Characteristics of Primary Care Office Visits to Physician Assistants, Nurse Practitioners, and Physicians in the VA, 2005-2010

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Background: Given the predicted shortfall of primary care physicians and the growing role of physician assistants (PAs) and nurse practitioners (NPs) in the US health workforce, analyses of PA and NP roles and impacts are needed to help health system administrators, health professions educators, and workforce planners determine the numbers and types of providers needed to meet the nation’s needs.

The Department of Veterans’ Affairs has been a frontrunner in utilization of PAs and NPs. Evaluation of the roles and impact of PAs and NPs in the VA is critical to ensuring optimal care for American veterans and may inform best practices for use of PAs and NPs in other settings.

This project uses national data from the Veterans Administration to compare characteristics of primary care patients and patient visits attended by PAs, NPs or physicians and examines whether these characteristics became more similar between 2005-2010. In particular, we examine the assumption that PAs and NPs see patients who are less medically complex than those seen by physicians.

Research questions:
1. What are the trends in use of PAs, and NPs in VA primary care between 2005 and 2010?
2. How do patients and patient encounters attended by PAs and NPs compare with those attended by physicians?

Methods: This project used national electronic medical record data from the Veterans Administration from 2005-2010. For 2010, the sample consists of 11 million primary care encounters, with 7.7 million physician encounters, 2 million nurse practitioner encounters, and 890,000 PA encounters.

Results: A substantial proportion (28-30%) of VA primary care encounters are attended by PAs and NPs, and this proportion was stable from 2005-2010. Nurse practitioners attend approximately twice as many VA primary care encounters as PAs. Most VA primary care encounters record only one provider type. Use of PAs and NPs in VA primary care varies widely by region. Characteristics of patients and encounters are similar for physicians, PAs, and NPs in VA primary care clinics. The primary difference found is that PAs perform slightly more general medical exams for purposes of determining disability than do physicians or NPs.

Implications: VA data is a promising source for research on care by PAs and NPs. Other sources show recent growth in VA employment of PAs and NPs. Since we did not find an increase in numbers of primary care PA and NP visits, these new employees may be working in specialty care. Currently, PAs, NPs, and physicians seem to fill similar roles in VA primary care clinics. Additional research is needed to examine whether this is the most effective and efficient division of labor.

Future work: This project lays the groundwork for our future work, to include person-level analysis comparing patient characteristics by assigned primary care provider type, analysis of primary care team
composition and division of labor, and comparison of continuity of care, person-level resource use, and outcomes by primary care provider type.