

## POLICY BRIEF

# Most Family Physicians Work Routinely With Nurse Practitioners, Physician Assistants, or Certified Nurse Midwives

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**The U.S. physician workforce is struggling to keep pace with the demand for health care services, a situation that may worsen without efforts to enhance team-based care. More than half of family physicians work with nurse practitioners, physician assistants, or certified nurse midwives, and doing so helps ensure access to health care services, particularly in rural areas. (J Am Board Fam Med 2013;26:244–245.)**

As more people become insured with the implementation of the Affordable Care Act, an increase in demand for primary care services may not be sufficiently met by the physician workforce.<sup>1</sup> NPs, PAs, and CNMs already augment the physician workforce. Between 1999 and 2009 the number of physician offices whose teams included at least one of these clinicians increased from 25% to nearly 50%.<sup>2,3</sup> Better understanding of this trend is important to health workforce planning in response to increased access needs. Identifying these relationships is also important when studying their association with health outcomes.

We used data from a survey conducted by the American Board of Family Medicine (ABFM) in September and October of 2011. During the survey, any physician accessing their online physician portfolio on the ABFM website had to complete a brief survey. We used a question asking, “Do you routinely work with nurse practitioners, physician assistants, or certified nurse mid-

wives?” to gauge family physician collaboration with these clinicians.

In this 2-week period, 5818 family physicians residing in the 50 United States completed the survey. Compared with other family physicians in the ABFM database, those in the sample were slightly younger, more likely to be women, and more likely to be currently board certified and to have completed more Maintenance of Certification activities than those not in the sample. Nearly 60% of respondents reported routinely working with NPs, PAs, or CNMs. Physicians more likely to work with these clinicians were younger and live in rural areas (Table 1).

**Table 1. Family Physicians Routinely Working with Nurse Practitioners (NPs), Physicians Assistants (PAs), or Certified Nurse Midwives (CNMs)**

Characteristics	Works With NPs, PAs, or CNMs	
	Yes (n = 3481; 59.8%)	No (n = 2337, 40.2%)
Mean age, yrs (SD)	47.7 (9.3)	48.3 (9.7)*
Male sex	57.8	57.4
MD vs. DO	90.9	90.7
Currently Board certified	96.5	96.5
Urban	77.4	85.2*
Large rural	11.0	8.4*
Small rural	7.5	4.2*
Isolated	4.1	2.2*

Values provided as percentages unless otherwise indicated.

\* $P < .05$ .

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These data suggest that the number of family physicians routinely working with NPs, PAs, and CNMs is continuing to increase. As in previous studies, physicians working in rural areas were more likely to work with these clinicians.<sup>2,3</sup> Teams of family physicians and NPs, PAs, and CNMs working together within the patient-centered medical home model are likely essential to meeting the future health care needs of all Americans. Such teams may help alleviate patient access to health care issues due to the projected shortage of primary care physicians.<sup>1</sup>

## References

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