POLICY DEVELOPMENT:

Advanced Practice Provider Survey

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Advanced Practice Providers: Results of the 2020 Survey

This summary report was prepared for the Bureau of Health Planning and Resources Management in the Division of Public Health at the Delaware Department of Health and Social Services by Rebecca Gross and Edward Ratledge from the University of Delaware.
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&

Dr. Susan Conaty-Buck of the University of Delaware

for their time and professional guidance.
Objectives of the presentation

1. Review DE APP characteristics
2. Explore employment activities of DE APPs
3. Discuss DE APP perceptions of professional strengths and barriers to practice
4. Examine care of patients with chronic illnesses provided DE APPs
# Background of the Survey

## Purpose

The 2020 survey is a follow up to the 1998 survey of Delaware Advanced Practice Providers (APPs). These included Delaware Physician Assistants and Nurse Practitioners.

## Expand

Collect data from an expanded group of APPs in 2020 to include:

- Certified Nurse Practitioners
- Certified Nurse Anesthetists
- Certified Nurse Midwives
- Clinical Nurse Specialists
- Physician Assistants

## Goal

Capture more detailed data on:

- Practice activities of APPs
- Preparation for practice
- Working conditions and satisfaction of APPs
- Types of care provided to Delawareans by APPs
- Chronic disease care delivered by APPs in Delaware
2,649 APPs were contacted by mail to complete an online survey (March to June 2020)

532 APPs responded for a response rate of 20%

Respondents were contacted up to 3 times and were given additional options of completing a paper survey or an electronic survey (PDF) sent to them via email

Each respondent was assigned a unique identifier number used in place of any personal information that could be used to identify respondents on the master mailing list

The de-identified dataset is stored in an electronic format
### Demographics of the respondents

- **532 APPs**
- **420** employed in Delaware as FT, PT or on-call providers

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>87%</td>
</tr>
<tr>
<td>Male</td>
<td>13%</td>
</tr>
</tbody>
</table>

- Median age of respondent was **52.6 years**
- Age breakdown: 16% over 65, 25% were 55-65, 26% were 40-55, 18% were 25-40 (15% did not answer)

- 63% expect to be active in healthcare delivery five years from now
- Only 15% of these are over 65
About 60% fell within three focus areas:

- Family practice (41%)
- Pediatric/Child health practice (8%)
- Anesthetist (11%)

17% of respondents selected “Other” as an answer choice (responses included Acute care, Emergency Medicine, General Medicine or no specialization)

99% of respondents were licensed in Delaware.
Respondents had additional licenses in:

- New Jersey (10%)
- Pennsylvania (28%)
- Maryland (21%)
- Virginia (2%)
- Other surrounding states including New York (7%)

57% report being employed full-time
16% reported working part-time (<36 hours per week)
8% reported working in part-time, temporary/on-call positions (PRN)

Those who reported working in full-time positions in another state accounted for 10% of the respondents. Of these, 2% indicated they were employed in a health-related field, 4% were retired while 2% were simply unemployed.
Certifications of the respondent group

- Certified Nurse Practitioners: 61%
- Certified Nurse Anesthetists: 10%
- Certified Nurse Midwives: 2%
- Clinical Nurse Specialists...
- Physician Assistants: 20%
- Certified Nurse Practitioners: 61%
### Hours worked per week:

- 27% of respondents worked 30 hours or less
- 33% of respondents worked 31 to 40 hours
- 31% of respondents worked 41 to 50 hours
- 9% of respondents worked more than 50 hours

### Time devoted to direct patient care:

- 26% of respondents assigned all their time to primary care
- 39% assigned all their time to specialty care
- 25% split their time between two or three categories
What type of patients do APPs serve?

Other responses include Specialty Care such as Surgery, Emergency Medicine, Orthopedics, Urgent Care, Cardiology, and many others.
88% of APPs who are working in a clinical setting in DE are providing direct patient care

55% provide care at a single site
25% provide care at 2 sites
20% are at 3 or more sites

31% of APPs are in a hospital setting
21% are in group practices
10% are in individual practices

49% of APPs that work in a DE clinical setting and provide direct care but do not provide primary care

77% of APPs report prescribing controlled substances
14% prescribe MAT
75% of APPs provide care to patients on Medicare.  
87% provide care to patient on Medicaid

30% of APPs work in a practice that is part of an Accountable Care Organization

96% report not having any plans to transition to offer concierge services

3% are currently involved in concierge/direct pay models
31% indicated their salary is lower than other health care related fields

30% feel there is a lack of public knowledge about APPs

30% report a lack of understanding/differentiation of all APP roles by other health professionals

21% feel there is a lack of understanding of the insurance system

80% of APPs selected at least 1 barrier to their practice
<table>
<thead>
<tr>
<th>Percentage of Respondents</th>
<th>Barriers Faced by Advanced Practice Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>31.4%</td>
<td>Salary lower than other health care related fields</td>
</tr>
<tr>
<td>29.8%</td>
<td>Lack of public knowledge about Advanced Practice Providers</td>
</tr>
<tr>
<td>27.9%</td>
<td>Lack of understanding/differentiation of all Advanced Practice Provider roles by other health professionals</td>
</tr>
<tr>
<td>21%</td>
<td>Lack of understanding of the insurance system</td>
</tr>
<tr>
<td>19.5%</td>
<td>No barriers</td>
</tr>
<tr>
<td>16.7%</td>
<td>Resistance from physicians</td>
</tr>
<tr>
<td>16%</td>
<td>Expected to assume other/administrative functions</td>
</tr>
<tr>
<td>13.1%</td>
<td>Poor reimbursement from commercial payers</td>
</tr>
<tr>
<td>12.1%</td>
<td>Legislative barriers to fulfilling Physician Assistant roles</td>
</tr>
<tr>
<td>11.9%</td>
<td>Other</td>
</tr>
<tr>
<td>11.7%</td>
<td>Poor reimbursement from Medicare</td>
</tr>
<tr>
<td>11.7%</td>
<td>Poor reimbursement from Medicaid</td>
</tr>
<tr>
<td>11.4%</td>
<td>Inadequate benefits</td>
</tr>
<tr>
<td>11.1%</td>
<td>Limitations on types of services reimbursed</td>
</tr>
<tr>
<td>9.3%</td>
<td>Lack of positions for Advanced Practice Providers</td>
</tr>
<tr>
<td>8.6%</td>
<td>High cost of malpractice insurance</td>
</tr>
<tr>
<td>7.1%</td>
<td>Lack of adequate educational preparation to function as expected</td>
</tr>
<tr>
<td>6.4%</td>
<td>Lack of experience to function as expected</td>
</tr>
<tr>
<td>6.4%</td>
<td>Lack of physician backup</td>
</tr>
<tr>
<td>5.5%</td>
<td>Resistance from registered nurses</td>
</tr>
<tr>
<td>2.4%</td>
<td>Overabundance of Advanced Practice Providers</td>
</tr>
<tr>
<td>1.2%</td>
<td>Surplus of physicians</td>
</tr>
<tr>
<td>0.00%</td>
<td>Inability to obtain malpractice insurance</td>
</tr>
</tbody>
</table>
Barriers APPs face when providing care for chronic care patients

- 66% indicate the “cost of medications” as frequent or constant barriers
- 66% indicate the patient’s “adherence to resources” as a frequent or constant barrier
- 67% indicate a patient’s “low health literacy” as a frequent or constant barrier
- Language barriers are reported as rare or none by 81% of APPs
- 54% indicate “insurance restrictions” as a frequent or constant barrier
<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>I do not provide care for children, only adults</td>
<td>(52%)</td>
</tr>
<tr>
<td>I am not trained in caring for children with complex medical needs</td>
<td>(6%)</td>
</tr>
<tr>
<td>I am not comfortable providing specialized care required by children</td>
<td>(7%)</td>
</tr>
<tr>
<td>with complex medical needs</td>
<td></td>
</tr>
<tr>
<td>No children with complex medical needs have presented in my practice</td>
<td>(20%)</td>
</tr>
<tr>
<td>Other</td>
<td>(14%)</td>
</tr>
</tbody>
</table>
When discussing typical cancer screenings with patients, APPs report “sometimes” or “usually” in response to patients’ perceptions:

**Breast cancer screenings**
- 70% report that the patient perceives this kind of cancer as a serious threat
- 28% report patients refuse breast cancer screening discussions

**Cervical cancer screenings**
- 60% report that the patient perceives this kind of cancer as a serious threat
- 37% report patients don’t understand information about this screening

**Lung cancer screenings**
- 76% report the patient perceives this kind of cancer as a serious threat
- 65% report patients are unaware of lung cancer screenings

**Colorectal cancer screenings**
- 67% that the patient perceives this kind of cancer as a serious threat
- 49% report patients refuse colorectal screening discussions
APP
Knowledge of Smoking Cessation Services

Smoking Cessation Options in Delaware

<table>
<thead>
<tr>
<th>Service</th>
<th>Aware and Referred</th>
<th>Aware but did not Refer</th>
<th>Not Aware</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-800-QUIT-NOW</td>
<td>53</td>
<td>16</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>DE Quitline</td>
<td>55</td>
<td>13</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td><a href="http://www.quitsupport.com">www.quitsupport.com</a></td>
<td></td>
<td>20</td>
<td>14</td>
<td>18</td>
</tr>
</tbody>
</table>
Delaware currently licenses 2,649 individual APPs. Of these, 244 providers are either retired, unemployed, or employed outside of a health-related field. The total number of APPs working as an APP within Delaware is 2,140. Another 265 APPs are employed full-time in another state.

There were indications that APPs work may be allocated less efficiently than desirable. 10% of APPs report not engaging in any direct patient care and 48% report that a quarter of their workload is spent on practice management/paperwork, suggesting that some review is needed.

Nearly 30% of APPs pointed to a lack of understanding about how APPs should be utilized, and 16% were concerned about the administrative tasks they were asked to assume.

Today, 42% of the APPs are under 50 years of age. APPs between 50 and 69 years of age account for 55% of the group. It appears that there is a need to recruit and train a significant number of new APPs and encourage existing experienced nurses to be trained to meet this need.

The data suggests that a significant portion of the current group of APPs (37%) is expecting to leave the field in the next five years. Given that 59% of APPs are age 50 or older, it may be prudent to increase efforts to recruit the younger cohort and improve retention rates for existing APPs.

To ensure the workforce matches the growing need for APPs, it is recommended DPH monitor trends in this workforce on an annual basis.
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The report can be accessed at:  
advancedpracticeprovreport.pdf (delaware.gov)

Thank you for your interest in this topic. We appreciate any questions or observations.