of this important bipartisan legislation and urge you to report the bill favorably.

This bill would retire outdated barriers in the Federal Employees' Compensation Act (FECA) that limit the ability of Nurse Practitioners (NPs) to diagnose and oversee the care and treatment of federal employees who are injured or become ill in the course of their employment. The NCC is a cross section of education, practice, research, and regulation within the nursing profession representing Registered Nurses (RNs), Advanced Practice Registered Nurses (APRNs),¹ nurse leaders, boards of nursing, students, faculty, and researchers. We appreciate your continued efforts to improve the health care system for our nation's federal employees and strongly support passage of this bipartisan effort.

Currently, federal employees can select an NP as their health care provider under the Federal Employees Health Benefits (FEHB) Program, 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 the disability, and oversee the patient's treatment and care. This barrier places an additional burden on federal employees, depriving them from receiving health care from their provider of choice, as well as hindering timely access to care and continuity of care.

The *Improving Access to Workers' Compensation for Injured Federal Workers Act* would update the federal workers' compensation program and authorize NPs to certify disabilities and oversee treatment for injured or ill federal employees under FECA. This would improve access to health care for injured or ill federal employees, particularly in rural and underserved communities, and align the federal workers' compensation program with state law. By updating FECA to authorize federal employees to select their

¹ APRNs include certified nurse-midwives (CNMs), certified registered nurse anesthetists (CRNAs), clinical nurse specialists (CNSs) and nurse practitioners (NPs).

health care provider of choice when they are injured or become ill in the course of their federal employment, greater access, overall efficiency, and better continuity of care can be achieved.

Thank you for your leadership on this important legislation and we strongly support passage of the *Improving Access to Workers' Compensation for Injured Federal Workers Act* (S.3296). Should you have any questions or if the Nursing Community Coalition can be of any additional assistance please contact the coalition's Executive Director, Rachel Minahan, at rstevenson@thenursingcommunity.org.

Sincerely,

Academy of Medical-Surgical Nurses
Academy of Neonatal Nursing
Alliance of Nurses for Healthy Environments
American Academy of Ambulatory Care Nursing
American Academy of Emergency Nurse Practitioners
American Academy of Nursing
American Association of Colleges of Nursing
American Association of Critical-Care Nurses
American Association of Heart Failure Nurses
American Association of Neuroscience Nurses
American Association of Nurse Anesthesiology
American Association of Nurse Practitioners
American Association of Occupational Health Nurses
American College of Nurse-Midwives
American Nephrology Nurses Association
American Nurses Association
American Organization for Nursing Leadership
American Psychiatric Nurses Association
American Public Health Association, Public Health Nursing Section
American Society for Pain Management Nursing
American Society of PeriAnesthesia Nurses
Association of Community Health Nursing Educators
Association of Nurses in AIDS Care
Association of Pediatric Hematology/Oncology Nurses
Association of periOperative Registered Nurses
Association of Public Health Nurses
Association of Rehabilitation Nurses
Association of Veterans Affairs Nurse Anesthetists
Association of Women's Health, Obstetric and Neonatal Nurses
Commissioned Officers Association of the U.S. Public Health Service
Dermatology Nurses' Association
DNPs of Color
Friends of the National Institute of Nursing Research
Gerontological Advanced Practice Nurses Association
Hospice and Palliative Nurses Association
Infusion Nurses Society
International Society of Psychiatric-Mental Health Nurses
National Association of Clinical Nurse Specialists

National Association of Hispanic Nurses
National Association of Neonatal Nurse Practitioners
National Association of Neonatal Nurses
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Association of School Nurses
National Black Nurses Association
National Forum of State Nursing Workforce Centers
National Hartford Center of Gerontological Nursing Excellence
National League for Nursing
National Organization of Nurse Practitioner Faculties
Nurses Organization of Veterans Affairs
NurseTRUST
Oncology Nursing Society
Organization for Associate Degree Nursing
Preventive Cardiovascular Nurses Association
Society of Pediatric Nurses
Society of Urologic Nurses and Associates
Wound, Ostomy, and Continence Nurses Society