

NEW DATA TO INFORM GLOBAL WORKFORCE PLANNING AND EDUCATION OF PHYSICIAN ASSISTANTS

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Over the past 48 years, PAs have demonstrated that they are effective partners in a changing healthcare environment; adaptable to the needs of an evolving delivery system. Nine countries, from South Africa to the Netherlands, recently launched the profession through adaptations of US education/practice models. Effective workforce policy at the national, regional and local level requires comparable measures of provider pipelines, productivity and attrition; this study reports new measures and data on PAs to inform this dialogue.

This study draws from primary data from the Physician Assistant Education Association (PAEA) and the nccPA Health Foundation, in partnership with the National Commission on Certification of Physician Assistants (NCCPA). Primary sources include PA candidates, educational programs, students and graduates. PAEA's candidate pipeline data (2011-2012) came from the Centralized Application Service for Physician Assistants (CASPA). PAEA's 27th Annual Report (2010-2011) is drawn from an annual survey of member programs. The nccPA Health Foundation's workforce data is supported by a contract with HRSA's Office of Health Workforce Analysis to develop a minimum data set on the profession. Data was solicited as part of NCCPA's recertification maintenance process.

Interest in PA education continues to be strong. During the 2011-12 admissions cycle, 18,501 unique applications were initiated, representing a 10% increase over the previous year. Average applicant age is 27(71% female). Eighty-six percent of programs now participate in CASPA and a supplemental survey ensures consistency with non-CASPA participating programs. There are 170 educational programs with an estimated 65 institutions seeking provisional accreditation for new programs or expansion to occur by the end of 2016. Over the past 5 years, there have been 32 new physician assistant programs and the maximum capacity of all programs has increased on average by 17%. Programs are typically 26 months and offer a Master's Degree. Annually, there are an estimated 6035 physician assistant graduates. Additional data from the survey will be presented.

New measures on PA practice provide information on 36 variables including key demographic and practice information related to geographic distribution, employment history, and description of primary and secondary clinical positions. These data describe PA and supervising physician specialty and type of practice, proportion of time spent in activities (i.e. direct patient care and indirect services); patient services (i.e. diagnosis, treatment and care coordination), payer mix, plans for continued employment and salary information. As of December 31st, 2012, 55,066 (61%) of certified PAs have completed their "PA Profile" with the remainder expected to complete by the end of 2013, based on a two-year certification maintenance cycle. Analysis of the current sample reveals it is representative of the total population of certified PAs. Specific findings on key variables will be reported at the conference.

Evolving care models require providers to accommodate to new standards of accountability focused on efficiency, sustainability and quality of care. New models of inter-professional practice promote the utilization of physician assistants in physician led teams. Armed with pipeline and graduate data, policy makers will be positioned to ensure all patients have access to high quality, effective care.