



COMMISSION FOR
NURSE REIMBURSEMENT

A hospital can get paid for an algorithm. **Not for nurses.**

Why the most trusted profession in
America is invisible on the hospital bill,
and what is being decided before Aug
10.



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ONE HOSPITAL STAY, ITEMIZED

A hospital can bill for nearly everything in the room.

The bed

BILLABLE

The IV pump

BILLABLE

Every gauze pad

BILLABLE

The nurse who kept you alive

\$0

reimbursenurses.com

Bedside nursing care is bundled into the room-and-board rate, not billed as a distinct service.

SWIPE →



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THE SCALE OF THE BLIND SPOT

\$266B

Spent on hospital nursing every year. None of it billed as care.

Nursing is roughly 30% of what hospitals spend on labor, booked as a cost to cut rather than care to fund.

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Source: Commission for Nurse Reimbursement position statement and analysis.

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ONE HOSPITAL'S PRICE LIST

158,475

things the
hospital can
charge for.

0

**are for the bedside nursing care
that kept patients alive.**

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CNR review of a 1,000+-bed academic medical center: zero inpatient nursing charges (one outpatient charge existed).

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IN FIVE MINUTES, BEFORE AUG 10

Here's how you help fix it.

1 Comment on rule CMS-1848-P

At [regulations.gov](https://www.regulations.gov). Say nurses should be paid for their care, not bundled into "room and board."

2 Share this with a nurse

Or three. The more real comments, the harder this is to ignore.

3 Get a nurse on your hospital's AI committee

They decide how to spend on algorithms. A nurse belongs in that room.



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HAPPENING RIGHT NOW

An algorithm may get its own billing code **before nurses do.**

Medicare's 2027 payment rules are being written now. A proposed pathway would pay for algorithm-driven analyses. Bedside nursing still has no code of its own.

Comment on rule CMS-1848-P →

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Public comments on the CY2027 Medicare Physician Fee Schedule (CMS-1848-P) at [regulations.gov](https://www.regulations.gov). The algorithm pathway is a proposal; no codes exist yet.

Closes Aug 10, 2026