Community Health Center Expansion: Roles of Nurse Practitioners and Physician Assistants

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BACKGROUND

Community Health Centers (CHCs) fill an important role in providing health care to underserved populations. Recent infusions of federal support have expanded this role. Nurse practitioners (NPs) and physician assistants (PAs) have been used extensively in CHCs for decades, but their use has increased. This project compares the patient care characteristics of NPs and PAs with those of physicians in CHCs from 2006-2010.

RESEARCH QUESTIONS

1. What are the trends in use of PAs and NPs in CHCs between 2006 and 2010?
2. How do patient and visit characteristics vary among provider types?
3. How does time spent with patients vary by provider type, adjusting for patient, provider, and visit characteristics?

METHODS

Data Source

National Ambulatory Medical Care Survey (NAMCS)
Community Health Center strata from 2006-2010.

RESULTS

Trends

- PAs and NPs attended 35% of CHC visits, with NPs attending 25% and PAs attending 10%.
- The proportion of visits attended by NPs and PAs increased over the time period studied.

Analysis

- Descriptive statistics
- Bivariate analysis to evaluate differences in patient and visit characteristics
- Multivariate regression analysis to compare time spent with patients by provider type
- Survey weights are used to produce national estimates. Standard error calculation accounts for the complex survey design.

Sample

- 1118 providers
- 670 Physicians
- 245 NPs
- 103 PAs
- 23931 patient visits

Conclusions

- NPs and PAs are 31% of the clinicians in CHCs and provide 35% of CHC visits.
- There is substantial overlap in the patient and visit characteristics of the three provider types, but differences include:
  - NPs provide more preventive care to younger patients with fewer chronic illnesses for whom they do not act as primary care provider
  - PAs provide more acute care to rural patients for whom they act as primary care provider
  - Physicians and PAs provide more chronic disease care than NPs
- There are differences in the number of visits and days providing care, but physicians, NPs, and PAs spend similar amounts of time with each patient

Regression analysis of time spent with patients

- Time spent with the patient did not vary by provider type, adjusted for patient, provider, and visit characteristics

Implications

- The Healthy People 2020 objective of increasing access to care, particularly in CHCs, could be partially achieved through increased utilization of NPs and PAs.
- Because NPs and PAs fill unique roles in some settings, health services researchers should determine for each project whether it is appropriate to combine them into one analytic category.